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Office of Professional Responsibility
Management Inspections and Detention Oversight
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**Office of Detention Oversight
Compliance Inspection**

**Enforcement and Removal Operations
Chicago Field Office
Caldwell County Detention Center
Kingston, Missouri**

August 14 - 16, 2012

**COMPLIANCE INSPECTION
CALDWELL COUNTY DETENTION CENTER
CHICAGO FIELD OFFICE**

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EXECUTIVE SUMMARY

The Office of Professional Responsibility (OPR), Office of Detention Oversight (ODO) conducted a Compliance Inspection (CI) of the Caldwell County Detention Center (CCDC) in Kingston, Missouri, from August 14 to 16, 2012. CCDC, which opened in 2004, is owned by Caldwell County and operated by the Caldwell County Sheriff's Department. U.S. Immigration and Customs Enforcement (ICE), Office of Enforcement and Removal Operations (ERO) began housing detainees at CCDC in July 2004 under an intergovernmental service agreement (IGSA) between ICE and Caldwell County. Male and female detainees of all security classification levels (Level I – lowest threat, Level II – medium threat, Level III – highest threat) can be detained at the facility for periods in excess of 72 hours. CCDC has a total capacity of 128 beds, and can accommodate a maximum of 75 ICE detainees. At the time of the CI, CCDC housed 40 male ICE detainees and no female detainees. The average daily detainee population is 38. The average length of stay for detainees is 11 days. Contractors Catering by Marlin (CBM) provide food service and Correctional Healthcare Companies (CHC) provide medical care. The facility holds no accreditations.

The ICE ERO Field Office Director (FOD) in Chicago, Illinois (ERO Chicago) is responsible for ensuring facility compliance with ICE policies and the ICE National Detention Standards (NDS). An Assistant Field Office Director (AFOD) at the ERO Office in Kansas City, Missouri (ERO Kansas City) has oversight responsibility for CCDC. No ICE employees are permanently stationed at CCDC. An ERO Kansas City Supervisory Detention and Deportation Officer (SDDO), Immigration Enforcement Agents (IEA) and Deportation Officers (DO) conduct oversight visits at CCDC to monitor conditions of confinement and interact with facility staff and detainees. No Detention Service Manager (DSM) is assigned to CCDC.

The Caldwell County Sheriff is the highest-ranking official and is responsible for oversight of CCDC daily operations. In addition to the Sheriff, supervisory staff at CCDC includes (b)(7) Jail Administrator, (b)(7) Assistant Administrator, and (b)(7) Sergeants. CCDC non-supervisory staff consists of (b)(7) detention officers and (b)(7) maintenance worker.

In May 2012, ERO Detention Standards Compliance Unit contractor, the Nakamoto Group, Inc., conducted an Annual Review of the NDS at CCDC. The facility received an overall rating of "acceptable," and was found compliant with all 36 standards reviewed.

This is the first ODO CI conducted at CCDC. During this CI, ODO reviewed 16 NDS. Nine standards were determined to be fully compliant, while 16 deficiencies were found in the following seven standards: Admission and Release (3 deficiencies), Detainee Grievance Procedures (2), Environmental Health and Safety (5), Food Service (1), Special Management Unit (Administrative Segregation) (1), Special Management Unit (Disciplinary Segregation) (1), and Staff-Detainee Communication (3).

This report details all deficiencies and refers to the specific, relevant sections of the NDS. ERO will be provided a copy of the report to assist in developing corrective actions to resolve the

16 deficiencies. These deficiencies were discussed with CCDC and ICE personnel on-site during the inspection, as well as during the closeout briefing conducted on August 16, 2012.

Overall, ODO found CCDC to be orderly and well-managed. Several deficiencies identified involved the improper filing of documentation in detention files, improper inventory of chemicals stored in the facility, and detainees who were not provided with detainee handbooks upon admission, but were able to obtain them through an electronic kiosk system in their housing units. ODO found the sanitation of the facility to be satisfactory overall, including the housing units and common areas; however, in one of two showers in the admissions area, ODO observed mold on the ceiling, a build-up of soap scum, and trash on the floor and in the drain. Facility staff was in the process of cleaning the shower stall on the final day of the inspection.

During the admission process, intake officers conduct medical pre-screenings, create detention files, and produce identification wristbands that verify detainee security classification levels. The facility does not have a site-specific orientation program or a medium to provide ICE detainees with an orientation to the facility. Facility staff stated an orientation program is being developed and approved by the Jail Administrator. Hygiene supplies and appropriate clothing are provided to detainees at admission.

Detainees are not issued a detainee handbook upon admission; however, the detainee handbook is available in English and Spanish through the kiosk system, which is located in detainee housing units. CCDC uses an interactive kiosk system, which is a touch-screen computer placed in a secure enclosure, enabling ICE detainees to have electronic access to make requests, submit grievances, request sick call, access the detainee handbook, and access or request other services. The kiosk system routes requests electronically to appropriate CCDC staff, who then respond to the detainee requests. This system delivers detainee correspondence in an efficient and expedient manner, and is identified as a best practice at CCDC.

Detainees can request the detainee handbook at kiosks in all housing units, but CCDC staff informed ODO that no instructions have been provided to detainees on how to access the handbook using the kiosk system. The Jail Administrator said instructions in English and Spanish on how to use the kiosk system would be posted prior to completion of the CI; however, ODO did not observe any posted instructions by the end of the CI, and no indication was given for when the instructions would be posted.

CCDC maintains a dedicated space for the law library, which contains equipment and supplies to support legal research and case preparation, including two computers equipped with the most recent version of Lexis-Nexis and word processing software. Detainees are afforded up to five hours of law library access per week, and can print documents with the assistance of a staff member. Procedures for accessing legal materials are addressed in the detainee handbook and posted in the law library.

ICE staff conducts scheduled and unscheduled visits throughout the week at CCDC to address detainee requests and concerns. These visits are documented on the ICE Facility Liaison Visit Checklist maintained at the ERO Kansas City office. An SDDO visits monthly to monitor conditions of confinement, and interact with detainees and facility staff to address any concerns

or issues. As a result of interviews with ICE and facility staff and a review of visitation logbooks, ODO determined ERO field office management does not conduct unannounced visits to CCDC.

ODO verified detainees are able to submit requests and questions to ICE and CCDC staff through the kiosk system or by requesting forms from CDCC staff. ODO confirmed request forms are available within the housing units, and responses to requests are timely. ODO also observed completed detainee requests are not filed in the detainee detention files.

CCDC has a detainee grievance system that allows detainees to file informal, formal, and emergency grievances, and to appeal those grievance decisions. A designated Grievance Officer (GO) is responsible for addressing all detainee grievances. Detainees access a kiosk system in each housing unit to file formal grievances. Four formal grievances were filed by ICE detainees during the eight months preceding the CI. All were reviewed by ODO and resolutions were listed. ODO determined all grievances were properly investigated and responses were provided timely. There is no established grievance committee, but the Jail Administrator indicated one would be formed immediately. Original copies of all grievances are maintained for three years in a master grievance file in a file cabinet in the GO's office; however, copies of all grievances are not placed in individual detention files. The Jail Administrator stated copies of all grievances would be placed in detainee detention files going forward.

The food service area was clean and orderly. Food service staff is comprised of the Food Service Administrator (FSA) and (b)(7)e cook supervisors. No ICE detainees work in food service. ODO verified a registered dietician certified both the master menu cycle and special diet menus as nutritionally adequate. The menus are diverse and include two hot meals per day. ODO observed labels on leftover food items, which indicated they had been stored for 72 hours, as opposed to the maximum 24-hour storage time for leftovers. ODO was informed maintaining leftovers for up to 72 hours was common practice at CCDC. Using or discarding leftovers within 24 hours as required by the standard assures potentially spoiled food is not served, reducing the risk of food-borne illness. The food items were disposed of during the review.

CCDC shift supervisors conduct daily fire and safety inspections; however, maintenance staff do not conduct monthly fire and safety inspections. Monthly inspections by maintenance staff complement inspections by shift supervisors and ensure maintenance expertise is applied in identifying possible fire/safety hazards. Emergency keys are not drawn and tested during fire drills. Verifying the operability of emergency keys in the course of fire drills assures expeditious egress in the event of an emergency. CCDC staff tests the emergency power generator weekly for 25 minutes. The NDS requires at least bi-weekly testing for one hour. In addition, the generator is tested and serviced by an external company annually rather than quarterly as required. Emergency generators serve a vital life-safety function in the event of a power outage; therefore, prescribed preventive maintenance and testing are essential.

Health care services are well managed and no deficiencies were identified during a review of the Medical Care NDS. The CCDC medical unit is adequately staffed. The Health Services Administrator (HSA), who is a licensed practical nurse (LPN), is responsible for providing all health care and nursing services at CCDC. Provider coverage consists of a Clinical Director,

who is a medical doctor on-site every Wednesday, and a second physician who is on-call during non-business hours. Mental health services are provided under contract with a social worker, who is on-call when needed. Dental services are provided free of charge to ICE detainees by a dentist in the local community. There is 24-hour nursing coverage, seven days per week. ODO reviewed training records of the entire medical staff and (b)(7) detention officers to gauge compliance with the standard. All medical staff had current professional licenses and cardiopulmonary resuscitation (CPR) training certificates; all (b)(7) detention officers had current CPR certifications.

The nursing staff reviews screening forms within 12 hours of admission, and conducts assessments of detainees whose forms reflect possible medical or mental health issues. ODO verified intake and tuberculosis screening was conducted in accordance with the NDS in all 40 records reviewed. Of the 40 records reviewed, 26 documented the Clinical Director conducted physical examinations (PE) within 14 days of admission; the detainees in the remaining 14 records were new arrivals and all were scheduled for PEs. Documentation by and interviews of the Clinical Director confirmed PEs are hands-on, and detainees are evaluated for dental, mental health, and chronic care needs. Detainees are scheduled for follow-up, as needed.

Access to medical services is explained to detainees during intake screening, and information concerning the sick call process is posted in the housing areas. Detainees may enter sick call requests in the kiosk system, or may complete written request forms. ODO identifies the availability of the kiosk system in each unit for sick call requests as a best practice; it affords efficient, effective, and confidential access to health care. Sick call is conducted within 24 hours of receipt of requests by the nursing staff, following protocols approved by the on-site physician. Medications are distributed twice a day by nurses.

ODO verified detainees are screened for suicide potential during the intake process. All staff receives initial and ongoing suicide prevention training as required by the standard. There have been no ICE detainee suicide attempts, suicides, or deaths at CCDC. There was one detainee suicide watch in the past year. Review of this record confirmed appropriate intervention and monitoring, including documented 15-minute checks. The day after placement on suicide watch, the detainee was transferred to a more appropriate facility for continuation of suicide watch.

ODO reviewed CCDC Sexual Abuse and Assault Prevention and Intervention (SAAPI) policy to determine if the facility has policies in place to prevent sexual abuse and assaults on detainees, provides effective intervention and treatment for victims, and controls, disciplines, and prosecutes the perpetrators, in accordance with their policy. Information concerning the SAAPI is posted in English and Spanish in all housing units and other locations throughout the facility. The SAAPI policy provides for notification to ERO Chicago and ICE OPR via the Joint Intake Center for any violation. ODO interviewed CCDC and ICE staff who advised there is total adherence to the policy and a zero tolerance for sexual abuse, assault, or harassment on any detainee.

CCDC's Special Management Unit (SMU) for males has two tiers, consisting of seven double-occupancy cells. The lower tier is used for disciplinary segregation, and has three cells; the top tier is used for administrative segregation, and has four cells. ODO's inspection revealed the unit

is well ventilated, adequately lit, appropriately heated and cooled, and maintained in a fair condition. All cells are equipped with beds, which are securely fastened to the floor. ODO was informed by staff that females assigned to segregation status remain in their cells in the general housing unit.

There were no ICE detainees in the SMU at the time of the review. ODO's inspection of SMU logs for three detainees previously on administrative segregation documented visits by medical professionals and shift supervisors, and required privileges including recreation, visitation, and access to legal materials were provided. Detainees receive regular meals while on administrative segregation; however, they are not given new, disposable utensils with each meal.

Administrative segregation detainees are issued a combination spoon/fork made of plastic, which they are required to keep and re-use. This deficiency was cited during the May 2012 ERO annual inspection. While on disciplinary segregation, detainees are not allowed social visits. ODO confirmed visitation privileges are restricted to visits for legal and religious purposes only. Review of records for three detainees previously on disciplinary segregation and interviews with CCDC staff confirmed detainees were not allowed social visits.

CCDC has a comprehensive policy on the use of force that stresses confrontation avoidance, and addresses all requirements of the standard. All correctional officers are trained in the use of force and team technique. Review of training files of (b)(7)(c) officers confirmed completion of training. ODO was informed there were two immediate and no calculated use of force incidents involving detainees this year. ODO's review of documentation for the two immediate use-of-force incidents confirmed officers provided thorough written accounts of the incidents and after-action reviews, and post-incident medical examinations were completed. CCDC staff also timely notified ICE of the incidents.

INSPECTION PROCESS

ODO inspections evaluate the welfare, safety, and living conditions of detainees. ODO primarily focuses on areas of noncompliance with the ICE NDS or the ICE Performance-Based National Detention Standards (PBNDS), as applicable. The NDS apply to CCDC. In addition, ODO may focus its inspection based on detention management information provided by the ERO Headquarters (HQ) and ERO field offices, and issues of high priority or interest to ICE executive management.

ODO reviewed the processes employed at CCDC to determine compliance with current policies and detention standards. Prior to the inspection, ODO collected and analyzed relevant allegations and detainee information from multiple ICE databases, including the Joint Integrity Case Management System (JICMS), the ENFORCE Alien Booking Module (EABM), and the ENFORCE Alien Removal Module (EARM). ODO also gathered facility facts and inspection-related information from ERO HQ staff to prepare for the site visit at CCDC.

REPORT ORGANIZATION

This report documents inspection results, serves as an official record, and is intended to provide ICE and detention facility management with a comprehensive evaluation of compliance with policies and detention standards. It summarizes those NDS that ODO found deficient in at least one aspect of the standard. ODO reports convey information to best enable prompt corrective actions and to assist in the on-going process of incorporating best practices in nationwide detention facility operations.

OPR classifies program issues into one of two categories: deficiencies and areas of concern. OPR defines a deficiency as a violation of written policy that can be specifically linked to the NDS, ICE policy, or operational procedure. OPR defines an area of concern as something that may lead to or risk a violation of the NDS, ICE policy, or operational procedure. When possible, the report includes contextual and quantitative information relevant to the cited standard. Deficiencies are highlighted in bold throughout the report and are encoded sequentially according to a detention standard designator.

Comments and questions regarding the report findings should be forwarded to the Deputy Division Director, OPR ODO.

INSPECTION TEAM MEMBERS

(b)(6), (b)(7)c

Special Agent (Team Leader)
Special Agent
Management Program Analyst
Contract Inspector
Contract Inspector
Contract Inspector

ODO, Houston
ODO, Headquarters
ODO, Headquarters
Creative Corrections
Creative Corrections
Creative Corrections

OPERATIONAL ENVIRONMENT

INTERNAL RELATIONS

ODO interviewed the CCDC Jail Administrator, the ICE AFOD, and the SDDO. All reported the working relationship between CCDC and ICE personnel is good.

CCDC and ICE staff stated morale is high, and the working conditions are adequate to accomplish all required duties. The Jail Administrator stated he has seen ICE staff visiting detainees in the housing units throughout the week, communicating with detainees, and addressing detainee issues and concerns.

DETAINEE RELATIONS

ODO interviewed 12 randomly-selected ICE detainees to assess the overall living and detention conditions at the facility. Overall, the detainees expressed satisfaction with the treatment and services provided at CCDC. ODO received no complaints concerning issuance and replenishment of hygiene supplies, sending and receiving mail, visitation, religious services, or the grievance process. All detainees stated outdoor recreation is offered five days a week for one hour a day. All detainees stated the health care staff is attentive and responsive.

Five detainees complained about the quantity of food portions. During a review of the Food Service NDS, ODO verified all menus were certified as nutritionally adequate by a registered dietician.

ICE detainees were aware they had a case officer, but none of the detainees could identify their assigned DO. ODO verified ICE visitation schedules are posted in the housing units. All detainees stated they did not receive a detainee handbook upon arrival and were not aware they could access the handbook through the CCDC kiosk system. ODO interviewed CCDC staff, who confirmed ICE detainees are not instructed the facility handbook is accessible through the kiosk system.

ICE NATIONAL DETENTION STANDARDS

ODO reviewed a total of 16 NDS and found CCDC fully compliant with the following nine standards:

- Access to Legal Material
- Detainee Classification System
- Detainee Handbook
- Detainee Transfer
- Funds and Personal Property
- Medical Care
- Suicide Prevention and Intervention
- Telephone Access
- Use of Force

As these standards were compliant at the time of the review, a synopsis for these standards was not prepared for this report.

ODO found deficiencies in the following seven standards:

- Admission and Release
- Detainee Grievance Procedures
- Environmental Health and Safety
- Food Service
- Special Management Unit (Administrative Segregation)
- Special Management Unit (Disciplinary Segregation)
- Staff-Detainee Communication

Findings for each of these standards are presented in the remainder of this report.

ADMISSION AND RELEASE (AR)

ODO reviewed the Admission and Release standard at CCDC to determine if procedures are in place to protect the health, safety, security, and welfare of each person during the admission and release process, in accordance with the ICE NDS. ODO reviewed policies and detention files, interviewed facility staff and detainees, and observed the admission and release process.

Upon admission to CCDC, detainees are provided clothing, bedding, and hygiene supplies. Intake processing officers create detention files for each arriving detainee. ODO reviewed 30 detention files (15 active and 15 inactive) to determine if they included required documents generated during detainees' stays. ODO confirmed none of the 30 files contained a Form I-203 or I-203a, Order to Detain or Release (**Deficiency AR-1**).

CCDC does not have a site-specific orientation program for newly-arriving detainees (**Deficiency AR-2**) to inform detainees about facility operations, programs, services, and prohibited activities. Further, ODO's review of 30 detention files and interviews of 12 detainees confirmed a site-specific detainee handbook is not issued upon admission (**Deficiency AR-3**) to provide detainees with critical information on facility rules, procedures, and services. CCDC staff stated the detainee handbook, in English and Spanish, is located on the kiosk system; however, no instructions are provided to detainees on how to access the handbook. CCDC staff stated instructions in English and Spanish regarding kiosk usage will be posted and provided to detainees. They also stated CCDC provides translation assistance to detainees exhibiting literacy or language difficulties in comprehending the handbook, as well as those who request it.

During the release process, detainees are fingerprinted; property is returned; and medication, funds, and valuables are turned over to transport officers. Any claims of missing property are immediately documented on a local form and investigated. Abandoned property is forwarded to ICE for appropriate disposition.

STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS

DEFICIENCY AR-1

In accordance with the ICE NDS, Admission and Release, section (III)(H), the FOD must ensure an order to detain or release (Form I-203 or I-203a) bearing the appropriate official signature shall accompany the newly arriving detainee. IGSA facilities shall forward the detainee's A-file or temporary work file to the INS office with jurisdiction. Staff shall prepare specific documents in conjunction with each new arrival to facilitate timely processing, classification, medical screening, accounting of personal effects, and reporting of statistical data.

DEFICIENCY AR-2

In accordance with the ICE NDS, Admission and Release, section (III)(J), the FOD must ensure all facilities shall have a medium to provide INS detainees an orientation to the facility. In IGSA's the INS office of jurisdiction shall approve all orientation procedures.

NOTE: Under section (III) of this standard, the letter (J) occurs twice. This citation refers to the first citation of the letter (J).

DEFICIENCY AR-3

In accordance with the ICE NDS, Admission and Release, section (III)(K), the FOD must ensure, upon admission every detainee will receive a detainee handbook. It will fully describe all policies, procedures, and rules in effect at the facility, in accordance with the “Detainee Handbook” standard.

DETAINEE GRIEVANCE PROCEDURES (DGP)

ODO reviewed the Detainee Grievance Procedures standard at CCDC to determine if a process to submit formal or emergency grievances exists, and responses are provided in a timely manner, without fear of reprisal. In addition, the review was conducted to determine if detainees have an opportunity to appeal responses, and if accurate records are maintained, in accordance with the ICE NDS. ODO visited housing units, interviewed staff and detainees, and reviewed policies and procedures, the detainee handbook, detention files, and the grievance log.

Detainees have the opportunity to file informal and formal grievances, and appeal the decisions to those grievances. Detainees can bypass the informal step and proceed directly to the formal grievance process at any time. Detainees can access the kiosk system or use grievance forms available in each housing unit to file formal grievances. Translation services are available upon request for detainees who may encounter difficulty filing grievances due to language issues. Procedures exist for filing emergency grievances.

A designated grievance officer (GO) is responsible for addressing all detainee grievances. Detainees who have submitted grievances have the opportunity to discuss grievances with the GO. Appeals are reviewed by the Jail Administrator, who provides a written response within 15 working days. CCDC does not have an established grievance committee (**Deficiency DGP-1**). The Jail Administrator indicated a grievance committee would be formed immediately.

The GO is responsible for the collection of all grievances, and maintains a Detainee Grievance Log. Four grievances were filed by ICE detainees during the eight months preceding the CI. The four grievances included leaks in the ceiling, one housing unit locked down for unruly behavior, an officer used a raised voice in a rude manner, and a detainee erroneously locked down in his cell. ODO reviewed all four grievances and the listed resolutions and determined all grievances were properly investigated and responses were timely provided.

ODO also reviewed the detention files for the detainees who filed the four formal grievances; the grievances were not filed in the detention files. The GO stated copies of grievance forms are maintained in a master file in a file cabinet specifically designated for storing grievances, but are not maintained in detention files (**Deficiency DGP-2**). The copies of the grievance forms are maintained for three years. The GO stated grievance paperwork will be maintained in detention files in the future. Placing requests in detention files allows ICE and CCDC staff access to prior grievances to determine whether issues raised by detainees have been previously resolved or addressed.

STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS

DEFICIENCY DGP-1

In accordance with the ICE NDS, Detainee Grievance Procedures, section (III)(A)(2), the FOD must ensure the OIC must allow the detainee to submit a formal, written grievance to the facility's grievance committee. The detainee may take this step because he/she is not satisfied with the outcome of the informal process, or because he/she decides to forgo the informal

procedures. The detainee shall be given the opportunity to obtain assistance from another detainee or facility staff in preparing a grievance.

DEFICIENCY DGP-2

In accordance with the ICE NDS, Detainee Grievance Procedures, section (III)(E), the FOD must ensure a copy of the grievance will remain in the detainee's detention file for at least three years. The facility will maintain that record for a minimum of three years and subsequently, until the detainee leaves INS custody.

ENVIRONMENTAL HEALTH AND SAFETY (EH&S)

ODO reviewed the Environmental Health and Safety standard at CCDC to determine if the facility maintains high standards of cleanliness and sanitation, safe work practices, and control of hazardous materials and substances, in accordance with the ICE NDS. ODO toured the facility, interviewed staff, and reviewed policies and documentation of inspections, hazardous chemical management, and other relevant documents.

ODO found the sanitation of the facility to be satisfactory overall, including the housing units and common areas. However, in one of two showers in the booking area, ODO observed mold on the ceiling, a buildup of soap scum, and trash on the floor and in the drain. Facility staff was in the process of cleaning the shower stall on the final day of the inspection.

The facility maintains a master index of hazardous substances, which includes diagrams of storage locations and Material Safety Data Sheets. Review of the running inventory of hazardous substances stored in the chemical storage room found two inaccuracies. ODO found three bottles of the chemical "Sanitime" were documented on the inventory, though only two were present; and two one-gallon containers of oven cleaner "OvenLoven" were not listed (**Deficiency EH&S-1**). The containers of "OvenLoven" were labeled "poison" and "harmful if swallowed." The inventory of "Sanitime" was corrected, and the "OvenLoven" was removed from the chemical storage room to a storage area outside of the secure perimeter of the facility. Maintaining strict inventories assures hazardous substances are accounted for and properly controlled, supporting detainee and staff safety.

Shift supervisors conduct daily inspections of the facility to identify potential fire and safety issues. Maintenance staff does not conduct monthly fire and safety inspections (**Deficiency EH&S-2**). Monthly inspections by maintenance staff complement inspections conducted by shift supervisors, and ensure maintenance expertise is applied in identifying possible hazards.

Fire drills are conducted monthly in each area of the facility. Review of reports found the fire drills were well documented, including recording locations, participants, and the time of drill initiation and completion. Emergency keys are not drawn and tested during fire drills (**Deficiency EH&S-3**). Verifying the operability of emergency keys in the course of fire drills assures prompt evacuation in the event of an emergency.

Facility staff tests CCDC's emergency power generator weekly for 25 minutes. The NDS requires at least bi-weekly testing for one hour. In addition, the generator is tested and serviced by an external company annually rather than quarterly as required (**Deficiency EH&S-4**). Emergency generators serve a vital life-safety function in the event of a power outage; therefore, prescribed preventive maintenance and testing is essential. The maintenance supervisor voiced concern about the cost of quarterly inspections by an external provider.

Due to space constraints, CCDC does not have a room dedicated as a barbering area. Instead, barber operations are conducted in open areas of detainee housing units. CCDC staff stated no space was available for this service and no indication was made that CCDC would dedicate other

areas for this service. There is no access to running water in the areas, and sanitation regulations are not posted (**Deficiency EH&S-5**). Detainees with barbering skills are used to cut hair. Barbering supplies, including equipment and disinfectant, are maintained in Central Control and issued at the designated time for barbering.

STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS

DEFICIENCY EH&S-1

In accordance with the ICE NDS, Environment Health and Safety, section (III)(A), the FOD must ensure every area will maintain a running inventory of the hazardous (flammable, toxic, or caustic) substances used and stored in that area. Inventory records will be maintained separately for each substance, with entries for each logged on a separate card (or equivalent). That is, the account keeping will not be chronological, but filed alphabetically, by substance (dates, quantities, etc.).

DEFICIENCY EH&S-2

In accordance with the ICE NDS, Environmental Health and Safety, section (III)(L)(2), the FOD must ensure a qualified departmental staff member will conduct weekly fire and safety inspections [sic]; the maintenance (safety) staff will conduct monthly inspections. Written reports of the inspections will be forwarded to the OIC for review and, if necessary, corrective action determinations. The Maintenance Supervisor or designate will maintain inspection reports and records of corrective action in the safety office.

DEFICIENCY EH&S-3

In accordance with the ICE NDS, Environmental Health and Safety, section (III)(L)(4)(c), the FOD must ensure emergency-key drills will be included in each fire drill, and timed. Emergency keys will be drawn and used by the appropriate staff to unlock one set of emergency exit doors not in daily use. NFPA recommends a limit of four and one-half minutes for drawing keys and unlocking emergency doors.

DEFICIENCY EH&S-4

In accordance with the ICE NDS, Environmental Health and Safety, section (III)(O), the FOD must ensure power generators will be tested at least every two weeks. Other emergency equipment and systems will undergo quarterly testing, with follow-up repairs or replacement as necessary.

The biweekly test of the emergency electrical generator will last one hour. During that time, the oil, water, hoses and belts will be inspected for mechanical readiness to perform in an emergency situation. The emergency generator will also receive quarterly testing and servicing from an external generator-service company. Among other things, the technicians will check starting battery voltage, generator voltage and amperage output.

DEFICIENCY EH&S-5

In accordance with the ICE NDS, Environmental Health and Safety, section (III)(P)(1)(4), the FOD must ensure sanitation of barber operations is of the utmost concern because of the possible transfer of diseases through direct contact or by towels, combs and clippers. Towels must not be

reused after use on one person. Instruments such as combs and clippers will not be used successively on detainees without proper cleaning and disinfecting. The following standards will be adhered to:

1. The operation will be located in a separate room not used for any other purpose. The floor will be smooth, nonabsorbent and easily cleaned. Walls and ceiling will be in good repair and painted a light color. Artificial lighting of at least 50-foot candles will be provided. Mechanical ventilation of 5 air changes per hour will be provided if there are no operable windows to provide fresh air. At least one lavatory will be provided. Both hot and cold water will be available, and the hot water will be capable of maintaining a constant flow of water between 105 degrees and 120 degrees.
4. Each barbershop will have detailed hair care sanitation regulations posted in a conspicuous location for the use of all hair care personnel and detainees.

FOOD SERVICE (FS)

ODO reviewed the Food Service standard at CCDC to determine if detainees are provided with a nutritious and balanced diet, in a sanitary manner, in accordance with the ICE NDS. ODO reviewed policy and documentation, interviewed staff, observed meal service and tray delivery, and inspected food storage and preparation areas.

CCDC's food service department is managed by CBM, a company based in Sioux Falls, South Dakota. Food service staff consists of the FSA and (b)(7)e cook supervisors, all of whom had documented medical clearances. No ICE detainees or inmates work in food service. The facility has a satellite system of meal service involving preparation of meals in the kitchen and delivery to housing units on thermal trays. Review of required inspections and temperature logs supported compliance with the standard. ODO verified all menus were certified as nutritionally adequate by a registered dietician. Religious and medically-prescribed meals were provided and properly documented. ODO observed food service staff wore appropriate clothing and attire to assure sanitation. The overall sanitation in the food service department was acceptable.

Labels on leftover food items indicated they had been stored for 72 hours, including bologna, sausage, hash brown potatoes, creamed potatoes, cooked noodles, rice, green beans, and soups (**Deficiency FS-1**). ODO was informed maintaining leftovers for up to 72 hours was common practice at CCDC. Using or discarding leftovers within 24 hours as required by the standard assures potentially spoiled food is not served, reducing the risk of food-borne illness. The food items were disposed of during the review.

STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS

DEFICIENCY FS-1

In accordance with the ICE NDS, Food Service, section (III)(D)(8), the FOD must ensure prepared food items which have not been placed on the serving line may be retained for no more than 24 hours. Leftovers offered for service a second time shall not be retained for later use, but shall be discarded immediately after offering. All leftovers shall be labeled to identify the product, preparation date, and time.

SPECIAL MANAGEMENT UNIT (SMU)

Administrative Segregation (AS)

ODO reviewed the Special Management Unit standard at CCDC to determine if the facility has procedures in place to temporarily segregate detainees for administrative reasons, in accordance with the ICE NDS. ODO toured the SMU, interviewed staff, and reviewed policies and SMU documentation.

CCDC's SMU for males has two tiers consisting of a total of seven double-occupancy cells. The top tier is used for administrative segregation, and has four cells; the lower tier is used for disciplinary segregation, and has three cells. The unit is well ventilated, adequately lit, appropriately heated and cooled, and maintained in fair condition. All cells are equipped with beds, which are securely fastened to the floor. ODO was informed by staff that females assigned to segregation remain in a cell in the general housing unit, and are subject to SMU restrictions and requirements.

No detainees were in administrative segregation during the review. ODO was informed the most common reasons for placement in administrative segregation include protective custody, known gang affiliation, or separation from the general population pending a disciplinary hearing for a serious rule violation. ODO's inspection of SMU logs for three detainees previously on administrative segregation documented visits by medical professionals and shift supervisors, and required privileges including recreation, visitation, and access to legal materials. Detainees receive regular meals while in administrative segregation; however, they are not given new, disposable utensils with each meal (**Deficiency SMU AS-1**). Instead, when placed in segregation, detainees are issued a combination spoon/fork made of heavy plastic, which they are required to keep and re-use. This deficiency was cited during the May 2012 ERO annual inspection. Issuance of new utensils assures adequate sanitation and helps prevent food-borne illness.

STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS

DEFICIENCY SMU AS-1

In accordance with the ICE NDS, Special Management Unit - Administrative Segregation, section (III)(D)(5), the FOD must ensure detainees in administrative segregation shall receive three nutritionally adequate meals per day, from the menu served to the general population. For security purposes, detainees in the SMU shall use disposable utensils only. Under no circumstances shall food be used as punishment.

SPECIAL MANAGEMENT UNIT (SMU) Disciplinary Segregation (DS)

ODO reviewed the Special Management Unit standard at CCDC to determine if the facility has procedures in place to temporarily segregate detainees for disciplinary reasons, in accordance with the ICE NDS. ODO toured the SMU, interviewed staff, and reviewed policies and SMU documentation.

As noted earlier CCDC's SMU for males has three cells in the lower tier for disciplinary segregation. Females assigned to disciplinary segregation status remain in a cell in the general housing unit. The unit is well ventilated, adequately lit, appropriately heated and cooled, and maintained in fair condition. All cells are equipped with beds, which are securely fastened to the floor.

During the ODO inspection no ICE detainees were housed in disciplinary segregation. Review of CCDC policy confirmed disciplinary segregation is a sanction imposed through the disciplinary process for violation of facility rules. The policy states detainees on disciplinary segregation are afforded standard living conditions and privileges consistent with the standard, including access to legal materials and recreation. However, visitation privileges are restricted to visits for legal and religious purposes only. While on disciplinary segregation, detainees are not allowed social visits (**Deficiency SMU DS-1**). Review of records for three detainees previously on disciplinary segregation confirmed they received privileges allowed by the facility's policy.

STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS

DEFICIENCY SMU DS-1

In accordance with the ICE NDS, Special Management Unit - Disciplinary Segregation, section (III)(D)(17), the FOD must ensure the facility shall follow the "Visitation" standard in setting visitation rules for detainees in disciplinary segregation. As a rule, a detainee retains visiting privileges while in disciplinary segregation. The determining factor is the reason for which the detainee is being disciplined. Detainees in disciplinary segregation may not be denied legal visitation. However, the OIC will implement security precautions when necessary. In such cases, legal service providers and assistants will be notified of any security concerns prior to visitation.

In accordance with the ICE NDS, Visitation, section (III)(H)(5), the FOD must ensure a detainee shall ordinarily retain visiting privileges while in administrative or disciplinary segregation status. In a facility that allows contact visits, segregated detainees may use the visiting room during normal visiting hours. Under no circumstances are detainees to participate in general visitation while in restraints. If the detainee's behavior warrants restraints, the visit will not be granted. The facility may restrict or disallow general visits for a detainee in segregation status who violates the visiting guidelines or whose behavior indicates that he/she threatens the order or security of the visiting room.

STAFF-DETAINEE COMMUNICATION (SDC)

ODO reviewed the Staff-Detainee Communication standard at CCDC to determine if procedures are in place to allow formal and informal contact between detainees and key ICE and facility staff; and if ICE detainees are able to submit written requests to ICE staff and receive timely responses, in accordance with the ICE NDS. ODO interviewed staff and ICE detainees, and reviewed logbooks, policies, and procedures.

ICE staff conducts scheduled and unscheduled visits throughout the week at CCDC to address detainee requests and concerns. These visits are documented on the ICE Facility Liaison Visit Checklist maintained at ERO Kansas City. ODO reviewed the checklists. Detainees can make requests via the electronic kiosk system in housing units or request forms from staff.

As a result of interviews with ICE and facility staff and a review of visitation logbooks, ODO determined ERO field office management does not conduct unannounced visits to CCDC (**Deficiency SDC-1**). An SDDO visits monthly to monitor conditions of confinement, and interact with detainees and facility staff to address any concerns or issues. It is vitally important for ICE management staff to conduct unannounced visits to detention facilities to observe and monitor conditions of confinement for detainees, encourage informal communication between staff and detainees, and address any concerns with facility management.

CCDC staff maintains copies of all detainee requests in a logbook and a computer-generated log. ODO reviewed the detainee request log to ensure all requests sent to ICE are reviewed and answered within 72 hours. During the period of January 19 through July 30, 2012, CCDC received 86 requests from detainees. Of the 86 requests, nine were not answered by ICE (**Deficiency SDC-2**). The remaining 77 requests were answered within 72 hours. ICE staff was unable to provide a reason why the nine requests were not answered.

ODO reviewed detention files associated with 13 detainees who submitted requests in July 2012, and discovered none of the 13 files contained request forms (**Deficiency SDC-3**). Placing requests in detention files allows ICE and CCDC staff access to prior requests to determine whether issues raised by detainees have been previously resolved or addressed.

STANDARD/POLICY REQUIREMENT FOR DEFICIENT FINDINGS

DEFICIENCY SDC-1

In accordance with the ICE NDS, Staff-Detainee Communication, section (III)(A)(1), the FOD must ensure policy and procedures shall be in place to ensure and document that the ICE Officer in Charge (OIC), the Assistant Officer in Charge (AOIC) and designated department heads conduct regular unannounced (not scheduled) visits to the facility's living and activity areas to encourage informal communication between staff and detainees and informally observing [sic] living and working conditions. These unannounced visits shall include but not be limited to:

- a. Housing Units;
- b. Food Service preferably during the lunch meal;
- c. Recreation Area;

- d. Special Management Units (Administrative and Disciplinary Segregation); and Infirmary rooms

While visiting the Special Management Unit, the detainee shall be interviewed, living conditions will be observed and detainee-housing records will be reviewed.

DEFICIENCY SDC-2

In accordance with the ICE NDS, Staff-Detainee Communication, section (III)(B)(1)(b), the FOD must ensure the detainee requests shall be forwarded to the ICE office of jurisdiction within 72 hours and answered as soon as possible and practicable, but not later than within 72 hours from receiving the request. If it is apparent that the request is serious in nature, procedures shall be in place for an expedited review and response to the detainee's request.

DEFICIENCY SDC-3

In accordance with the ICE NDS, Staff-Detainee Communication, section (III)(B)(2), the FOD must ensure all completed Detainee Requests will be filed in the detainee's detention file and will remain in the detainee's detention file for at least three years.