

# IOWA DEPARTMENT OF CORRECTIONS

## JAIL INSPECTION REPORT

of the

**Johnson**

County Jail

**Address:**(Street) 511 S. Capital St.

(City) Iowa City (zip) 52242 Date: January 6, 2026

**Sheriff:** Brad Kunkel **Phone:** 319-356-6020

**Jail Administrator:** Capt. John Good **Phone:** 319-356-6025

**Jail Inspector:** Delbert Longley **Phone:** 515-725-5731

**Chairperson-Supervisor:** Jon Green **Phone:** 319-356-6000

Inspections are based upon information provided by the temporary holding facility staff and the personal observation of the jail inspector. The below signed agrees that the statements made to the jail inspector are true to the best of his/her knowledge.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

**Variances issued:**

Standard	Date	Time Frame
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Standard	Date	Time Frame

### Use of Verification Code

#### Numbers and Lettering

Verification numbers and letters will be used to indicate two facts regarding the inspection process. The **number** will designate either compliance or noncompliance. The **letter** corresponds to the way in which the numbered response was selected.

#### **Code:**

**1. Compliance**

- a. Policy statement reviewed
- b. Observed
- c. Verbal assurance of practice
- d. Documentation reviewed
- e. Documentation verbally assured
- f. Measure
- g. Detainee rules

**2. Non-compliance**

**50.2 (5) Equal Opportunity** ..... 1a

**50.2 (6) Nondiscriminatory treatment** ..... 1a

**50.4 (2) Physical Plant inspection(s) needed:**

**Building deterioration/Structural Engineer**

[Redacted]

**50.4 (3) Heating and ventilation**

- a) Reasonable heated and ventilated..... 1b
- b) Fresh air supply..... 1b
- c) Fans/Cold liquids available over 85°..... 1b

**50.4 (4) Maximum-security cells**

- a) Tamper resistant bunks..... 1b
- b) Table/seat ..... 1b
- c) Toilet/wash basin ..... 1b
- d) Adequate hot and cold water supply..... 1b

**50.4 (5) Lighting**

- a) Housing areas - 20 ft. candlepower ..... 1b
- b) Exits-Independent lighting source..... 1b

**50.4 (6) Screens** ..... NA

**50.4 (7) Electrical Facilities**

- a) No drop cords ..... 1b
- b) Emergency power ..... 1b
- c) Test log of emergency power ..... 1d

**50.4 (8) Storage**

- a) Storage in detention area ..... 1b
- b) Inmate storage secure identified-receipted ..... 1bd
- c) Janitor supplies storage ..... 1b
- d) Chemical storage ..... 1b

**50.4 (9) Mirrors tamper resistant** ..... 1b

**50.4 (10) Firearm locker** ..... 1b

**50.4 (11) Noise level**

- Policy and Prisoners advised ..... 1ag

**50.9 (2) Fire Inspection-Date: 10/14/25**

- a) State \_\_\_\_\_ b) Local  c) Approved  ..... 1d

**50.9 (3) Emergency Evacuation**

- Evacuation plan ..... 1ag
- Evacuation routes posted ..... 1a
- Annual fire drill training documented, Date: 5/28/25 ..... 1d

**50.9 (4) Release of prisoners**

- a) Prompt release in emergency ..... 1a
- b) Two full sets of jail keys ..... 1b

**50.9 (5) Fire extinguishers, Date: 7/25** ..... 1bd

**50.9 (6) Emergency lighting**

- Corridors, passages, exits ..... 1b

<b>50.9 (7) Required exits</b>	Two exits each floor/exists clear/keys available .....	<u>1b</u>
<b>50.9 (8) Fire alarms tested and documented as required</b>		
Prisoner inaccessible .....	1b	
Battery type tested monthly .....	NA	
Electronic type tested yearly, Date <u>8/5/25</u> .....	1d	
<b>50.9 (9) No heating appliances along path of exit</b> .....	<u>1b</u>	
<b>50.9 (10) Doors to swing with traffic</b> .....	<u>1b</u>	
<b>50.9 (11) Pillows and mattresses approved</b> .....	<u>1b</u>	
<b>50.9 (12) Sprinkler Heads, inaccessible, suicide resistant</b> .....	<u>NA</u>	
<b>50.10 (1) Requirements for employment</b> .....	<u>1a</u>	
<b>50.10 (2) Minimum standard for retention</b> .....	<u>1a</u>	
<b>50.10 (3) Conflict of interest policy</b> .....	<u>1ag</u>	
Business transactions with prisoners .....	<u>1ag</u>	
<b>50.11 (1) Training</b>		
a) Staff knowledgeable of jail standards .....	<u>1a</u>	
b) Staff knowledgeable of policy/procedures manual .....	<u>1a</u>	
c) Employee orientation regarding inmate rights .....	<u>1a</u>	
d) Weapons training if used in jail .....	<u>1a</u>	
e) Administrative log of training.....	<u>1d</u>	
f) Fire equipment training documented, Date: <u>5/28/25</u> .....	<u>1ad</u>	
g) Medication management .....	<u>1a</u>	
<b>50.11 (2), 50.11 (3) Basic Training</b>		
1) First aid certified, Date <u>1/8/27</u> .....	<u>1d</u>	
2) CPR certified , Date <u>1/8/27</u> .....	<u>1d</u>	
3) 40 hour basic .....	<u>1a</u>	
4) 20 hour recertification, Date <u>8/10/25</u> .....	<u>1ad</u>	
<b>50.12 Standard operating procedures manual</b> .....	<u>1b</u>	
<b>50.13 (1) Admission/Classification</b>		
a) Appropriate order/confinement and release .....	<u>1abd</u>	
b) Inmate architectural separation		
1) Juveniles (Ia. Code 356.3) .....	<u>1ab</u>	
2) Males/females (Iowa Code 356.4) .....	<u>1ab</u>	
c) Separation when possible		
1) Felons/misdemeanants .....	<u>1ab</u>	
2) Pretrial/sentenced .....	<u>1ab</u>	
3) Witnesses .....	<u>1ab</u>	
d) Physical separation required		
1) Violent prisoners .....	<u>1ab</u>	
2) Prisoners who may be a health risk .....	<u>1ab</u>	
3) Sexual deviant prisoners .....	<u>1ab</u>	
4) Prisoners likely to be exploited or victimized .....	<u>1ab</u>	
e) Juveniles (Iowa Code 232.22)		
1) Fourteen (14) years or older .....	<u>1ab</u>	
2) Committed listed crime .....	<u>1ab</u>	
3) Six (6) hours/less .....	<u>1ab</u>	
4) Court order over six (6) hours .....	<u>1ab</u>	
f) Suicide prevention		
Booking personnel trained .....	<u>1d</u>	
Documentation of suicidal determination .....	<u>1d</u>	
g) Housing for prisoners with disabilities .....	<u>1a</u>	
h) Veterans notification.....	<u>1e</u>	

**50.13 (2) Security and Control Procedures**

a) Supervision of prisoners		
1) Staff on premises at all times .....	.....	<u>1a</u>
Emergency calling device .....	.....	<u>1b</u>
Emergency response staff available in reasonable time .....	.....	<u>1b</u>
2) Supervision - documented		
Hourly checks .....	.....	<u>1a</u>
30 minute checks .....	.....	<u>1a</u>
CCTV/audio clear-distinct .....	.....	<u>1b</u>
Observation, showers and restrooms optional .....	.....	<u>1b</u>
3) •Entering housing of opposite sex .....	.....	<u>1b</u>
4) Female staff on duty .....	.....	<u>1b</u>
5) •Required observation of juveniles .....	.....	<u>1a</u>
b) Prohibited weapons .....	.....	<u>1a</u>
c) Prisoner searches (IC 804.30)(Strip search) .....	.....	<u>1a</u>
1) Prisoners/property, upon entry/leaving .....	.....	<u>1a</u>
2) All persons entering the jail searched .....	.....	<u>1a</u>
3) Search notice posted .....	.....	<u>1b</u>
4) Prisoner rules contain items permitted .....	.....	<u>1ag</u>
5) Cell search policy .....	.....	<u>1ag</u>
d) Key control policy .....	.....	<u>1a</u>
e) Facility security policy		
1) All areas clear of viewing obstructions .....	.....	<u>1a</u>
2) Security inspection of equipment/fixtures .....	.....	<u>1a</u>
3) Policy on prisoner movement .....	.....	<u>1a</u>
4) Policy on incidents that threaten security .....	.....	<u>1a</u>
Riots/Disturbances .....	.....	<u>1a</u>
Hunger strikes .....	.....	<u>1a</u>
Hostage situations .....	.....	<u>1a</u>
Escape attempts .....	.....	<u>1a</u>
Medical emergencies .....	.....	<u>1a</u>
Natural disasters .....	.....	<u>1a</u>
Staff shortage .....	.....	<u>1a</u>
Bomb Threats.....	.....	<u>1a</u>
f) Policy and documentation on the use of restraints .....	.....	<u>1a</u>

**50.14 (1) Housekeeping**

a) Jail clean and sanitary .....	.....	<u>1b</u>
1) Cleaning equipment provided.....	.....	<u>1b</u>
2) Jail to be maintained pest free .....	.....	<u>1b</u>
Dept of Ag approved, Name <u>Pest Pros, 12/31/25</u> .....	.....	<u>1d</u>

b) Sharps/hazardous material container .....

**50.14 (2) Clothing, bedding and hygiene items**

Items provided after 24 hours: bedding-linen .....	.....	<u>1ag</u>
a) Toilet articles .....	.....	<u>1ag</u>
b) Clothing issued .....	.....	<u>1a</u>
c) Clothing provided after 24 hours .....	.....	<u>1a</u>
d) Laundry schedule weekly .....	.....	<u>1a</u>

**50.14 (3) Personal hygiene**

a) Prisoners maintain personal cleanliness .....	.....	<u>1ag</u>
b) Shower/bath (if held over 24 hours) .....	.....	<u>1ag</u>
c) Hair sanitation .....	.....	<u>1ag</u>
d) Hair procedures .....	.....	<u>1ag</u>
e) Sharing razor/toothbrush prohibited .....	.....	<u>1a</u>

**50.15 Written medical services procedures .....**

1a

**50.15 (1) Medical resources designated .....**

1e

**50.15 (3) Prisoners not involved in medical delivery .....**

1a

**50.15 (4) First aid kit-approved .....**

1b

**50.15 (5) Prisoners affected by chemical agents to be offered appropriate treatment.....1a**

**50.15 (6) Prisoner Admission**

- a) Injured prisoner examined before admission ..... 1a
- b) Suspected communicable disease inmate isolated ..... 1a
- c) Medical history form ..... 1d
  - Suicide screening at intake ..... 1d
  - Written suicide prevention plan ..... 1a
  - Annual suicide prevention training Date: 8/10/25 ..... 1ad
- d) Mentally ill admissions policy and procedures ..... 1a
- e) Prisoner informed how to obtain medical attention ..... 1a

**50.15 (7) Medication procedures**

- a) Written policy/procedure on providing medication ..... 1a
- b) Medication inventory and storage ..... 1a
- c) Provided medication documented ..... 1a
- d) Prescription followed ..... 1a

**50.15 (8) Medical records maintained .....1a**

**50.15 (9) Medication storage**

- a) Medication stored at proper temperature ..... 1a
- b) Medication not administered beyond expiration date ..... 1a
- c) Documented drug destruction-witness included ..... 1a
- d) Policies and procedures direct return of drugs to pharmacy/documentation of disposal ..... 1a

**50.16 Food service**

- a) Meal provided if detained over meal period ..... 1a
- b) Three meals for each 24 hours served at reasonable intervals; at least one (1) hot meal. Hot meals hot, cold meals cold ..... 1ag
- c) Meal served at approximately same time daily ..... 1a
- d) Food service documentation>Date: 12/22/25 ..... 1d
- e) Medical diets prescribed approved ..... 1a
- f) Religious diets approved ..... 1a
- g) Food not used as punishment ..... 1a
- h) Outside providers inspected ..... NA
- i) Food transferred under sanitary conditions ..... NA

**50.17 In-house food service**

Health inspection-date: 11/12/25

- a) Food preparation areas clean/sanitary ..... 1b
- b) Food storage ..... 1b
- c) Food service equipment sanitized after use ..... 1a
- d) Staff to serve or supervise food service ..... 1a

**50.18 (1) Exercise**

- a) Two/one hour sessions per week/document ..... 1ag
- b) Exercise restriction ..... 1a
- c) Exercise area ..... 1b
- d) Suspension of outdoor exercise/appropriate clothing ..... NA

**50.18 (2) Religious opportunities .....1ag**

**50.18 (3) Reading material available/policy .....1ag**

**50.18(4) Activities available for disabled .....1a**

**50.19 (1) Prisoner mail**

- a) Writing materials provided ..... 1ag
- b) Prisoners (without funds) provided postage to communicate with court plus two letters per week for personal communication ..... 1ag
- c) Opening of general correspondence ..... 1ag
- d) Privileged communications not opened outside presence of prisoner ..... 1ag

1) Attorney .....	1ag
2) Judge .....	1ag
3) Governor .....	1ag
4) Citizen's Aid Office .....	1ag
5) State/Federal Legislature .....	1ag
e) Mail distribution policy/documentation .....	1ag

#### **50.19 (2) Telephone**

a) Telephone calls upon arrest (804.20) .....	1a
b) Prisoner telephone policy .....	1ag

#### **50.19 (3) Visitation/Attorney .....**

Visitation/Minister .....	1ag
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#### **50.19 (4) General visitation**

a) Normal status visitation .....	1a
b) Rules .....	1ag
c) Registration .....	1d
d) Denial .....	1a

#### **50.19(5) Non-US citizen notification policy .....**

#### **50.20 Access to the courts**

a) Postage provided to indigent prisoners .....	1a
b) Access to law library material or be represented by counsel in civil actions .....	1ag
c) Prisoner copy arrangements .....	1a
d) Writing supplies available .....	1a
e) Prisoner notified of facility procedures regarding access to courts .....	1g

#### **50.21 Discipline and grievance procedures**

a) No prisoner authority over another prisoner .....	1a
b) Use of physical force .....	1a
c) Information provided prisoners:	
1) Facility rules .....	1g
2) Available services .....	1g
3) Grievances procedures .....	1ag
d) Due process procedures:	
1) Written notice charges and hearing .....	1a
2) Description of hearing process .....	1a

#### **Procedures required:**

1) Resolving minor infractions .....	1a
2) Referring criminal violations .....	1a
3) Staff prepares a disciplinary report .....	1a
4) Impartial investigation of the incident .....	1a
5) Pre-hearing detention .....	1a
6) Written notice to prisoner 24 hrs prior to hearing .....	1a
7) Prisoner allowed to be present .....	1a
8) Hearing conducted within 7 days of violation .....	1a
9) Postponement procedure and documentation .....	1a
10) Impartial hearing/ record maintained for 2 years .....	1a
11) Prisoner allowed to make statement, present evidence .....	1a
12) Denial is documented .....	1a
13) Staff member assist at hearing if requested/needed .....	1a
14) Decisions based on information obtained at hearing .....	1a
15) Written decision and reasons given to prisoner/placed in prisoners file .....	1a
16) Jail Administrator reviews dispositions .....	1g
17) Explanation of appeal process with time frames .....	1g
18) Clothing, bedding, or hygienic supplies may be with held only for prisoner self-protection .....	1a

#### **50.22 Records**

1) Jail calendar (356.6) .....	1a
2) Visitor registration as required by 50.19(4) c .....	1a
3) Persons performing facility inspections	
a) Fire Marshal or designee b) _____ c) _____ .....	1a
4) Medical intake screening as required by 50.15(6)c .....	1a

5) Medical care as required by:	
50.15(7)c medication .....	<u>1a</u>
50.15(8) med records .....	<u>1a</u>
50.16(5) med diet .....	<u>1a</u>
6) Separate injury file or log(5 yrs.) .....	<u>1a</u>
7) Disciplinary records required by 50.21 .....	<u>1a</u>
8) Property receipt as required by 50.3(2)e .....	<u>1a</u>
9) Menu records .....	<u>1a</u>
10)Fire and disaster plans & Required fire drills .....	<u>1a</u>
11)Records of staff training .....	<u>1a</u>
12)Disposition of medication required by 50.15(9)c .....	<u>1a</u>
13)Documentation of supervisory checks as required by: 50.13(2)a3 & 50.13(2)a4 .....	<u>1a</u>
14) Incident reports	
a) Use of force as require by 50.21(2) .....	<u>1a</u>
b) Suicide/suicide attempts/self injury .....	<u>1a</u>
c) Inmate/inmate or Inmate/staff assaults .....	<u>1a</u>
d) Escapes/Fires/unusual incidents .....	<u>1a</u>
e) Jail inspector notified within 24 hours .....	<u>1a</u>
15)Exercise documentation .....	<u>1a</u>

**50.24 Non-secure holds for juveniles (Policy)** .....

**50.25 Direct supervision jails.**

2)a. Central control staff .....	<u>NA</u>
2)b. Direct supervision staff .....	<u>NA</u>
2)c. Backup for supervision staff .....	<u>NA</u>
7) Staff training documented .....	<u>NA</u>
8) Classification system procedures .....	<u>NA</u>
13) Policy and procedures .....	<u>NA</u>

**JAIL CAPACITY:**

<b>General Population</b>	<u>92</u>
<b>Temporary Holding</b>	<u>11</u>
<b>TOTAL</b>	<u>103</u>

**TODAY:**

<b>General Population</b>	<u>80</u>
<b>Temporary Holding</b>	<u>5</u>
<b>TOTAL</b>	<u>85</u>

<b>Juveniles</b>	<u>0</u>
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## COMMENTS AND RECOMMENDATIONS

Facility Name: Johnson County Jail Date: January 6, 2025

Documentation appears to be complete and was readily available for review.

50.4(2) Physical building: Several cracks were observed on the interior and exterior of the building. Metal supports on the exterior of the building is rusty and pulling away from the brick. The floor in front of the showers is deteriorating. Several signs of water and sewage leakage is evident in the first-floor offices. This issue continues to exist. These issues continue to exist and appear to be worsening. Icicles were observed between the support beams and brick on the exterior of the building. These issues have been discussed in the past. Staff advised money has been allotted and plans have been made to address these concerns.

The Johnson County Jail is the cleanest that I have observed.

Staff is doing an exceptional job considering the physical restrictions of the jail. It is a pleasure to work with the professional staff.

The policy and procedure manual was reviewed. The manual appears to be complete and well-written.

I wish to express my appreciation to Lt. Becky Moses, Lt. Steve Nash, and the entire staff for their assistance and cooperation during the inspection.

## 50.5 Existing Facilities (prior to 07/84)

50.6(1) Forty (40) square feet for single cell used less than 16 hours ..... NA

50.6(2) Single cells – fifty (50) square feet floor space for inmates held more than 16 hours ..... NA

50.6(3) **Multiple Occupancy Cells** - Forty (40) square feet floor space for first inmate, 20 square feet for each additional held less than 16 hours ..... 1f

50.6(4) **Multiple occupancy cells** - Fifty (50) square feet for first inmate. Thirty square feet additional space per inmate in multiple occupancy cells held over 16 hours ..... NA

50.6(5) **Designed capacity not exceeded** ..... 1b

50.6(6) **Dormitory** - Sixty (60) square feet for each inmate ..... NA

50.6(7) a) Seven (7) feet of ceiling height ..... 1f  
b) Bunk of adequate size ..... 1b  
c) Access to functional toilet ..... 1b  
d) Access to lavatory ..... 1b  
e) Sufficient tables and seats for rated capacity ..... 1b  
f) Functional shower ..... 1b

50.6(8) Thirty (30) square feet for dayroom facilities; fifteen (15) square feet for each additional inmate ..... 1f

## 50.6 New Construction (after 07/84)

a) seventy (70) square feet for each single cell ..... NA  
b) fifty (50) square feet for each additional inmate ..... NA  
c) designed capacity not exceeded ..... NA  
d) sixty (60) square feet for each inmate in a dormitory unit ..... NA

## 50.7(2) Non-Maximum

a) seven (7) feet of ceiling height ..... NA  
b) adequate size bunk and seats for capacity of each unit ..... NA  
c) Desks/tables-chairs/seats to accommodate capacity ..... NA  
d) Dayroom – thirty (30) square feet for first inmate. Fifteen (15) for each additional inmate ..... NA  
e) Functional shower ..... NA  
f) Lavatory for each 9 inmates ..... NA  
g) Toilet for each 9 inmates ..... NA

50.7(3) **Maximum** Security type toilet/lavatory ..... NA

50.7(4) **Holding area** – twenty (20) square feet per inmate not to exceed eight inmates ..... NA

50.7(5) Natural lighting when practical ..... NA

50.7(6) Ability to segregate according to law ..... NA

50.7(7) No unit is to exceed rated capacity ..... NA

## 50.7 New Construction (after 09/01)

### 50.8 (1)

Single cell 70 sq. ft. ..... NA  
Multiple occupancy 35 unencumbered sq. ft. per inmate ..... NA  
Dormitory 60 sq. ft. per inmate ..... NA

### 50.8 (2)

a) Seven(7) feet of ceiling height ..... NA  
b) Adequate size bunk for each inmate ..... NA  
c) Desks/tables-chairs/seats for each inmate ..... NA  
d) Dayroom of 30 square feet for first inmate, 15 sq. ft for each additional inmate ..... NA  
e) Shower for each group of 12 inmates ..... NA  
f) Lavatory for each group of 9 inmates ..... NA  
g) Toilet for each group of (9) inmates ..... NA

50.8 (3) Toilet/lavatory accessible at all times ..... NA

50.8 (4) Holding cells – twenty (20) square feet per inmate, not to exceed eight (8) inmates ..... NA

50.8 (5) Adequate exercise area. Minimum fifteen (15) square feet per inmate expected to use ..... NA

<b>50.8 (6)</b> Natural lighting where practical .....	<u>NA</u>
<b>50.8 (7)</b> Segregation according to law/regulations .....	<u>NA</u>
<b>50.8 (8)</b> No unit to exceed rated capacity.....	<u>NA</u>
<b>50.8 New Construction (after 12/28/05)</b>	
Single cell 35 sq. ft. unencumbered .....	<u>NA</u>
Single cell more than 10 hrs. per day 70 sq. ft. ....	<u>NA</u>
Multiple occupancy. 25 sq. ft. unencumbered per occupant .....	<u>NA</u>
Multiple occupancy. More than 10 hrs. per day 35 sq. ft unencumbered per occupant .....	<u>NA</u>
Dormitory cell 35 sq. ft unencumbered per occupant .....	<u>NA</u>
<b>Housing units provide:</b>	
a) seven (7) ft. of ceiling height .....	<u>NA</u>
b) bunk for each occupant 12 in. off floor .....	<u>NA</u>
c) Desk/table/seats/chairs for each occupant .....	<u>NA</u>
d) Dayroom 35 sq. ft. unencumbered per occupant. No less than 100 sq. ft. exclusive of showers and toilets.	<u>NA</u>
Seating and writing surfaces. (Dormitories excluded.) .....	<u>NA</u>
e) Shower for each 12 occupants .....	<u>NA</u>
f) Lavatory for each 9 occupants .....	<u>NA</u>
g) Toilet for each 9 occupants.(Urinals may be substituted for 1/3 of toilets in male housing .....	<u>NA</u>
<b>Maximum security</b> -Has security type fixtures .....	<u>NA</u>
<b>Holding cells</b> -20 sq. ft. of floor space. Place for setting. Maximum capacity of 8 prisoners .....	<u>NA</u>
<b>Special needs cells</b> -40 sq. ft. floor space .....	<u>NA</u>
<b>Exercise area</b> -15 sq. ft. per person using the area. Not less than 500 sq. ft. ....	<u>NA</u>
<b>Natural Lighting</b> .....	<u>NA</u>
<b>Ability to segregate according to existing laws</b> .....	<u>NA</u>
<b>Capacity is not exceeded</b> .....	<u>NA</u>
<b>All door swing with exit traffic</b> .....	<u>NA</u>
<b>Recreation area ceiling height 18ft.</b> (New and renovations as of July 1, 2008 and after) .....	<u>NA</u>
<b>Does the jail utilize direct supervision</b> .....	<u>NA</u>

Above requirements verified by measurement previously and there have been no significant changes.

IOWA DEPARTMENT OF CORRECTIONS - JUVENILE DETENTION MONITORING REPORT

Facility Name: Johnson County Jail Date: January 6, 2025

Administrator: Capt. John Good, AJA Becky Moses Phone: 319-356-6025

A.  This facility can adequately separate juvenile prisoners from adult prisoners when both are held in custody by placing only juveniles in cells, (**identified in the statement of facts**), which are separated from other cells or areas by solid doors and walls or are of sufficient distance to prohibit all but haphazard/incidental conversational and visual contact with adult prisoners or juveniles are under staff supervision. Pursuant to I.C. 356 and IAC 201-50.13, or IAC 201-51.11 this facility is found to be in substantial compliance with the above codes and is therefore certified to hold juveniles waived to the adult court.

B.  This facility is not in compliance with I.C. 356 and IAC 201-50.13 and therefore may not hold juveniles.

**Note to what extent separation of juvenile and adult offenders exists in the areas listed below.**

	1	2	3	4	5	6 Y or N (Comments)
Intake	x					
Housing					x	
Dining					x	
Recreation					x	
Education					x	
Vocation/Work					x	
Visiting	x					
Transportation	x					
Medical/Dental	x					
Designated Non-secure Hold Area						Office

**Use the following code in describing the extent of separation:**

1. Adult prisoners and juveniles can have physical contact with each other (no separation).
2. Adult prisoners and juveniles can see or hear each other (physical separation).
3. Conversation is possible although they cannot see each other (sight separation).
4. Adult prisoners and juveniles can see each other but no conversation is possible (sound separation).
5. Adult prisoners and juveniles cannot see or talk to each other (sight and sound separation).
6. Policy and procedures ensure compliance with the above code sections. (Yes or No) (Comment)

**STATEMENT OF FACTS**

Johnson County does not house juveniles by administrative order of the sheriff. Johnson County could house juveniles in the future by utilizing an entire cell block.

*Delbert G. Longley, Jail Inspector*

## **Johnson County Jail Inspection Information**

**Sheriff:** Brad Kunkel  
**Address:** 511 S. Capital  
Iowa City, Iowa 52242  
**Phone:** 319-356-6020  
**Email:** bkunkel@johnsoncountyiowa.gov

**Jail Administrator:** Capt. John Good  
**Address:**

**Phone:** 319-356-6025  
**Email:** jgood@johnsoncountyiowa.gov

**Jail address:** \_\_\_\_\_  
\_\_\_\_\_

**Chairperson BOS:** Jon Green  
913 S. Dubuque St.  
Iowa City, Iowa 52242  
**Phone:** 319-339-6000  
**Email:** jgreen@johnsoncountyiowa.gov

**County Attorney:** Rachel Zimmerman-Smith  
**Address:** 417 S. Clinton St.  
Iowa City, Iowa 52242  
**Phone:** 319-339-6100  
**Email:** [rzimmerm@johnsoncountyiowa.gov](mailto:rzimmerm@johnsoncountyiowa.gov)

### Type of jail staff:

Place number of  
each type of staff  
on the line

## Jailer/Dispatchers

### Combination Civilian/Deputy

29 Fulltime Deputy

8 Fulltime Civilian  
4 Parttime Civilian

## 4 Part time Civilian Part time Deputy

<b>Staff Schedules:</b> Place shift hours on the lines	<u>0700-1900</u> <u>1900-0700</u> <hr/> <hr/>	<b>Number of staff:</b> Enter number of staff working on each shift	<u>6/8</u> <u>4/7</u> <hr/>
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**Date facility constructed** 1981  
**Renovation dates:** 2001 Added 8 Temporary beds

**Permanent beds or general population capacity:** 92

## Temporary holding cells:

**Total capacity:** 117

**The jail charges a daily rate of: \$0 Room/Board fees from sentenced prisoners.**

\$20 Work accommodated fees from sentenced prisoners. \$0 Other Counties.