

Issue Title (Self-Sustainment by ICS): R-071 Ryder Near-term, Item 1d, pg 35

(U) RECOMMENDATION / OBSERVATION:

Facility supervisory transitions cannot be driven by when a facility is "certified ready," but military necessity provides the first benchmark from which all other points of transition (training pace, facility renovation schedule and Iraqi prison personnel employment within the facilities) flow. There will be a natural tendency towards extended reliance on the military assets, however, planning must be accomplished on pace with the rotation rhythm of the military assets. To do otherwise creates potential for a lethargic dependency and gaps is coverage, both of which will slow the progress of the immerging system. CPA MOJ Prisons Department and 800th MP BDE planners should meet weekly, following the general Prison meeting, to integrate transition plan away from the military presence to CPA and an independent self-sustaining system.

(8) CURRENT ASSESSMENT:

Request official relief. This is a DOS / DOJ / IIG matter. Recommend J-5 lead to determine thru interagency if DOJ will address this issue.

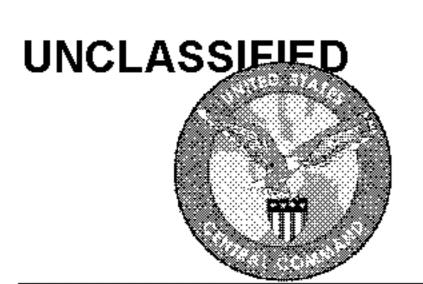
(8) FIX / ACTION / CHANGE

Fix:

Action:

Change:

OPR: CENTCOM



Issue Title (Staff Augmentation): R-072 Ryder Mid-term, Item 2a, pg 35

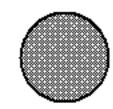
(U) RECOMMENDATION / OBSERVATION:

Replace the staff augmentation at CPA MOJ Prisons Department with a small Liaison Cell from the MP Combat Support Brigade responsible for the security internee mission.

(8) FIX / ACTION / CHANGE:

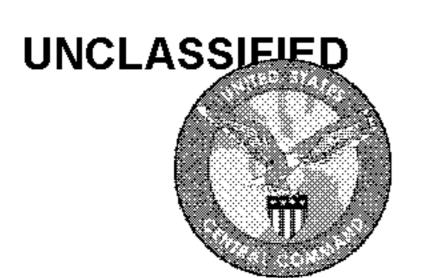
OBE – no longer a requirement.

(8) CURRENT ASSESSMENT:



Request Closure.

OPR: CENTCOM



Issue Title (Required Number of ICS Officers): R-073 Ryder Mid-term, Item 2b, pg 35

(U) RECOMMENDATION / OBSERVATION:

CPA MOJ should conduct a staffing analysis, based upon the Iraqi cultural patterns. Once a required number of correctional officers is established, CPA should prioritize staff efforts to recruit and train, similar to those actions being taken with the Iraqi police. This becomes critical as the reconstruction projects are completed at the larger regional correctional facilities.

(2) CURRENT ASSESSMENT:

Request official relief. This is a DOS / DOJ / IIG matter. Recommend J-5 lead to determine thru interagency if DOJ will address this issue, per matrix 11 Jan 05.

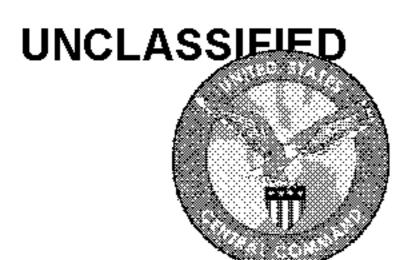
OPR: CENTCOM OCR:

(8) FIX / ACTION / CHANGE:

Fix:

Action:

Change:



Issue Title (Training Capacity for IIG Corrections): R-074 Ryder Mid-term Item 2c, pg 35

(U) RECOMMENDATION / OBSERVATION:

Background checks are a critical aspect of the prison employment process. The potential for abuse, corruption and threat to public safety is such that extreme attention must be paid. Due to the high number of cadre required, the length of the vetting process and the comprehensive training it is recommended that the training program must increase its graduation pace (i.e., greater capacity, not a shorter course). The training academy program should soon move from dependency upon military assets to a robust CPA program or consideration of a contract training program through one of the many companies who specialize in corrections training in order to meet present and future needs.

(2) CURRENT ASSESSMENT:

Request official relief. This is a DOS / DOJ / IIG matter. Recommend J-5 lead to determine thru interagency if DOJ will address this issue, per matrix 11 Jan 05.

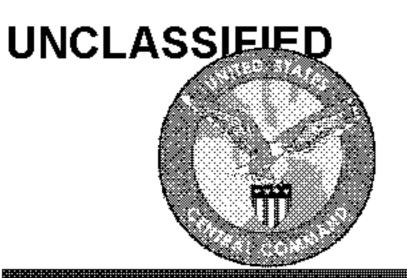
OPR: CENTCOM

⁷⁹ OCR:

Fix:

Action:

Change:



Issue Title (Anticipated Criminal Population): R-075 Ryder Item 3, pg 35______

(U) RECOMMENDATION / OBSERVATION:

We cannot overstate the importance of strategic planning in relation to anticipated criminal population trends and facility needs. The experience within the current CPA MOJ Prisons Department is clearly capable of accomplishing a prospectus of needs and a proposed strategic 10-30 year plan. The Iraqi Prison System leadership must be involved in the development process so that they may undertake the task independently upon the CPA's transition of authority to the new Iraqi government. The CPA MOJ Prisons Department should assist the Iraqi Prison System leadership to establish its own professional organization and relationships with other nations' corrections associations (e.g., The American Correctional Association, International Corrections and Prisons Association, etc.).

(8) CURRENT ASSESSMENT:

Request official relief. This is a DOS / DOJ / IIG matter. Recommend J-5 lead to determine thru interagency if DOJ will address this issue, per matrix 11 Jan 05.

Fix:

Action:

Change:

OPR: CENTCOM

OCR:

JS AMNESTY/CCR 1186

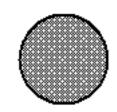


Issue Title (Lack of SOP): R-076 Ryder Near-term, Item 1a, pg 39

(U) RECOMMENDATION / OBSERVATION:

Task key players to develop and distribute a standard operating procedure as discussed above. Key players should include but not be limited to: the CJTF-7 PMO, JAG, Surgeon, 800th MP BDE Surgeon, CPA MOJ Prisons Department, and the Ministry of Health (MOH) prison health care medical advisor.

(2) CURRENT ASSESSMENT:



Request Closure.

OPR: CENTCOM

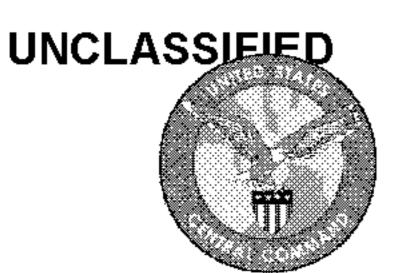
OCR:

(8) FIX / ACTION / CHANGE:

Fix: Develop SOP for continuity for detainee medical care.

Action: TF 115th published a general policy letter IRT detainee medical care as well as Bagram and Kandahar detention facilities – each with the intent of ensuring medical staff adhere to specific SOPs.

Change: Dedicated detainee medical care facilities are established and standards and procedures implemented IAW the Geneva Convention and Rules of Land Warfare.



Issue Title (Health Care Policy) <u>R-077 Ryder Near-term, Item 1b, pg 39</u>

(U) RECOMMENDATION / OBSERVATION:

Take the CJTF-7 Surgeon, 800th MP BDE Surgeon, and PMO (with JAG review) to prepare and publish an agreed upon detainee health care policy. Then develop and publish an SOP for detainee health care operation in theater based on input from providers within each battalion. This guide would be developed in coordination with the above document as the basis to delineate provider responsibilities and then should continue to address items such as detainee medical in processing, health care operations, infectious disease management, record keeping, logistics, special programs, health and sanitation requirements, patient transfer, security and control, and additional topics as needed.

(2) CURRENT ASSESSMENT:

Request Closure. Policy Task Force develop overarching policy on detainee medical care, per matrix 11 Jan 05.

OPR: CENTCOM

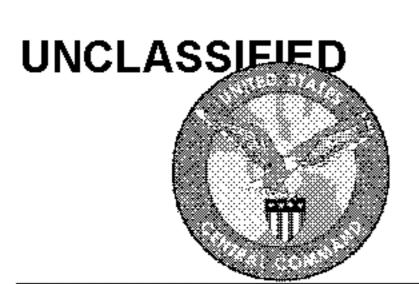
OCR:

(8) FIX / ACTION / CHANGE:

Fix: Develop SOP and health care policy for continuity for detainee medical care.

Action: TF 115th published a general policy letter IRT detainee medical care as well as Bagram and Kandahar detention facilities – each with the intent of ensuring medical staff adhere to specific SOPs.

Change: Dedicated detainee medical care facilities are established and standards and procedures implemented IAW the Geneva Convention and Rules of Land Warfare.



Issue Title (Medical Advisor): <u>R-078 Ryder Near-term, Item 1c, pg 39</u>

(U) <u>RECOMMENDATION / OBSERVATION</u>:

Retain the services of the military advisor to the MOH charged with overseeing the corrections health care system.

/ CHANGE	FIX / ACTION	(2
I / CHANGE	S) FIX / ACTION	12

Fix:

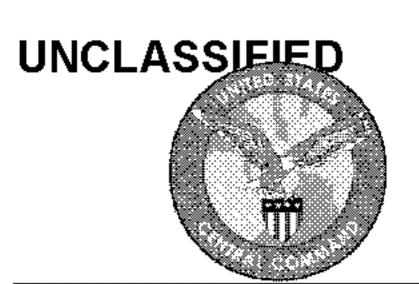
Action:

Change

(2) CURRENT ASSESSMENT:

Request official relief. This is a DOS / IIG matter.

OPR: CENTCOM



Issue Title (MOH Health Care System): R-079 Ryder Near-term, Item 1d, pg 39

(U) RECOMMENDATION / OBSERVATION:

Conduct a hiring action retaining the services of a process action team (PAT) as discussed above. (MOH Health Care System)

Fix:

Action:

Change

(8) CURRENT ASSESSMENT:

Request official relief. This is a DOS / IIG matter.

OPR: CENTCOM



Issue Title (Health Care Consultant): R-080 Ryder Near-term, Item 1e, pg 40

(U) RECOMMENDATION / OBSERVATION:

Hire a full time corrections health care consultant to provide a correctional framework for the provision of health care, safety, and sanitation of the facilities. This individual would serve on the senior leadership team for the Department of Prisons.

Fix:

Action:

Change

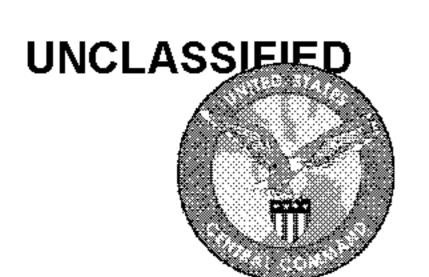
(8) CURRENT ASSESSMENT:

Request official relief. This is a DOS / IIG matter.

OPR: CENTCOM

OCR:

85

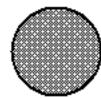


Issue Title (Policy to Replacement Units): <u>R-081 Ryder Near-term, Item 1f, pg 40</u>

(U) RECOMMENDATION / OBSERVATION:

Forward the health care policy to current and designated replacement units.

(2) CURRENT ASSESSMENT:



Request Closure.

OPR: CENTCOM

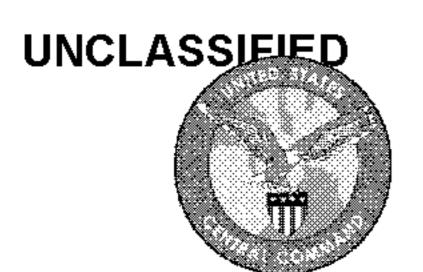
OCR:

(2) FIX / ACTION / CHANGE:

Fix: Forward health care policy to current and designated replacement units.

Action: Designated medical teams in MNF-I and CFC-A promulgate their policies and SOPs.

Change: Ensure that all incoming units are properly trained on medical policies and SOPs before working in the detention facilities.

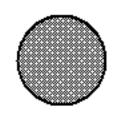


Issue Title (Oversight of Health Care): R-082 Ryder Near-term, Item 1g, pg 40

(U) RECOMMENDATION / OBSERVATION:

Rely on the CJTF-7 and CENTCOM Surgeons offices to address and provide oversight for ongoing detainee health care operations and the oversight within the US Military Corrections mission.

(8) CURRENT ASSESSMENT:



Request Closure.

OPR: CENTCOM

OCR:

(8) FIX / ACTION / CHANGE:

Fix: Provide oversight for ongoing detainee health care operations.

Action: Established a medical task force within Detainee Operations responsible for training all oversight and all incoming medical personnel to standards IAW AR 190-8, paragraph 6-6 and Chapter 3, Article 29 of the Geneva Convention.

Change: The CJTF and CENTCOM Surgeon offices are responsible for oversight of medical activities in detention facilities to ensure compliance with policy.

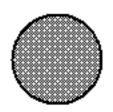


Issue Title (BDE Surgeon Position): R-083 Ryder Near-term, Item 1h, pg 40

(U) <u>RECOMMENDATION</u> / OBSERVATION:

Prepare and submit one-year tasking to fill the brigade surgeon's position, while continuing the military medical advisor support to the MOH.

(S) CURRENT ASSESSMENT:



Request Closure.

OPR: CENTCOM

OCR:

(8) FIX / ACTION / CHANGE:

Fix: Establish surgeon general position.

Action: MED TF (TF 115)
established and coordinating with
MoH as required. Surgeon is also
on the CFC staff.

Change: Ensures establishment and sourcing for medical expertise.



Issue Title (Publish Medical Policies): R-084 Ryder Mid-term, Item 1a, pg 40

(U) RECOMMENDATION / OBSERVATION:

Publish and distribute all new Policies and SOPs to all affected parties and re-evaluate the application and adherence to medical practices.

CURRENT ASSESSMENT:

Working action. Policy Working Group will address, per matrix 11 Jan 05 – standard of medical care and preventive care.

OPR: CENTCOM

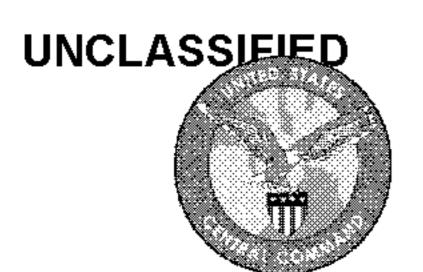
OCR:

(5) FIX / ACTION / CHANGE:

Fix: Designated medical teams in MNF-I and CFC-A promulgate their policies and SOPs.

Action: MED TF established to address policy and procedural issues.

Change: All incoming units are properly trained on medical policies and SOPs before working in the detention facilities.



Issue Title (Training of Medical Personnel): R-085 Ryder Mid-term, Item 2b, pg 40

(U) RECOMMENDATION / OBSERVATION:

Provide continued in-service training to all newly assigned and/or rotating medical personnel on the provisions, rules, and responsibilities stated.

(8) FIX / ACTION / CHANGE:

Fix: Designated medical teams in MNF-I and CFC-A promulgate their policies and SOPs.

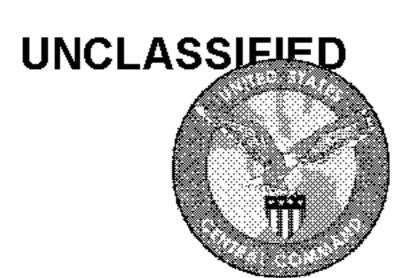
Action: MED TF established to address policy and procedural issues.

Change: All incoming units are properly trained on medical policies and SOPs before working in the detention facilities.

(8) <u>CURRENT ASSESSMENT:</u>

Request Closure. J-7 will address IRT joint training integration, per matrix 11 Jan 05.

OPR: CENTCOM



Issue Title (Medical Needs Assessment): R-086 Ryder Mid-term, Item 2c, pg 40

(U) RECOMMENDATION / OBSERVATION:

Charge the process action team with conducting a needs assessment, prioritize projects in each category, move to action completion within established timelines. Keep historical documents and records of all actions.

(8) FIX / ACTION / CHANGE

Fix:

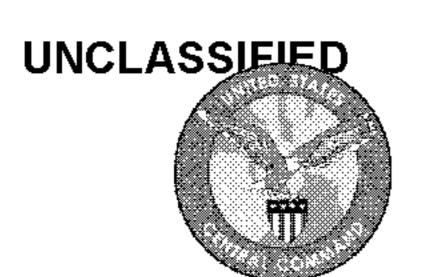
Action:

Change

(8) CURRENT ASSESSMENT:

Working action. Pending assessment by Medical TF.

OPR: CENTCOM

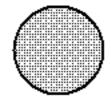


Issue Title (Iraq Hospital Coordination): R-087 Ryder Mid-term, Item 2d, pg 40

(U) RECOMMENDATION / OBSERVATION:

Contract with local Iraqi hospitals within a reasonable distance from Iraqi prisons, in order to provide specialized and tertiary care to established regions.

(2) CURRENT ASSESSMENT:



Continuous process.

OPR: CENTCOM

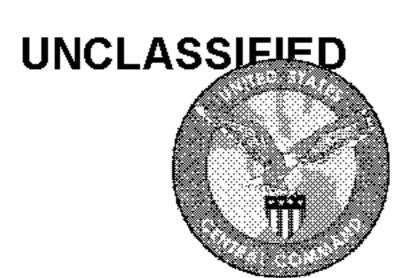
OCR:

(8) FIX / ACTION / CHANGE:

Fix: Contract with local Iraqi hospitals within a reasonable distance from Iraqi prisons, in order to provide specialized and tertiary care to established regions.

Action: Medical Task Force currently working with the Iraqi local and regional hospitals for specialized care.

Change: Specialized care available if needed by Iraqi detainees.



Issue Title (Regional Hospitals): R-088 Ryder Mid-term, Item 2e, pg 40

(U) RECOMMENDATION / OBSERVATION:

Complete and incorporate the regional corrections hospitals in Baghdad Central, and Mosul, Dahuk and Basrah Regional Confinement Facilities.

Fix:

Action:

Change

(2) CURRENT ASSESSMENT:

Will request clarification of observation from OPMG.

OPR: CENTCOM



Issue Title (Medical Operations Order): R-089 Ryder Mid-term, Item 2f, pg 40

(U) RECOMMENDATION / OBSERVATION:

Review and refine the operations order as needed.

(8) CURRENT ASSESSMENT:

Medical Task Force developing a comprehensive OPORD to cover Medical Detainee Operations.

OPR: CENTCOM

OCR:

(8) FIX / ACTION / CHANGE:

Fix: Review and refine the operations order.

Action: MTF currently developing an OPORD.

Change: Ensures that adequate guidelines are in place for medical personnel.



Issue Title (Report Health Care Status): R-090 Ryder Long-term, Item 3a, pg 40

(U) RECOMMENDATION / OBSERVATION:

Review and report on current state of health care operations to the CPA, US military, and coalition forces corrections authorities and medical commands. Examples of assessment tools are available through the American Correctional Association and the Commission on Correctional Health Care. Copies of these assessment tools will be provided to the CPA and the CJTF-7 surgeon.

(8) FIX / ACTION / CHANGE:

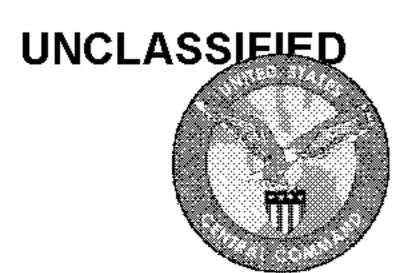
OBE – no longer a requirement.

(S) CURRENT ASSESSMENT:



Request closure.

OPR: CENTCOM



Issue Title (Provide Level III Care): R-091 Ryder Long-term, Item 3b, pg 41

(U) RECOMMENDATION / OBSERVATION:

Baghdad Central Corrections hospital should be expanded to provide all level III health care services and function as the hub for health care within the Baghdad region. This would support the regional management of resources by consolidating efforts. Additionally, this facility should be used as the logistical support, medical equipment, and supply transfer point.

(8) CURRENT ASSESSMENT:

Medical Task force currently working. Need to develop action plan for funding for Iraqi and Afghanistan medical facilities – recommend DOS/DOJ involvement.

OPR: CENTCOM

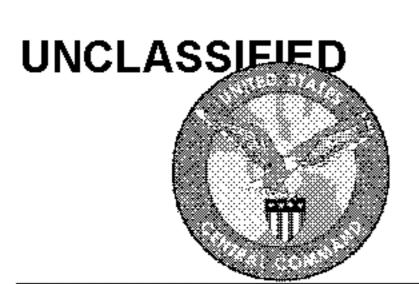
OCR:

(8) FIX / ACTION / CHANGE:

Fix: Baghdad Central Corrections hospital should be expanded to provide all level III health care services and function as the hub for health care within the Baghdad region.

Action: Being worked by the Medical Task Force.

Change: Ensures adequate Level III care is provided.



Issue Title (Report/Review Program Progression): R-092 Ryder Long-term, Item 3c, pg 41

(U) RECOMMENDATION / OBSERVATION:

Annual review and report of program progression to the Ministry of Justice Department of Prisons and the Ministry of Health.

(8) CURRENT ASSESSMENT:

Request official relief. This is a DOS / IIG matter. Recommend J-5 lead to determine thru interagency if DOJ will address this issue.

OPR: CENTCOM

OCR:

18	FIX	ACTION	/ CHAN	IGE:

Fix:

Action:

Change



Issue Title (Fire Suppression System): R-093 Ryder Near-term, Item 1a, pg 44

(U) RECOMMENDATION / OBSERVATION:

Obtaining adequate supplies of functional fire extinguishers and fire suppression systems is a top safety issue for all facilities. Evacuation plans and emergency operations drills need to be developed immediately.

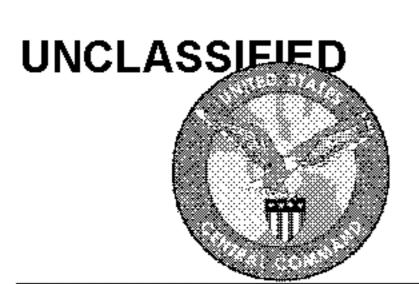
(8)	CURRENT ASSESSMENT:
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OPR: CENTCOM

OCR:

(8)	FIX /	<u>ACTI</u>	<u>ON /</u>	CHAI	NGE:
1)					

JS AMNESTY/CCR 1204



Issue Title (Inadequate Logistical Support): R-094 Ryder Near-term, Item 1b, pg 44

(U) RECOMMENDATION / OBSERVATION:

The CPA needs to significantly increase logistical support to the Iraqi correctional health care facilities to make them operational. This is an immediate, high-priority recommendation.

(8) FIX / ACTION / CHANGE:

OBE – this was accomplished by the CPA and DOD after this recommendation was made.

(8) CURRENT ASSESSMENT:

Request closure.

OPR: CENTCOM



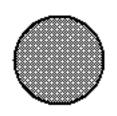
Issue Title (Additional Staff and Vehicle Support): R-095 Ryder Near-term, Item 1c, pg 44

(U) RECOMMENDATION / OBSERVATION:

U.S. medical units supporting detainee facilities require additional professionals to maximize the efficiency of the few professional staff.

Additional vehicle support (ambulances) is needed to ensure access and continuity of care for detainees.

(8) CURRENT ASSESSMENT:



Request closure.

OPR: CENTCOM

OCR:

(8) FIX / ACTION / CHANGE:

Fix: Provide additional professionals and vehicle support for detainee operations.

Action: TF 115th established. Adequate ambulances are available for detainee transport, as required.

Change: Dedicated detainee medical care staff and transport is established; standards and procedures implemented IAW the Geneva Convention and Rules of Land Warfare.