



**The Illinois Department of Corrections**

1301 Concordia Court, P.O. Box 19277 • Springfield, IL 62794-9277 • (217) 558-2200 TDD: (800) 526-0844

April 21, 2022

Sheriff Robert Burns  
Jackson County Jail  
1001 Mulberry St  
Murphysboro, IL 62966

County Clerk Frank L. Byrd  
1001 Walnut St  
Murphysboro, IL 62966

Sheriff Burns and County Clerk Byrd:

A copy of our recent compliance monitoring report of the Jackson County Jail is enclosed. The *Illinois Compiled Statutes [730ILCS5/3-15-2(b)]* mandates the Illinois Department of Corrections to monitor each county jail annually and to make the results available for public review. Your offices should make this compliance monitoring report available for public review in the records of Jackson County and you are encouraged to give notice to the citizens of your county, by news release or other means, that this report is available for the public's review.

The Jail and Detention Standards Unit staff is available for consultation should you desire. Please call (217) 558-2200, extension 4212.

Sincerely,

Edwin R. (Bob) Bowen, Manager  
Jail and Detention Standards Unit

cc: County Board Chair C. J. Calandro  
Lieutenant Lee Kersten  
Specialist Kathy Melvin

ILLINOIS DEPARTMENT OF CORRECTIONS  
OFFICE OF JAIL AND DETENTION STANDARDS  
**County Jail Inspection Checklist**

April 21, 2022

Date of Inspection

P.O. Box 19277  
Springfield, Illinois 62794-9277  
217-558-2200 ext. 4212  
Fax: 217-558-4004

|                                    |                                       |                          |                     |
|------------------------------------|---------------------------------------|--------------------------|---------------------|
| <b>Name of Facility:</b>           | <u>Jackson County Jail</u>            | <b>Phone Number:</b>     | <u>618-687-2292</u> |
| <b>Address:</b>                    | <u>1001 Mulberry St</u>               |                          |                     |
| <b>City/State:</b>                 | <u>Murphysboro</u> <u>IL</u>          | <b>Zip Code:</b>         | <u>62966</u>        |
| <b>Sheriff:</b>                    | <u>Robert Burns</u>                   | <b>Phone Number:</b>     | <u>618-687-3822</u> |
| <b>Address:</b>                    | <u>1001 Mulberry St</u>               |                          |                     |
| <b>City/State:</b>                 | <u>Murphysboro</u> <u>IL</u>          | <b>Zip Code:</b>         | <u>62966</u>        |
| <b>Chairman,<br/>County Board:</b> | <u>C. J. Calandro</u>                 |                          |                     |
| <b>Address:</b>                    | <u>1001 Walnut St</u>                 |                          |                     |
| <b>City/State:</b>                 | <u>Murphysboro</u> <u>IL</u>          | <b>Zip Code:</b>         | <u>62966</u>        |
| <b>Chief Judge:</b>                | <u>William J. Thurston</u>            | <b>Judicial Circuit:</b> | <u>1st</u>          |
| <b>Address:</b>                    | <u>200 W. Jefferson St, Suite 260</u> |                          |                     |
| <b>City/State:</b>                 | <u>Marion</u> <u>IL</u>               | <b>Zip Code:</b>         | <u>62959</u>        |
| <b>Resident Judge:</b>             | <u>Christy Solverson</u>              |                          |                     |
| <b>Address:</b>                    | <u>P. O. Box 388</u>                  |                          |                     |
| <b>City/State:</b>                 | <u>Murphysboro</u> <u>IL</u>          | <b>Zip Code:</b>         | <u>62966</u>        |
| <b>Jail<br/>Superintendent:</b>    | <u>Lieutenant Lee Kersten</u>         |                          |                     |

**Officials and titles interviewed, other than above:** Sergeant Kyle Spradling

**Date of construction:** 1990 **Date of last renovation:** 2013

|                                                                   |                   |                     |                                                  |
|-------------------------------------------------------------------|-------------------|---------------------|--------------------------------------------------|
| <b>Capacity:</b>                                                  | Total: <u>199</u> | Male: <u>175</u>    | Female: <u>24</u>                                |
|                                                                   |                   | Juv. Male: <u>0</u> | Juv. Female: <u>0</u>                            |
| <b>Inspection date pop.:</b>                                      | Total: <u>162</u> | Male: <u>140</u>    | Female: <u>22</u>                                |
|                                                                   |                   | Juv. Male: <u>0</u> | Juv. Female: <u>0</u>                            |
| <b>Number of cells:</b>                                           | Single: <u>1</u>  | Double: <u>45</u>   | Other: <u>3/12 person dorms, 1/8 person dorm</u> |
| <b>Number of detention rooms:</b>                                 | Single: <u>0</u>  | Double: <u>0</u>    | Other: <u>_____</u>                              |
| <b>Employees specifically<br/>assigned full-time jail duties:</b> | Male: <u>30</u>   | Female: <u>4</u>    |                                                  |
| a. <b>Part-time jail officers:</b>                                | Male: <u>2</u>    | Female: <u>0</u>    |                                                  |
| b. <b>Non-jail staff persons:<br/>performing jail duties:</b>     | Male: <u>0</u>    | Female: <u>0</u>    |                                                  |

ILLINOIS DEPARTMENT OF CORRECTIONS  
OFFICE OF JAIL AND DETENTION STANDARDS  
**County Jail Inspection Checklist**

**YES                      N/A                      NO**

Has the jail been approved to hold detainees who are under 18 years of age? ☒                      ☐                      ☐

Has the jail held detainees who are under 18 years of age since the last inspection conducted on the jail? ☒                      ☐                      ☐

Were the detainees under 18 years of age held in the jail since the last inspection separated by sight and sound at all times from other jail detainees 18 years of age and older? ☒                      ☐                      ☐

**701.10      ADMINISTRATION**

1. Are full-time jail officers trained in accordance with current law? ☒                      ☐                      ☐

a. Are jail officers trained in security and emergency procedures? ☒                      ☐                      ☐

b. Is staff training documented? ☒                      ☐                      ☐

2. Has a written jail procedures manual been established? ☒                      ☐                      ☐

3. Are emergency procedures (evacuations, riots, escapes, control devices, medical emergencies including suicide prevention and crisis intervention, severe weather, natural disasters and bomb threats) part of the manual? ☒                      ☐                      ☐

4. Is a comprehensive duty description of each jail post available in writing and furnished to each employee performing the function? ☒                      ☐                      ☐

5. Are all jail records required by law maintained and available for examination? ☒                      ☐                      ☐

6. Is discrimination and harassment of employees and detainees prohibited? ☒                      ☐                      ☐

7. Has a code of conduct for jail staff been established? ☒                      ☐                      ☐

8. Does staff training include first aid, CPR and identification of signs and management of detainees with a mental illness or a developmental disability? ☒                      ☐                      ☐

9. Do jail officers and other personnel assigned to correctional duties receive annual training conducted by or approved by mental health professionals on suicide prevention and mental health issues? ☒                      ☐                      ☐

10. Do jail officers that have contact with juvenile detainees receive additional training specific to juvenile issues within correctional settings, as approved by the Illinois Law Enforcement Training Standards Board? ☒                      ☐                      ☐

**701.20      PERSONNEL**

1. Are sufficient personnel assigned to provide 24 hour supervision of detainees? ☒                      ☐                      ☐

2. Has a jail administrator been appointed when the average daily population exceeds 25? ☒                      ☐                      ☐

3. Is the appointed Jail Administrator qualified by training and experience? ☒                      ☐                      ☐

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**YES                      N/A                      NO**

- |                                                                                                                                                                                         |                                     |                                     |                          |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|--------------------------|
| 4. When each floor of detention has 15 or more detainees, is there one officer assigned to each floor?                                                                                  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 5. Is same gender supervision provided during periods of personal hygiene activities such as showering and toileting, when feasible?                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| 6. Do jail officers working in direct contact with detainees have a thorough knowledge of the personnel rules and emergency procedures of the jail which has been documented?           | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| 7. Are jail officers thoroughly acquainted with all security features of the jail and the location and use of all emergency equipment and first aid supplies which has been documented? | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| 8. Are jail officers prohibited from recommending or furnishing advice concerning the retention of a specific lawyer?                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| 9. Is a list of local lawyers made available?                                                                                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |

**701. 30    RECORDS**

- |                                                                                                                 |                                     |                          |                          |
|-----------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|
| 1. Are booking and personal records maintained for each detainee?                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Is the monthly jail population report forwarded to the Jail and Detention Standards Unit in a timely manner? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Are extraordinary or unusual occurrences properly reported?                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**701. 40    ADMISSION PROCEDURES**

- |                                                                                                                                                                   |                                     |                          |                          |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|
| 1. Are Notices of Rights and Jail Rules conspicuously posted in all receiving rooms and common areas?                                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Are detainees given an immediate pat down search?                                                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Do receiving jail officers determine the legality of confinement?                                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Is the identity of the person being detained verified?                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Are detainees fingerprinted and photographed in accordance with current law?                                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Are seriously injured, seriously ill or unconscious persons given a medical examination by a licensed physician or a medical staff member prior to detainment? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Are detainees strip searched?                                                                                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Is the search conducted in privacy?                                                                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Is the search conducted by a person of the same gender?                                                                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Is personal clothing searched?                                                                                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Is probing of body cavities prohibited unless reasonable suspicion of contraband exists?                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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|                                                                                                                                                                                                                       | YES                                 | N/A                      | NO                       |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|
| a. Is the body cavity search conducted by medically trained personnel?                                                                                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Is the body cavity search conducted in a private location under sanitary conditions?                                                                                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. When an item of personal property is taken from a detainee, including medication, is the item identified and described on a property receipt in the presence of the detainee?                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Do property receipts contain the signatures of the admitting officer and the detainee?                                                                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Is the original property receipt placed in the detainee's personal record and a duplicate given to the detainee?                                                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Is personal property securely stored?                                                                                                                                                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. If personal property is released to a third party, is a written release containing the detainee's authorizing signature and signature of the receiving individual obtained and kept as part of the jail's records? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Is there a policy for the disposal of abandoned property?                                                                                                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Are detainees allowed to make a reasonable number of completed telephone calls as soon as practicable?                                                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Are the dates and times of telephone calls made during the admission process documented?                                                                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. Does the admitting officer observe detainees for any obvious injuries or illnesses requiring emergency medical care?                                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. Does the admitting officer question detainees to determine if the detainee has any medical condition which requires medical attention?                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Does the admitting officer question detainees regarding past treatment for mental disorders, mental illness, developmental disabilities or dual diagnosis?                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Does the admitting officer question detainees regarding an imminent risk of self-harm by use of an approved screening instrument or history of medical illness?                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Does the admitting officer question detainees to determine if the detainee is on medication?                                                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Does the admitting officer question female detainees to determine if they are pregnant?                                                                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 15. When a detainee shows signs of or reports unusual physical or mental distress, is the detainee referred to health care personnel as soon as possible?                                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 16. Are all mental health screenings conducted either by an assessment of a mental health professional or by an assessment of a jail officer using an approved screening instrument for assessing mental health?      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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|                                                                                                                                                                                                                                                                                                           | YES                                 | N/A                      | NO                       |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|
| 17. Are detainees exhibiting psychiatric symptoms such as acute psychotic features, mood disturbances or who have a known psychiatric history evaluated by a mental health professional?                                                                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 18. Are detainees exhibiting suicidal behavior or ideations placed in a reasonable level of care that provides for their safety and stability?                                                                                                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 19. Is any medication in a detainee's possession at the time of admission withheld until identification and verification of the proper use of the medication is obtained and documented by a licensed medical professional?                                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 20. Does medical staff obtain verification of the proper use of medication in the detainee's possession at the time of admission as soon as possible, but no later than the time interval specified for the next administration of the medication as provided on the medication's prescription container? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 21. Is a record established for each detainee at the time of admission and maintained for the duration of the period of confinement?                                                                                                                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Does the record contain the required information?                                                                                                                                                                                                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 22. Is a medical record part of the detainee's personal record?                                                                                                                                                                                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Does the medical record contain the health and physical condition, including treatment and medication administered to the detainee:                                                                                                                                                                    |                                     |                          |                          |
| (1) Upon admission?                                                                                                                                                                                                                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| (2) During confinement?                                                                                                                                                                                                                                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| (3) Upon release?                                                                                                                                                                                                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 23. Is medication administered as prescribed?                                                                                                                                                                                                                                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 24. Does the record contain an itemized record of the detainee's cash and other valuables, expenditures and receipts while in custody?                                                                                                                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 25. Is a record of authorized absences from the jail part of the detainee record?                                                                                                                                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 26. Is a record of visitors' names and dates of visits maintained?                                                                                                                                                                                                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 27. Is a record of each detainee's misconduct and any subsequent discipline administered maintained?                                                                                                                                                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 28. Is a record of case disposition, judge and court maintained?                                                                                                                                                                                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 29. Is immediate treatment initiated upon detection of body pests?                                                                                                                                                                                                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 30. Are all detainees required to take an admitting shower?                                                                                                                                                                                                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 31. Are detainees assigned to suitable quarters?                                                                                                                                                                                                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 32. Are detainees issued clean bedding, a towel, necessary clothing and soap?                                                                                                                                                                                                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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**County Jail Inspection Checklist**

|                                                                          | YES                                 | N/A                      | NO                       |
|--------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|
| a. Does bedding include a mattress cover?                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Are flame-retardant mattresses issued?                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Is bed covering appropriate to the season?                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Is the towel made of cloth and of bath size?                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 33. Are detainees permitted to purchase toothbrushes and dentifrice?     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 34. Are detainees without funds issued such items by staff?              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 35. Are detainees held accountable for all jail property issued to them? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**701.50 ORIENTATION**

|                                                        |                                     |                          |                          |
|--------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|
| 1. Is an orientation given to each detainee?           | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Does orientation include all required information?  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Is special assistance given to detainees as needed? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**701.60 RELEASE PROCEDURES**

|                                                                                                                                            |                                     |                          |                          |
|--------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|
| 1. Is positive identification of each detainee made prior to discharge, transfer or release?                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Is a record made as to date, time and authority of each release of a detainee?                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Is each detainee given a physical inspection and a record made of wounds or injuries?                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Are detainees searched prior to release?                                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Are all personal property items inventoried and returned to the detainees?                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Is a written record retained that documents the name and amount of any maintenance medication released with a detainee?                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Is a copy of the itemized and signed personal property receipt maintained by the jail as a permanent record?                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Are detainees delivered to the custody of the Illinois Department of Corrections in accordance with <i>Illinois Compiled Statutes</i> ? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**DISCHARGE OF MENTALLY ILL DETAINEES**

|                                                                                                                                                               |                                     |                          |                          |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|
| 9. When a mentally ill detainee is released, is the detainee given a listing of community mental health resource addresses and telephone numbers?             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Is the detainee provided with the opportunity to receive a copy of his/her jail's mental health, medical and medication records?                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Does linkage and aftercare include a referral to a mental health provider, a prescription for medications or a two week supply of prescribed medications? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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**YES                      N/A                      NO**

**701.70      CLASSIFICATION AND SEPARATION**

- |                                                                                                                                                                                                 |                                     |                          |                          |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|
| 1. Is there a classification plan that specifies criteria and procedures for determining and changing the status of a detainee?                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Are required segregation policies followed?                                                                                                                                                  |                                     |                          |                          |
| a. Are female detainees separated by sight and sound from male detainees?                                                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Are witnesses separated from detainees charged with an offense?                                                                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. When possible, are non-criminal detainees separated from criminal detainees?                                                                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Are charged detainees segregated from convicted detainees?                                                                                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Are mentally ill, developmentally disabled, dually diagnosed or emotionally disturbed detainees housed or tiered as recommended by a mental health professional?                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Are suspected mentally ill, developmentally disabled, dually diagnosed or emotionally disturbed persons examined by a mental health professional?                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| g. Are detainees who have been determined by mental health professionals to be severely mentally ill, developmentally disabled or emotionally disturbed transferred to an appropriate facility? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Is detainee classification reviewed at least every 60 days?                                                                                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**701.80      HOUSING**

# of Floors of detention:      1  

- |                                                                                                                                                  |                                     |                          |                          |
|--------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|
| 1. Do cells provide at least 50 square feet of floor space with a minimum ceiling height of eight feet?                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Do detention rooms provide at least 64 square feet of floor space with a minimum ceiling height of eight feet?                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Are all cells and detention rooms designated for a maximum of double occupancy?                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Is each cell and detention room equipped with:                                                                                                |                                     |                          |                          |
| a. A rigidly constructed metal bed with solid or perforated metal bottom, securely anchored to the floor or wall or a concrete sleeping surface? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. A washbasin with piped hot and cold water?                                                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. A prison-type toilet?                                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Illumination sufficient for comfortable reading?                                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Tamper-proof light fixtures?                                                                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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|                                                                                                                                                                                                                                                                                                 | YES                                 | N/A                      | NO                       |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|
| f. A secured metal mirror?                                                                                                                                                                                                                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Do dormitories provide at least 50 square feet of floor space per occupant with a minimum ceiling height of 8 feet?                                                                                                                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Is each dormitory equipped with:                                                                                                                                                                                                                                                             |                                     |                          |                          |
| a. A rigidly constructed metal bed with solid or perforated metal bottom, securely anchored to the floor or wall for each detainee?                                                                                                                                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. A washbasin with piped hot and cold water for every eight occupants?                                                                                                                                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. A prison-type toilet for every eight occupants?                                                                                                                                                                                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. A shower with piped hot and cold water for every eight occupants?                                                                                                                                                                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Illumination sufficient for comfortable reading?                                                                                                                                                                                                                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Tamper-proof light fixtures?                                                                                                                                                                                                                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| g. Seating for each detainee?                                                                                                                                                                                                                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Do cells or detention rooms conform to current building and accessibility codes?                                                                                                                                                                                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Is a dayroom provided in conjunction for each cell block or detention room cluster?                                                                                                                                                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Does the day room area provide at least 35 square feet of floor space for each cell block and/or detention room cluster built prior to July 1 <sup>st</sup> , 1980?                                                                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Does the day room area contain no less than 35 square feet of floor space for each cell or detention room in the cell block or detention room cluster for each cell block or detention room cluster built since July 1, 1980 or in which major renovations have occurred since July 1, 1980? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Is adequate and appropriate seating provided for the number of detainees that make use of each dayroom?                                                                                                                                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Are showers provided in each cellblock area?                                                                                                                                                                                                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Is the jail comfortably heated or cooled according to the season?                                                                                                                                                                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Does the system eliminate disagreeable odors and routinely provide temperatures within the normal comfort zone?                                                                                                                                                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**701.90 MEDICAL AND MENTAL HEALTH CARE**

|                                                                                                 |                                     |                          |                          |
|-------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|
| 1. Are all required medical and mental health services available to detainees?                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Is a medical doctor available to attend to the medical and mental health needs of detainees? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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|                                                                                                                                                                                         | YES                                 | N/A                      | NO                       |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|
| 3. If no mental health professional is on staff, are professional mental health services secured through linkage agreements with local and regional providers or independent contracts? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. If so, are linkage agreements and credentials of independent contractors documented?                                                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Is approved mental health training provided to jail officers and other personnel primarily assigned to correctional duties on suicide prevention and mental health issues?           | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Does suicide prevention training include:                                                                                                                                            |                                     |                          |                          |
| a. The nature and symptoms of suicide?                                                                                                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. The specifics of identification of suicidal individuals through the recognition of verbal and behavioral cues?                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Situational stressors?                                                                                                                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Evaluation of detainee coping skills?                                                                                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Other signs of potential risk?                                                                                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Monitoring?                                                                                                                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| g. Evaluation?                                                                                                                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| h. Stabilization?                                                                                                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| i. Referral of suicidal individuals?                                                                                                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Does mental health training include:                                                                                                                                                 |                                     |                          |                          |
| a. The nature of mental illness?                                                                                                                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Symptoms of mental illness?                                                                                                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Specifics of identification of mentally ill individuals through the recognition of verbal and behavioral cues?                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Situational stressors?                                                                                                                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Evaluation of detainee coping skills, and other signs of potential risk?                                                                                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Monitoring of mental illness?                                                                                                                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| g. Evaluation of mental illness?                                                                                                                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| h. Stabilization of mental illness?                                                                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| i. Referral of the mentally ill detainee?                                                                                                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Have arrangements been made for detainees to have access to emergency dental care?                                                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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|                                                                                                                                                                                                                                                                                               | YES                                 | N/A                                 | NO                                  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|
| 9. General medical services are provided by (select all that apply):                                                                                                                                                                                                                          |                                     |                                     |                                     |
| <input checked="" type="checkbox"/> Staff physicians                                                                                                                                                                                                                                          |                                     |                                     |                                     |
| <input type="checkbox"/> Contractual services                                                                                                                                                                                                                                                 |                                     |                                     |                                     |
| <input checked="" type="checkbox"/> A nearby hospital                                                                                                                                                                                                                                         |                                     |                                     |                                     |
| 10. Are detainees suspected of having communicable diseases immediately referred to appropriate medical staff and isolated?                                                                                                                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 11. Are detainees given a medical screening by a medical doctor, a physician's assistant, a nurse practitioner, a registered nurse or a licensed practical nurse within 14 days after confinement?                                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 12. Is a schedule for daily sick call established?                                                                                                                                                                                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| a. Are the names of those detainees reporting to sick call recorded in the medical log?                                                                                                                                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| b. Are detainees with emergency complaints attended to as quickly as possible?                                                                                                                                                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| c. Has the attending physician provided written approval for non-medical staff to issue over-the-counter medication at the request of the detainee?                                                                                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 13. Are detainee medical and mental health treatment logs maintained?                                                                                                                                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| a. Is all the treatment and medication prescribed recorded including date and time of treatment and medication is administered?                                                                                                                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| b. Is a written record kept of all detainees' special diets?                                                                                                                                                                                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 14. Are all medications securely stored?                                                                                                                                                                                                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 15. Is a jail officer present when a physician or other medical personnel attend to detainees at the jail?                                                                                                                                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 16. Are proper precautions taken to ensure detainees actually ingest received medication?                                                                                                                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 17. Before a detainee may be approved by the jail administrator to retain lifesaving medication on his or her person, is there consultation with and concurrence by a physician or other medical professional with the safety and security of the jail and detainee taken into consideration? | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 18. Are detainees prohibited from having access to medical supplies, patients' records and medications?                                                                                                                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 19. Has at least one member of the jail staff on each shift successfully completed and subsequently received biannual recertification from a recognized course in first aid training which included cardiopulmonary resuscitation (CPR)?                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 20. Is there a proper stock of first aid supplies available to staff?                                                                                                                                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 21. Is there a TB isolation room?                                                                                                                                                                                                                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| a. Is proper air supply maintained?                                                                                                                                                                                                                                                           | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |

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| YES                      | N/A                                 | NO                       |
|--------------------------|-------------------------------------|--------------------------|
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

**701.100 CLOTHING, PERSONAL HYGIENE, AND GROOMING**

|                                                                                                                                               |                                     |                          |                          |
|-----------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|
| 1. Are mechanical washing and drying equipment and cleaning agents provided when detainees are required to supply and wear personal clothing? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Is clean clothing issued at least twice weekly when clothing is provided by the jail?                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Are detainees without funds provided with necessary equipment and articles to maintain proper grooming and hygiene?                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Are detainees allowed to shower or bathe at least three times weekly?                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Are detainees allowed to shave daily?                                                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Are females provided with shaving supplies appropriate for personal hygiene needs?                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Are barber and beautician services available?                                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Are female detainees provided with necessary articles for personal hygiene?                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**701.110 FOOD SERVICES**

Meal service type (select all that apply):

- ☐ Contract for catered food service.
- ☐ Provide frozen or otherwise pre-prepared meals that have been processed by the procedure required to produce a condition suitable for consumption.
- ☒ Food preparation and service in an on-site kitchen with food service staff who are employees of the facility.

Menu on day of inspection:

Breakfast: waffles, sausage, grits, donut holes, milk

Lunch: goulash, green beans, bread (x2), cupcake, tea

Dinner: peanut butter & jelly sandwich, chips, graham crackers, snack cake, milk

|                                               |                                     |                          |                          |
|-----------------------------------------------|-------------------------------------|--------------------------|--------------------------|
| 1. Are meals of sufficient nutritional value? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Does food quantity appear sufficient?      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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|                                                                                                                                                                                                                                                       | YES                                 | N/A                                 | NO                                  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|
| 3. Are meals served at appropriate intervals?                                                                                                                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 4. Is a drink, other than water, served with each meal?                                                                                                                                                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 5. Is at least one complete, balanced and hot meal served each 24 hours?                                                                                                                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 6. Are special meals adhered to when medically prescribed?                                                                                                                                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 7. If the food preparation and service is provided by an on-site kitchen, does at least one full-time cook employed by the facility have proper food service sanitation certification from the Illinois Department of Public Health?                  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 8. If the facility has contracted for catered food service, does the food service provider have proper food service sanitation certification from the Illinois Department of Public Health?                                                           | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 9. Are menu items substituted when a detainee's religious beliefs prohibit eating of particular foods?                                                                                                                                                | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| a. Do detainees submit written requests for alternative diets?                                                                                                                                                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| b. Are dietary restrictions confirmed with religious leaders?                                                                                                                                                                                         | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| 10. Are menus preplanned?                                                                                                                                                                                                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| a. Retained for at least 3 months?                                                                                                                                                                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| b. Diversified?                                                                                                                                                                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 11. Do food service operations conform to the <i>Food Sanitation Code</i> ?                                                                                                                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 12. Are food service trustees screened by medical staff?                                                                                                                                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 13. Are employees and trustees visually evaluated at the beginning of each shift and any individual found to have boils, infective wounds or respiratory infections cleared by medical staff before being permitted to work in any food service area? | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 14. Are kitchen trustees required to bathe and dress in clean clothing prior to their daily work shift?                                                                                                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 15. Is the jail cook or kitchen staff familiar with security aspects of jail operation, training and supervision of trustees?                                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 16. Are heated or insulated carts or trays used for transportation of food from the jail kitchen to detainees when a significant distance is involved?                                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 17. Are food and drinks protected from contaminants during preparation and delivery?                                                                                                                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 18. Are divided or compartmented trays used for meal service?                                                                                                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 19. Are eating utensils removed from detainee quarters soon after the meal is finished?                                                                                                                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 20. Are openings to the outside protected to prevent the entrance of rodents and insects?                                                                                                                                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |

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|                                                                                            | YES                                 | N/A                      | NO                       |
|--------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|
| 21. Are ranges, stoves and ovens equipped with accurate thermostats or temperature gauges? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 22. Is the kitchen equipped with:                                                          |                                     |                          |                          |
| a. A mechanical dishwasher?                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. A three-compartment sink?                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 23. Are dishes and trays drain dried?                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 24. Are dry goods properly stored?                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 25. Are refrigerators and freezers operated at appropriate temperatures?                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**701.120 SANITATION**

|                                                                                                               |                                     |                          |                          |
|---------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|
| 1. Are non-carpeted floors swept and mopped with detergent or a germicidal agent at least once daily?         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Are germicidal cleaning agents used on all floors in the toilet, shower and food service areas?            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Are the windows clean?                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Are openings to the outside effectively protected to prevent the entrance of rodents and insects?          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Is ventilation sufficient to provide at least 10 cubic feet of air per minute per person?                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Are walls kept clear of etched or inscribed graffiti or writing?                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Is the jail free of trash and debris?                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Are cleaning implements and equipment cleaned, dried and securely stored after use?                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Are detainee work details supervised by a jail officer?                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Are toilets, washbasins, showers and sinks cleaned and sanitized daily?                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Is trash and garbage contained and disposed of in a sanitary manner?                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Is a source of drinking water provided in each cell and day room?                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. Is an adequate supply of clean clothing, bedding, towels, soap and cleaning equipment maintained?         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. Are sheets, pillowcases and mattress covers changed and washed at least once a week?                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 15. Are vinyl covered mattresses washed with hot water, detergent and disinfected monthly, or before reissue? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 16. Are blankets laundered or sterilized monthly, or before reissue?                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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|                                                                                                                            | YES                                 | N/A                                 | NO                       |
|----------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|--------------------------|
| 17. Are cotton or fiber-filled mattresses and mattress pads aired and spray-sanitized monthly, or before reissue?          | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 18. Are detainees issued a clean towel at least twice weekly?                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| 19. Are shaving and barber tools thoroughly cleaned, disinfected and secured?                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| 20. Are floors in rooms where food or drink are stored, prepared or served kept clean?                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| 21. Are all counters, shelves, tables, equipment and utensils in which food or drink comes in contact kept in good repair? | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| 22. Are utensils stored in a clean, dry place protected from flies, dirt, overhead leakage and condensation?               | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| 23. Are plumbing facilities in good working order?                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| 24. Are range cooking surfaces, hoods, vents and filters cleaned regularly?                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| 25. Are windows, walls and woodwork clean?                                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| 26. Are frequent inspections of living areas made for the control of body pests?                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| 27. Are immediate control or extermination measures taken when body pest infestation occurs?                               | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| 28. Does the jail have an established rodent, pest and vermin control program?                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |

**701.130 SUPERVISION**

|                                                                                                                                         |                                     |                                     |                          |
|-----------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|--------------------------|
| 1. Are sufficient jail officers present in the jail?                                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| 2. Is continuous 24-hour supervision provided in direct supervision housing?                                                            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 3. Are supervisory checks conducted at least once every 30 minutes and documented in the shift record for indirect supervision housing? | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| 4. Are all supervisory checks recorded by time, signed by the jail officer conducting the check and noted for any relevant remarks?     | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| 5. Are dormitories housing more than 25 detainees provided with continuous observation?                                                 | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 6. Do radio operators who conduct 30 minute personal observation checks have jail officer training?                                     | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 7. Are detainees prohibited from having control or authority over anyone?                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| 8. Are detainees locked in their individual cells between designated times of lights out and arising in the morning?                    | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |

Time of lights out: 11:00pm

**701.140 SECURITY**

|                                                                   |                                     |                          |                          |
|-------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|
| 1. Are detainees searched prior to exiting and entering the jail? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|-------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|

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|                                                                                                                                                                                                                       | YES                                 | N/A                      | NO                       |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|
| 2. Are jail officers and other personnel assigned to jail duty trained in security measures?                                                                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Are detainees prohibited from exercising control of security measures?                                                                                                                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Are all locks, doors, bars, windows and other security equipment frequently inspected?                                                                                                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Are all cell block doors and doors opening into a corridor kept locked?                                                                                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Are security vestibule doors opened one at a time?                                                                                                                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Are all unoccupied cells and rooms kept locked at all times?                                                                                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Are backup personnel available when doors to living quarters are opened?                                                                                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Are glass and unsecured metal items prohibited in the detention area?                                                                                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Are trustees carefully supervised and not permitted unrestricted movement?                                                                                                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Are detainees who present special security concerns checked more frequently than 30 minutes?                                                                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Is a master population record, locator board or computer printout indicating the various jail sections and housing assignments maintained at the control center?                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. Are keys inventoried and documented at the beginning of each shift?                                                                                                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. Are random, unannounced shakedowns of detainees and jail and detention areas conducted?                                                                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Frequency: <u>bi-weekly</u>                                                                                                                                                                                           |                                     |                          |                          |
| 15. Are bars, walls, windows and floors of the jail regularly and frequently inspected and kept clear of posters, pictures, calendars and articles of clothing that obstruct direct observation of detainee activity? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 16. Are tools and equipment inventoried and securely stored?                                                                                                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 17. Are eating utensils accounted for after each meal?                                                                                                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 18. Is damaged or nonfunctioning security equipment promptly repaired?                                                                                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 19. Are detainees prohibited access to all jail records?                                                                                                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 20. Is a physical head count made and recorded at least three times daily?                                                                                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 21. Is a record of all keys inventoried and issued maintained?                                                                                                                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Are keys not in use stored in a secure key locker?                                                                                                                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Is one full set of keys, separate from those in current use, securely stored in a separate area accessible to designated jail staff for use in the event of any emergency?                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Are all detainees, including trustees, not permitted to handle, use or possess jail keys of any type?                                                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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|                                                                                                                                                     | YES                                 | N/A                      | NO                       |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|
| 22. Are weapons prohibited in the secure section of the jail?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Are weapons secured in a locked drawer, cabinet or container outside of the security area?                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Are reserve firearms, ammunition, control devices and other protective equipment stored in a secure room?                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 23. Are persons authorized to use control devices trained in the proper employment of the device?                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Is the training documented?                                                                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. When control devices are used, is a record of the incident made?                                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Are detainees affected by control devices given a thorough medical examination and appropriate treatment after security control has been gained? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 24. Is an emergency electrical power source available?                                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Date last tested: April 5, 2022

Type: diesel generator

**701.150 SAFETY**

|                                                                                                                                                                                                                                                                        |                                     |                          |                          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|
| 1. Does the jail maintain written procedures covering response and drills for preparation of handling emergency situations that includes, but not limited to, natural disasters and mass evacuation of the jail and is documented training provided to all jail staff? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Is there at least one fire extinguisher for each 5,000 square feet of floor area?                                                                                                                                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Are fire extinguishers readily accessible to staff, but not detainees?                                                                                                                                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Are fire extinguishers examined at least once a year and tagged with date of inspection and initials of the inspector?                                                                                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Are all jail personnel familiar with the characteristics and operation of all types of fire extinguishers in the jail?                                                                                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Does the jail have a posted fire plan and evacuation procedures?                                                                                                                                                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Are simulated fire drills conducted?                                                                                                                                                                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Are all emergency exits known to jail personnel and exit keys immediately available?                                                                                                                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Are there two exits from each floor of detention?                                                                                                                                                                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Are all means of egress kept clean and open?                                                                                                                                                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Are detainees prohibited from engaging in wrestling, contact sports, horseplay or any activity likely to cause injury?                                                                                                                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Are detainees assigned vocational tasks given a safety orientation?                                                                                                                                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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**YES                      N/A                      NO**

**701.160    DISCIPLINE**

- |                                                                                                                                                                   |                                     |                          |                          |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|
| 1. Does the jail maintain written standards and provide detainees with:                                                                                           |                                     |                          |                          |
| a. Disciplinary rules and regulations governing behavior?                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Conduct constituting a penalty offense?                                                                                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Types and duration of penalties, including loss of visiting privileges, that may be imposed?                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Information on who may impose penalties?                                                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Authorized methods of seeking information and making complaints?                                                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. All other matters necessary to enable the detainee to understand both his or her rights and obligations?                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Is special assistance provided to detainees when needed?                                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Are detainees allowed to make requests or complaints to the jail administrator in written form without censorship of substance?                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Are detainees permitted to submit a complaint to the Jail and Detention Standards Unit?                                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Do jail officers observing a disciplinary violation submit a written report?                                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Do supervisory staff conduct a review of the factors of an alleged minor rule violation within 24 hours after its occurrence?                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Are detainees segregated as a result of a minor rule infraction informed by supervisory staff of the result of his or her review?                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Are detainees allowed to submit a grievance to higher authority?                                                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Are penalties for minor rule violations limited to a reprimand or the loss of privileges or segregation for no more than 72 hours?                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Does someone other than the reporting officer conduct an investigation on major rule violations?                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. If probable cause is established, is a hearing date scheduled?                                                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Are penalties withheld until after the hearing?                                                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Are major rule violation hearings conducted in accordance with hearing rules for major violations?                                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Do major rule violation disciplinary findings:                                                                                                                |                                     |                          |                          |
| a. Contain restrictions of privileges carefully evaluated and assessed as it relates to the infraction and does not impose a secondary penalty on another person? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Impose segregation only after lesser penalties have been considered?                                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Are restricted diets and corporal punishment prohibited?                                                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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|                                                                                                                                                                                                                                 | YES                                 | N/A                                 | NO                       |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|--------------------------|
| 12. Do disciplinary rules, regulations and the forfeiture of good behavior allowance comply with <b><i>The County Jail Good Behavior Allowance Act [730ILCS 130/3.1]</i></b> ?                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| 13. Is the use of restraint devices prohibited from being applied as a penalty?                                                                                                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| 14. Are restraint devices used on detainees:                                                                                                                                                                                    |                                     |                                     |                          |
| a. As a precaution against escape during transportation?                                                                                                                                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| b. On medical grounds at the discretion of a physician?                                                                                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| c. By order of the jail administrator in order to prevent a detainee from injuring others or to prevent a detainee from damaging or destroying property?                                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| 15. If the county where the jail is located has less than 3,000,000 inhabitants, is use of restraint devices upon a pregnant female detainee in compliance with Section 17.5 of the County Jail Act [730 ILCS 125/17.5]?        | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| 16. If the county where the jail is located has 3,000,000 or more inhabitants, is the use of restraint devices upon a pregnant female detainee in compliance with section 3-15003.6 of the Counties Code [55 ILCS 5/3-15003.6]? | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 17. Is a written report placed on file whenever restraint devices are applied?                                                                                                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| 18. Are individual cases reviewed once every 24 hours to determine the necessity for such restraints?                                                                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| 19. Are psychotropic medicines prohibited for use as disciplinary devices or control measures?                                                                                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| 20. When detainees are alleged to have committed a crime while in the jail, is documentation made and the case referred to the appropriate law enforcement official for possible prosecution?                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |

**701.170 EMPLOYMENT OF DETAINEES**

|                                                                                                                                      |                                     |                          |                          |
|--------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|
| 1. Is employment of detainees prohibited when such assignment may violate any personal right or jail standard?                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Is employment of detainees prohibited if the assignment is hazardous or potentially dangerous?                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Is employment of detainees prohibited if the assignment is in conflict with any law, ordinance or local labor working agreements? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Is employment of detainees prohibited if the assignment endangers jail security?                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**701.180 MAIL PROCEDURES**

|                                                                  |                                     |                          |                          |
|------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|
| 1. Can detainees receive an unlimited number of letters?         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Is incoming mail opened and examined for contraband or funds? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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|                                                                                                                                                                                                                                                                                                   | YES                                 | N/A                      | NO                       |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|
| 3. Are cashier's checks, money orders or certified checks discovered in a detainee's incoming mail recorded and securely kept as part of the detainee's personal property on a property receipt indicating the sender, amount and date, or deposited into the detainee's commissary fund account? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Are personal checks and cash returned to sender along with a notification that funds may not be received in that form?                                                                                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Is incoming mail containing contraband held for inspection and disposition by the jail administrator?                                                                                                                                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Is the contraband labeled and logged?                                                                                                                                                                                                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Are appropriate law enforcement agencies notified?                                                                                                                                                                                                                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Is incoming mail promptly delivered?                                                                                                                                                                                                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Is mail forwarded to discharged detainees or returned to sender if a forwarding address is known?                                                                                                                                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Are detainees prohibited from opening, reading or delivering another detainee's mail without his or her permission?                                                                                                                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Are detainees permitted to receive books and periodicals subject to inspection and approval by jail personnel?                                                                                                                                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Does the jail administrator spot check and read incoming non-privileged mail when there is reason to believe that jail security may be impaired, or mail procedures are being abused?                                                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Is outgoing, non-privileged mail reproduced or withheld from delivery if it presents a threat to jail security or safety?                                                                                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. When a detainee is prohibited from receiving a letter or portions thereof, are both the detainee and sender notified in writing of the decision?                                                                                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Are detainees allowed to send an unlimited number of letters?                                                                                                                                                                                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. Have provisions been made to allow detainees to send packages?                                                                                                                                                                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. Is outgoing mail clearly marked with the detainee's name?                                                                                                                                                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 15. Is outgoing mail collected Monday through Friday and mailed promptly?                                                                                                                                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 16. Is outgoing, non-privileged mail submitted in unsealed envelopes?                                                                                                                                                                                                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 17. Is the detainee notified in writing of any outgoing mail withheld?                                                                                                                                                                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 18. Are procedures established for processing certified or registered mail?                                                                                                                                                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 19. Is privileged mail submitted in sealed envelopes?                                                                                                                                                                                                                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 20. Is incoming mail clearly marked "privileged" opened in the presence of detainees?                                                                                                                                                                                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 21. Are disciplinary restrictions prohibited from being placed on a detainee's mail or electronic mail privileges?                                                                                                                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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|                                                                                                                                                                                                                                                                                                                                                         | YES                      | N/A                                 | NO                       |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------|--------------------------|
| 22. If the jail administrator allows detainees to send and receive electronic mail:                                                                                                                                                                                                                                                                     |                          |                                     |                          |
| a. Does the jail have a Web site providing instructions how electronic mail can be sent to detainees?                                                                                                                                                                                                                                                   | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| b. Does the Web site set forth and are detainees notified that electronic mail is considered non-privileged and subject to inspection procedures for regular non-privileged mail including being viewed and read by jail staff?                                                                                                                         | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| c. Is inspected electronic mail, determined to have improper content or which compromises safety or security, not allowed to be sent by the detainee or delivered to the detainee?                                                                                                                                                                      | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| d. If electronic communication is rejected for delivery, is a report of occurrence completed which includes the name of the detainee involved, name and e-mail address of the other party, date and time the e-mail was sent or received, and the reason for rejection that is both dated and signed by the jail staff person making the determination? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| e. Is the sender notified by designated jail staff when electronic mail is received for a detainee no longer in the custody of the jail?                                                                                                                                                                                                                | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

**701.190 TELEPHONE**

|                                                                                                                                       |                                     |                          |                          |
|---------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|
| 1. Are detainees permitted to place at least one 5-minute telephone call per week?                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Are telephone calls subject to monitoring?                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Can violations of telephone rules result in the suspension of the detainee's use of the telephone for a designated period of time? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Is a notice stating telephone calls may be monitored or recorded posted by each telephone from which detainees may place calls?    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Are rules governing the use of telephones established?                                                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Can violations of telephone rules result in the suspension of the detainee's use of the telephone for a designated period of time? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**701.200 VISITING**

|                                                                                                                                   |                                     |                          |                          |
|-----------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|
| 1. Are visiting procedures established?                                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Are there at least two visiting days per week?                                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Is one of the visits during the weekend?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Are detainees allowed at least 15 minutes per visit?                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Are two or more visitors visiting at the same time counted as one visit?                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. May children visit when accompanied by an adult?                                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Are professional individuals associated with a defendant's case or involved with counseling needs granted liberal visitations? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Is an area provided to ensure privacy during the visit?                                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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**YES                      N/A                      NO**

- |                                                                                                                |                                     |                          |                          |
|----------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|
| 9. Are all visitors required to provide identification and sign in before being permitted to visit a detainee? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. When applicable, are detainees searched before and after each visitation?                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Is a visitors "Search Notice" sign posted?                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Is constant visual supervision maintained in contact visitation areas?                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**701.210    SOCIAL SERVICE PROGRAMS**

- |                                                                              |                                     |                          |                          |
|------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|
| 1. Are social service programs available on site to detainees?               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Are volunteer workers and groups invited to participate in jail programs? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**701.220    EDUCATION**

- |                                                                                                   |                                     |                          |                          |
|---------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|
| 1. Are relevant educational programs provided?                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Are educational information and academic materials permitted and made accessible to detainees? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Are vocational information and materials permitted and made accessible to detainees?           | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**701.230    LIBRARY**

- |                                                                                                                     |                                     |                          |                          |
|---------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|
| 1. Are library services made available to detainees?                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Is access to current <i><b>Illinois Compiled Statutes</b></i> provided?                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Is access to current jail rules and regulations provided?                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Is there a written policy covering day-to-day activities and schedules?                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. If a full-time librarian is not required, is a jail staff person assigned library administration responsibility? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**701.240    RELIGIOUS SERVICES**

- |                                                                                                |                                     |                          |                                     |
|------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|
| 1. Are detainees allowed to participate in religious services and obtain religious counseling? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 2. Are detainees required to participate in religious activities?                              | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

**701.250    COMMISSARY**

- |                                                                                                                                                                                          |                                     |                          |                          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|
| 1. Has a commissary system been established?                                                                                                                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Are prices charged detainees consistent with local community stores?                                                                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Are prices for postal supplies sold at post office cost?                                                                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Is commissary provided on a regular scheduled basis at least weekly?                                                                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Are net profits of the commissary system used only for education, recreation or other purposes within the jail for the benefit of the detainees as deemed appropriate by the Sheriff? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

ILLINOIS DEPARTMENT OF CORRECTIONS  
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**YES                      N/A                      NO**

- |                                                                                                                                                                                                                    |                                     |                          |                                     |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|
| 6. Are net profits used for record keeping expenses of the commissary system?                                                                                                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 7. Is there accurate accounting maintained for all purchases, sales and expenditures of the commissary system; which includes telephone access services and electronic mail access services provided to detainees? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 8. Has there been a completed timely annual audit of the commissary system arranged with the county auditor or county treasurer?                                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |

**701.260 RECREATION AND LEISURE TIME**

- |                                                                              |                                     |                          |                          |
|------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|
| 1. Is out of cell indoor recreation provided?                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Is out of cell outdoor recreation provided?                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Are exercise areas appropriately equipped and utilized?                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Are detainees allowed in the exercise area for at least one hour per day? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Are recreation and leisure time activities planned and scheduled?         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**701.270 JUVENILE DETENTION**

- |                                                                                                                                                                                     |                                     |                          |                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|
| 1. Are status offenders prohibited from being detained?                                                                                                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 2. Does the jail detain juveniles?                                                                                                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 3. Is the detention six hours or less?                                                                                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 4. Is periodic supervision maintained and recorded?                                                                                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| a. Are supervisory checks made on each juvenile at least once every 15 minutes?                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| b. Are juveniles detained sight and sound separate from adults?                                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 5. Are minors informed of the purpose of the detention, the time it is expected to last and that detention cannot exceed six hours?                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 6. Are minors 12 years of age or older confined for more than six hours but less than 36 hours (excluding Saturdays, Sundays and court holidays)?                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 7. Are parents, legal guardians or persons with whom the minor resides notified of the minor's detention, if the law enforcement officer or court officer has been unable to do so? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 8. Are juvenile records maintained separately from adult records?                                                                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 9. Are juvenile records prohibited from being open to public inspection or disclosure, except by appropriate authority?                                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 10. Is same-gender supervision of minors provided:                                                                                                                                  |                                     |                          |                                     |
| a. During the performance of established procedures which require physical contact or examination such as body searches?                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |

ILLINOIS DEPARTMENT OF CORRECTIONS  
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**County Jail Inspection Checklist**

|                                                                                                                                | YES                                 | N/A                                 | NO                                  |
|--------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|
| b. During periods of personal hygiene activities such as showers, toilet and related activities?                               | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 11. Is periodic supervision maintained?                                                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| a. Are periodic checks made once every 15 minutes for the first six hours of confinement?                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| b. Are periodic checks made once every 30 minutes after the first six hours of confinement?                                    | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| c. Are periodic checks made once every 15 minutes of minors subject to isolation or segregation?                               | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| d. Are checks recorded by a mechanical device or logged in ink?                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| e. Are the times of the checks recorded?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| f. Does the supervisory check log allow for entries of relevant remarks?                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| g. Do the checks contain the signature of staff conducting the check?                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 12. Are minors assigned to single occupancy cells or detention rooms?                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 13. Are minors provided with meals when detained during the facility's normal meal periods?                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 14. Is evidence of child abuse reported to the Illinois Department of Human Services?                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 15. Are staff trained in juvenile supervision with training approved by the Illinois Law Enforcement Training Standards Board? | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| <b><u>701.280 TEMPORARY DETENTION STANDARDS</u></b>                                                                            |                                     |                                     |                                     |
| 1. Are minors detained for more than 36 hours, but less than seven days (including Saturdays, Sundays and court holidays)?     | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| 2. Are youth offered a minimum of two hours of day room activity daily?                                                        | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| a. Are youth offered a minimum of one hour of physical activity daily?                                                         | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| b. Are appropriate reading materials, table games and radios and/or televisions provided?                                      | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| c. Is appropriate social interaction provided for youth?                                                                       | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 3. Is an outdoor recreation area available for detainee use?                                                                   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 4. Are outdoor activities for youth scheduled?                                                                                 | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 5. Is academic instruction provided a minimum of four hours per day?                                                           | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| a. Is the instruction appropriate to the individual needs of each youth?                                                       | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| b. Is the instruction provided by a trained teacher or tutor?                                                                  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |

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|                                                                                                                                      | YES                      | N/A                                 | NO                       |
|--------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------|--------------------------|
| 6. Are medical, psychiatric, psychological, casework and counseling services provided as needed in all individual cases?             | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 7. Is a daily visiting schedule established?                                                                                         | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| a. Is one visit per day afforded?                                                                                                    | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| b. Are liberal visits afforded to persons professionally associated with a youth's case?                                             | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8. Are youth allowed to place or receive at least one telephone call per day?                                                        | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 9. Is each youth provided with a copy of written rules and regulations?                                                              | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| a. Do the rules contain a description of conduct constituting a penalty offense?                                                     | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| b. Do the rules contain the types and duration of penalties?                                                                         | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| c. Do the rules contain the method or conditions under which penalties maybe imposed and persons so authorized to impose discipline? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| d. Do the rules contain procedures for seeking information, making complaints and filing appeals?                                    | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 10. Are rule violations reviewed by the jail administrator?                                                                          | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| a. Are minor rule violations reviewed within 24 hours?                                                                               | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| b. Are major rule violations reviewed within 36 hours?                                                                               | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

**701.290 YOUTH PROSECUTED UNDER THE CRIMINAL CODE OF 1961**

|                                                                                                     |                                     |                                     |                          |
|-----------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|--------------------------|
| 1. Do jail officers determine that a minor being detained is confined under proper legal authority? | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| 2. Is a day room of no less than 35 square feet per cell or room provided?                          | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 3. Are youth allowed eight hours of day room activity each day?                                     | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| a. Is recreation of an energetic nature offered?                                                    | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| b. Are appropriate reading materials, table games, radios or televisions provided?                  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 4. Is an outdoor recreation area available for detainee use?                                        | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 5. Are outdoor activities for youth scheduled?                                                      | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 6. Is regularly scheduled academic instruction provided?                                            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| a. Is the instruction appropriate to the individual needs of each youth?                            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| b. Have educational arrangements been made through the appropriate local school district?           | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| c. Are co-educational classes scheduled?                                                            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

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| YES                      | N/A                                 | NO                       |
|--------------------------|-------------------------------------|--------------------------|
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

7. Is access to psychiatric, psychological, casework and counseling services provided as needed in individual cases?
8. Has a visiting schedule been established identifying no fewer than two visiting days per week?
- a. Is at least one visit allowed during evening hours?
- b. Is at least one visit allowed during the weekend?
- c. Are visits permitted on holidays?
9. Are liberal visits afforded to professional persons associated with a youth's case?

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**County Jail Inspection Checklist**

**Inspector's comments:**

1. The facility houses for U.S. Marshals (contracted) and Union County (contracted) and area counties if needed.
2. The facility is equipped with the following control devices: pepper spray, restraint chair, tasers.
3. Orientation manual is provided via the kiosk and tablets.
4. Medical services, mental health services, and dental triage screenings are provided by MD Thomas Kupferer, RPN, and LPN with Murphysboro Family Medicine. Centerstone and MHP Katie Miles provides additional mental health services. Additional dental services are provided by Dogwood Dental Care.
5. Meals are prepared on-site by county employees.
6. Kitchen inspection was conducted by Jackson County Health Department in April 2022.
7. Pest control is provided by Enviro-Tech Pest Services bi-monthly.
8. Fire suppression system and alarm inspections were conducted by Johnson Controls in September 2021. Kitchen range hood inspection was conducted by Simplex Grinnell in February 2022. Fire extinguisher inspection was conducted by Johnson Controls in August 2021.
9. Telephone services and visits conducted via video are provided by Securus Technologies, LLC.
10. GED materials are available via tablet. Tutoring program visits have been suspended due to COVID restrictions. Drug abuse counseling provided by Centerstone has been suspended due to COVID restrictions. Substance abuse program available on tablets. University of Chicago to provide MARS - Medication-Assisted Recovery Services.
11. Law library resources including IL Compiled Statutes are provided via the kiosk and tablets.
12. Religious volunteer visits are provided three times per week; and available by phone and via video visit upon request.
13. Commissary services are provided by Stellar Services, LLC. Audit was completed in March 2021.

Email addresses:

Sheriff Robert Burns: [rburns@jacksoncounty-il.gov](mailto:rburns@jacksoncounty-il.gov)

County Clerk Frank Byrd: [frank.byrd@jacksoncounty-il.gov](mailto:frank.byrd@jacksoncounty-il.gov)

County Board Chair C. J. Calandro: [cj.calandro@jacksoncounty-il.gov](mailto:cj.calandro@jacksoncounty-il.gov)

Jail Administrator Lieutenant Lee Kersten: [lkersten@jacksoncounty-il.gov](mailto:lkersten@jacksoncounty-il.gov)

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**Kathy Melvin**

Criminal Justice Specialist Name (Print)



## The Illinois Department of Corrections

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### JACKSON COUNTY JAIL 2022 COMPLIANCE MONITORING REPORT

Criminal Justice Specialist Kathy Melvin monitored the Jackson County Jail on April 21, 2022. Entrance and exit interviews were conducted with Jail Administrator, Lieutenant Kersten and Sergeant Spradling.

#### IMPROVEMENTS SINCE LAST COMPLIANCE MONITORING

1. High tech, impact resistant monitors were purchased and installed for video conferences with the courts, attorneys, physicians, and mental health professionals.
2. The dormitory shower ceilings were replaced which included the addition of grated mesh.
3. The ceiling in the center holding cell was replaced which included the addition of grated mesh.
4. Cameras were purchased and installed in the medical area to monitor medicine carts and the booking observation cell.
5. A portable vitals monitor, a crash cart, an intraosseous (IO) gun for emergency IV placement, an EKG machine, and a refrigerator for insulin/med storage were purchased for the medical unit.
6. The Guardian system was implemented for 15-minute checks for medical and suicide watches.
7. A compliance monitor was purchased and installed in the control booth which aids in 30-minute checks.
8. The existing cell check devices were replaced and one was added which are the upgraded Spartan III devices.
9. Tableau software was implemented to monitor cell checks by shift, staff, and time.
10. Carts were purchased to transfer food from the kitchen to the cells.
11. Trays and cups were purchased.
12. The wooden counter in the kitchen was replaced with stainless steel for improved sanitary conditions.
13. A live scan unit was purchased for improved fingerprinting.
14. The existing tasers were replaced and 6 were added which are an upgraded model.
15. Tasers previously used in the jail were transferred to courthouse security.
16. A transport van and SUV were received and outfitted.

#### NONCOMPLIANCE'S WITH ILLINOIS COUNTY JAIL STANDARDS

None

**Kathy Melvin**  
Criminal Justice Specialist