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Office of Detention Oversight Compliance Inspection

Enforcement and Removal Operations
New Orleans Field Office
Etowah County Detention Center
Gadsden, Alabama

March 13 - 15, 2012

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**COMPLIANCE INSPECTION
ETOWAH COUNTY DETENTION CENTER
NEW ORLEANS 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 Etowah County Detention Center (ECDC) in Gadsden, Alabama, from March 13-15, 2012. ECDC is owned by Etowah County and is operated by the Etowah County Sheriff's Office (ECSO). ECDC opened in March 1994. U.S. Immigration and Customs Enforcement (ICE) began housing detainees at ECDC in November 2000 under an Intergovernmental Service Agreement (IGSA). Currently, ICE uses ECDC to house male detainees of all security classification levels for periods in excess of 72 hours. Female detainees are not housed at ECDC. Additional bed space at ECDC is reserved for the U.S. Marshals Service and inmates received from local area law enforcement jurisdictions. Food service is provided by ECSO. Medical care is provided by Doctors' Care Physicians, P.C. ECDC is accredited by the American Correctional Association (ACA) and the National Commission on Correctional Health Care (NCCHC).

The ICE Office of Enforcement and Removal Operations (ERO), Field Office Director (FOD), New Orleans, Louisiana (FOD/New Orleans) is responsible for ensuring ECDC is in compliance with ICE policies and the ICE National Detention Standards (NDS). The Assistant Field Office Director (AFOD) assigned to the ERO office in Birmingham, Alabama, maintains oversight of ECDC. ICE staff consists of (b)(7) permanent employees: (b)(7) Supervisory Detention and Deportation Officers (SDDO), (b)(7) Deportation Officers (DO), (b)(7) Supervisory Immigration Enforcement Agent (SIEA), (b)(7) Immigration Enforcement Agent (IEA), and (b)(7) Enforcement and Removal Assistants (ERA). All are located on-site at ECDC. Additionally, a Detention Service Manager (DSM) is assigned to and co-located at ECDC. The total number of non-ICE employees at ECDC is (b)(7). The Sheriff is the highest ranking official at ECDC, and is responsible for oversight of daily operations at the facility. In addition to the Sheriff, ECDC supervisory staff includes the Chief Deputy of Detention and the Assistant Chief of Operations. Currently, most of the detainees housed at ECDC have an order of removal and are considered long-term cases due to difficulties obtaining travel documents from embassy and consular officials. The total capacity for ECDC is 879 inmates and detainees. Of those 879 beds, 350 are dedicated to ICE detainees. At the time of inspection, ECDC housed 302 ICE detainees. The average length of stay for a detainee at ECDC is 49 days.

In November 2007, the OPR Detention Facilities Inspection Group (DFIG), predecessor to ODO, conducted a Focus Review at ECDC following a letter sent to the DHS Office for Civil Rights and Civil Liberties from an ECDC detainee citing complaints about facility services, including the law library, medical care and recreation. The DFIG reviewed all NDS pertaining to the areas listed in the complaint letter. Of the ten NDS reviewed, one standard was found to be in full compliance, while nine others resulted in 23 deficiencies.

In August 2010 and July 2011, ERO Detention Standards Compliance Unit contractor MGT of America, Inc. conducted annual reviews of the NDS at ECDC. Both reviews resulted in an "Acceptable" rating, and ECDC was found compliant with all detention standards reviewed.

In October 2010, ODO conducted a Quality Assurance Review (QAR) at ECDC, reviewing 25 NDS. Of the standards reviewed, 12 were in full compliance. The remaining 13 standards

accounted for 24 deficiencies. This CI was the first inspection by ODO since the October 2010 QAR.

During this CI, ODO reviewed a total of 17 NDS, with 12 standards found to be fully compliant. A total of eight deficiencies were identified in the following five standards: Detainee Grievance Procedures (1 deficiency), Food Service (1), Funds and Personal Property (3), Medical Care (1), and Staff-Detainee Communication (2). ODO noted repeat deficiencies in the Food Service and Staff-Detainee Communication standards.

This report details all deficiencies and refers to the specific, relevant sections of the ICE NDS. OPR will provide ERO a copy of the report to assist in developing corrective actions to resolve the eight identified deficiencies. Deficiencies were discussed with ECDC and ICE staff on-site during the inspection, as well as during the closeout briefing conducted on March 15, 2012.

Overall, ODO found ECDC to be well managed and in compliance with the areas and standards inspected, with the exception of several minor deficiencies in the Detainee Grievance Procedure standard and the Funds and Personal Property standard. One deficiency each was identified in the Food Service and Medical Care NDS. Both areas were found to be well managed. No areas of concern or deficiencies were identified during the review of the Use of Force, Special Management Unit (Administrative and Disciplinary), or Environmental Health and Safety standards. Those areas were found to be well managed. ECDC and ERO management were receptive to ODO observations and demonstrated cooperation throughout the CI. ODO noted an improvement in the number of deficiencies from the October 2010 ODO QAR. ODO found two repeated deficiencies during this CI from the October 2010 QAR; one each in both the Food Service and Staff-Detainee Communication NDS.

Health care services are provided by medical personnel employed by Doctors' Care Physicians, P.C. Nursing coverage is available 24 hours a day, seven days a week. Medical staff consists of a full-time Health Services Administrator (HSA) who is also a registered nurse (RN), a Medical Director who averages 30 hours per week at the facility, a nurse practitioner with a doctorate degree in advanced nursing practice, a full-time mental health coordinator, (b)(7)e RNs, (b)(7)e Licensed Practical Nurses (LPN), and (b)(7)e medical clerk technicians. A dentist comes to the facility once a week on a fee-for-service contract. All medical staff credentials were reviewed and found current. ODO reviewed the training records of all medical personnel and (b)(7)e custody staff. Current certifications in cardiopulmonary resuscitation (CPR) and first aid were verified.

The facility's food service program is staffed by the ECDC Food Service Manager (FSM), four kitchen deputies, and an inmate work crew. No ICE detainees work in food service. ECDC uses a satellite system of meal service, which involves meal preparation in the food service area and meal delivery on trays to detainee housing areas. The menu has been certified nutritionally complete by a registered dietician. Review of the food substitution log verified that substituted items are selected from the approved master menu cycle. Review of required inspections and temperature logs confirmed compliance with the NDS. Knives and utensils were properly controlled. ODO identified a repeat deficiency from the October 2010 inspection of ECDC. The October 2010 QAR cited ECDC for maintaining only a four-day food supply rather than the 15-day food supply required by the NDS. The facility has attempted to address the deficiency by rearranging space

adjacent to the food service area and designating an additional room for food storage. ECDC now maintains a six-day food supply, but is still below the 15-day requirement. ODO was informed, and observation confirmed, that additional space is not available for the required food storage. ODO notes the food vendor that services ECDC is located approximately a quarter mile from the facility, and food supplies are ordered and received on Mondays and Thursdays each week. This arrangement allows for prompt replenishment of food supplies.

Upon arrival and before being admitted into the general population, all detainees are properly classified as Level 1 (lowest threat), Level 2 (medium threat), or Level 3 (highest threat). Security classifications are based on past criminal history or behavior problems identified during the evaluation process. ODO verified all detainees have reasonable and equitable access to telephones, and are given emergency messages and allowed to return emergency telephone calls without delay. Notification that telephone calls are subject to monitoring is addressed in the detainee handbook and conspicuously posted near all telephones.

ECDC has a grievance system that allows detainees the opportunity to file formal and informal grievances, and to appeal grievance decisions. Grievance forms are available within housing units. ECDC lacks written policy and procedures addressing the ability of detainees to file emergency grievances. An emergency grievance involves an immediate threat to detainee safety or welfare. During the CI, ODO reviewed grievances filed from January 17, 2012, through March 8, 2012. During that period, 23 formal grievances were filed. The grievances were mostly related to medical care and food service concerns. All grievances reviewed were responded to within two days of the grievance being filed. At the time of the CI, there were no outstanding grievances.

Detainees have the opportunity to file requests with both ICE and ECDC staff. Request forms are available within the housing units. ODO observed IEAs retrieving ICE request forms during daily visits performed to address detainee concerns. ODO found the facility does not maintain a log, electronic or otherwise, to record detainee requests. DOs make weekly scheduled visits with detainees for case reviews. Visits by both IEAs and DOs are documented in logbooks found in the housing units. Visitation schedules for ICE staff are conspicuously posted in the housing units.

Corrective action had been taken to resolve deficiencies identified in the previous October 2010 inspection. ECDC revised its Funds and Personal Property policy to include the inventory and receipt of detainee property. All detainees sign a property receipt at admission and release. Detainees are given a property receipt, and a copy is placed in the detention file. An ECDC officer also signs the receipt during the detainee's admission and release. A review of 16 detention files confirmed that properly executed Form I-203s, Orders to Detain or Release, were included in all files; this verified revised policy and procedures are being followed.

ICE detainees at ECDC are afforded access to the law library up to five hours a week, with additional time available upon request. Computers are available for detainee use and are equipped with the most recent version of Lexis-Nexis. Detainees have access to daily recreation, reading materials, and religious programs, and are able to send and receive mail. The ICE National Detainee Handbook and the facility-specific handbook are provided and distributed in both English and Spanish versions. ECDC makes other language versions of the facility-specific handbook available, as needed.

ODO identified and observed several best practices at ECDC. ECDC has developed multiple voluntary programs for ICE detainees. ECDC has a program, Puppies without Borders (PWB), which allows ICE detainees to socialize with and train puppies for obedience. Subsequently, the puppies are adopted by members of the general public.

ECDC also sponsors the Feed the World Aquaculture Program. This volunteer program allows ICE detainees to learn the science of raising fish (Tilapia, Catfish, and Koi). Detainees learn basic water chemistry, the anatomy and physiology of fish, and other fish production concepts. ICE detainees who are returned to their home countries will have the skills and knowledge to raise fish from birth to harvest.

A third program at ECDC is known as Adventure Programming. Adventure Programming is a volunteer program for ICE detainees to exercise the body and mind. Detainees use a rock climbing wall as a therapeutic approach to relieve the pressure of detention.

ECDC has established educational opportunities for ICE detainees in barbering, horticulture, and basic computer skills. These educational opportunities provide detainees with an outlet to relieve the stress of being detained.

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 at ECDC. In addition, ODO may focus its inspection based on detention management information provided by ERO Headquarters (HQ) and ERO field offices, and on issues of high priority or interest to ICE executive management.

ODO reviewed the processes employed at ECDC 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 fully prepare for the site visit at ECDC.

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 the 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 concerns. 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 Office of Detention Oversight.

INSPECTION TEAM MEMBERS



Special Agent (Team Leader)
Special Agent
Special Agent
Contract Inspector
Contract Inspector
Contract Inspector

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

OPERATIONAL ENVIRONMENT

INTERNAL RELATIONS

ODO interviewed the ECDC Chief Deputy of Detention, the ECDC Assistant Chief of Operations, the ERO AFOD, an ERO SDDO, and an ERO DO. ERO personnel visit the detainee housing units weekly to address questions and concerns of the detainees. The ERO AFOD visits the facility weekly, while the FOD visits on a quarterly basis. During interviews, ECDC and ERO personnel stated their working relationships are good and morale is high.

ERO staff stated they have the necessary resources to carry out their duties and responsibilities; however, (b)(7) ERO staff member stated a need for an additional DO position and (b)(7) additional ERA positions. Due to the congested office space at ECDC, on-site ERO staff is relocating to the Etowah County Judicial Building in June 2012.

DETAINEE RELATIONS

ODO interviewed 15 randomly-selected detainees to assess the detention conditions at ECDC. All detainees stated they were treated with dignity and respect by ECDC staff. Detainees are provided access to medical care, the law library, recreation, and telephones.

Seven detainees (46 percent) complained about the lack of menu variety, portion sizes, and the temperature of food. ODO verified all menus were approved by a certified dietician. ODO found no deficiencies in the Food Service standard relating to the portion size or serving temperature of food.

One detainee claimed to not know the identity of his respective DO. Three detainees (20 percent) stated they did not know how to contact their DO via a request form. ODO observed a posting in each housing unit regarding ICE visits and reviewed logs confirming visits by ICE staff were conducted. ODO confirmed ERO personnel conduct weekly visits to the housing units.

Three detainees (20 percent) complained about medical care. One detainee claimed he was denied psychotropic medication and another had requested a dental visit. ODO reviewed both of these complaints and concluded both concerns were appropriately addressed by facility medical staff. The detainee who claimed he was denied psychotropic medication was prescribed two anti-depressant medications upon admission to the facility. The detainee requesting a dental visit submitted a medical request and was seen by a dentist. A subsequent appointment was also scheduled. Another detainee complained it took two weeks to see a nurse for cold symptoms. ODO reviewed the detainee's medical file and reported the detainee put in two different medical requests on two different days, and he was seen on the same day in both instances.

ICE NATIONAL DETENTION STANDARDS

ODO reviewed a total of 17 NDS and found ECDC fully compliant with the following 12 standards:

- Access to Legal Material
- Admission and Release
- Detainee Classification System
- Detainee Handbook
- Detainee Transfers
- Environmental Health and Safety
- Hunger Strikes
- Special Management Unit – Administrative Segregation
- Special Management Unit – Disciplinary Segregation
- Suicide Prevention and Intervention
- Telephone Access
- Use of Force

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

ODO found deficiencies in the following five standards:

- Detainee Grievance Procedures
- Food Service
- Funds and Personal Property
- Medical Care
- Staff-Detainee Communication

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

DETAINEE GRIEVANCE PROCEDURES (DGP)

ODO reviewed the Detainee Grievance Procedures NDS at ECDC 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. ODO visited housing areas, interviewed staff, and reviewed policies and procedures, the detainee handbook, and grievance logs.

ECDC has a grievance system that allows detainees to file formal and informal grievances, and to appeal grievance decisions. Grievance forms are available within the housing units. The ECDC Unit Manager serves as the Grievance Coordinator, a position that places an emphasis on informally resolving grievances. Interviews with ICE detainees confirmed detainees were familiar with the grievance process. ECDC provides each detainee with the ICE National Detainee Handbook and a comprehensive local supplement advising detainees of the grievance process. ECDC maintains a paper grievance logbook. An electronic version of the grievance logbook is being planned. ODO reviewed 23 grievances, filed between January 17, 2012, and March 2012. Eighteen of the grievances involved medical care, four related to food service, and one concerned access to legal material. All grievances reviewed were responded to within two days of the grievance being filed. There is a clearly established appeal process in place at ECDC. Four of the 23 grievances filed were appealed. Responses to grievances were prompt and timely.

During a review of the detainee handbook and local policies, and interviews with facility staff, ODO determined ECDC does not have a policy or procedure for identifying and handling an emergency grievance (**Deficiency DGP-1**). An emergency grievance involves an immediate threat to detainee safety or welfare.

STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS

DEFICIENCY DGP-1

In accordance with the ICE NDS, Detainee Grievance Procedures, section (III)(B), the FOD must ensure each facility shall implement procedures for identifying and handling an emergency grievance. An emergency grievance involves an immediate threat to a detainee's safety or welfare. Once the receiving staff member approached by a detainee determines that he/she is in fact raising an issue requiring urgent attention, emergency grievance procedures will apply.

FOOD SERVICE (FS)

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

The food service program is staffed by the ECDC Food Service Manager (FSM), (b)(7)(e) kitchen deputies, and an inmate work crew. No ICE detainees work in food service. The facility uses a satellite system of meal service, which involves meal preparation in the food service area, and meal delivery on trays to detainee housing areas. The menu has been certified nutritionally complete by a registered dietician. Review of the food substitution log verified that substituted items are selected from the approved master menu cycle. Review of required inspections and temperature logs confirmed compliance with the NDS. Knives and utensils are properly controlled. ECDC uses an electronic key management system called ProxSafe, which requires a PIN number and a matching fingerprint reading from a staff member to gain access to the area where cooking instruments are maintained. ODO observed cleaning schedules posted throughout the food service area.

The October 2010 QAR cited ECDC deficient for maintaining only a four-day food supply rather than the 15-day supply required by the NDS. The facility has attempted to address the deficiency by rearranging space adjacent to the food service area and designating an additional small room for food storage. ECDC now maintains a six-day food supply, still below the 15-day requirement (**Deficiency FS-1**). Since a 15-day food supply is required by the standards, ODO is citing this as a deficiency. However, ODO was informed, and observation confirmed, that additional space is not available for additional food storage. ODO notes the food vendor that services ECDC is located approximately a quarter mile from the facility, and food supplies are ordered and received on Mondays and Thursdays each week. This arrangement allows for prompt replenishment of food supplies.

STANDARD/ POLICY REQUIREMENTS FOR DEFICIENT FINDINGS

DEFICIENCY FS-1

In accordance with the ICE NDS, Food Service, section (III)(J)(4), the FOD must ensure, while the FSA shall base inventory levels on facility needs, each facility will at all times stock a 15-day-minimum food supply.

FUNDS AND PERSONAL PROPERTY (F&PP)

ODO reviewed the Funds and Personal Property NDS at ECDC to determine if controls are in place to inventory, receipt, store, and safeguard detainees' personal property. ODO interviewed staff, reviewed policies and procedures, and observed the admission and release process.

ECDC has written policies and procedures for handling and safeguarding funds and personal property. Funds and valuables are properly inventoried and logged by the facility. A dedicated safe for cash and checks is maintained in a secure area, and access is restricted to supervisory staff.

ODO reviewed 16 detention files that contained a receipt for personal property, and found none had a forwarding address. ECDC standard operating procedures do not include obtaining an address from each detainee so that personal property recovered after a detainee is released, transferred, or removed can be forwarded to the detainee (**Deficiency F&PP-1**). Obtaining forwarding addresses facilitates the return of missing property to detainees through family members or designated acquaintances.

The ECDC detainee handbook does not provide procedures for requesting an ICE-certified copy of identity documents, such as a passports or birth certificates, which are located in the detainee's A-File (**Deficiency F&PP-2**). The ECDC detainee handbook does not provide procedures for filing a claim for lost or damaged property (**Deficiency F&PP-3**). Providing detainees with clear and comprehensive handbooks ensures familiarization with rules, policies, and procedures.

STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS

DEFICIENCY F&PP-1

In accordance with the ICE NDS, Funds and Personal Property, section (III)(C), the FOD must ensure that all facilities shall have policies and procedures to account for and safeguard detainee property at time of admission. Standard operating procedure will include obtaining a forwarding address from every detainee who has personal property that could be lost or forgotten in the facility after the detainee's release, transfer, or removal.

DEFICIENCY F&PP-2

In accordance with the ICE NDS, Funds and Personal Property, section (III)(J)(2), the FOD must ensure the detainee handbook or equivalent shall notify the detainees of facility policies and procedures concerning personal property, including: That, upon request, they will be provided an [ICE]-certified copy of any identity document (passport, birth certificate, etc.) placed in their A-files.

DEFICIENCY F&PP-3

In accordance with the ICE NDS, Funds and Personal Property, section (III)(J)(5), the FOD must ensure the detainee handbook or equivalent shall notify the detainees of facility policies and procedures concerning personal property, including: The procedures for filing a claim for lost or damaged property.

MEDICAL CARE (MC)

ODO reviewed the Medical Care NDS at ECDC to determine if detainees have access to healthcare and emergency services to meet health needs in a timely manner. ODO reviewed policies and detainee medical records, verified medical staff credentials, and observed intake screening, sick call, and pill line procedures. In addition, ODO reviewed training records of all medical and (b)(7) custody staff.

Health care services are provided by medical personnel employed by Doctors' Care Physicians, P.C. The facility is currently accredited by the American Correctional Association (ACA) and the National Commission on Correctional Health Care (NCCCHC). Nursing coverage is available 24 hours a day, seven days a week. Medical staff consists of a full time Health Services Administrator (HSA) who is also a registered nurse (RN), a Medical Director who averages 30 hours per week at the facility, a nurse practitioner with a doctorate degree in advanced nursing practice, a full-time mental health coordinator, (b)(7)e RNs, (b)(7) Licensed Practical Nurses (LPN), and (b)(7)e medical clerk technicians. A dentist comes to the facility once a week on a fee-for-service contract. Review of the dental roster reflects an average of 30 detainees receive dental intervention weekly. The dentist conducts annual training at ECDC for nurses in dental assessment and the proper way to describe dental conditions, including the level of acuity. Acuity levels of dental referrals are also reviewed by the Medical Director. The dentist stated detainees are seen in his off-site office for emergencies, if necessary. The average wait time for routine dental appointments is two to three weeks.

Specialty health care services are provided by medical staff with privileges at the Riverview Regional Medical Center (RRMC). There is a memorandum of understanding between ECDC and RRMC for provision of emergency and inpatient care for detainees with medical needs beyond the scope of services available at ECDC. The Medical Director also has privileges at RRMC. At the time of the review, there were no medical staff vacancies; however, the Medical Director indicated he is considering adding a mid-level provider for chronic care services. Emergency response consists of 911-EMS activation or contacting the Medical Director who is on call around-the-clock. Emergency telephone numbers are clearly posted. Radiology services are provided by a mobile service company that performs all non-invasive X-rays on-site. Laboratory specimens are sent to a contract laboratory. Pharmacy licenses and a current Clinical Laboratory Improvement Amendments (CLIA) certificate are clearly posted. ODO determined that staffing and services are adequate for the size of the population and the acuity level of detainees.

All medical staff credentials were reviewed and found current. The providers had current Drug Enforcement Administration licenses on file. ODO reviewed the training records of all medical and (b)(7) custody staff, and verified current certification in cardiopulmonary resuscitation (CPR) and first aid. Medical staff records included documentation of annual review of the nursing protocols, and the conduct of physical examinations and dental assessments.

ECDC uses an electronic medical records (EMR) system accessible only to the medical staff through restricted individual passwords. Appropriate documentation of consent and refusal of medical treatment are documented in the EMR.

Detainees are screened for symptoms of contagious diseases and tuberculosis (TB) during medical intake screenings. All 35 records reviewed reflected TB screenings were in accordance with the NDS. A chest X-ray is performed for all detainees with a history of a positive skin test. Any detainee with signs and symptoms of active TB is immediately isolated and admitted to RRMC for evaluation and treatment until deemed non-contagious for housing at ECDC. Review of infection control documents reflects immediate notification and involvement of the Etowah County Public Health Department for all suspected cases of TB. Etowah Public Health staff conducts contact interviews and performs monitoring of all detainees receiving treatment for active TB. There were no detainees with active TB at the time of this inspection.

Medical and mental health intake screening is conducted by nursing staff within eight hours of a detainee's arrival. The Medical Director trains nursing staff in the screening function, and reviews all completed screening forms. ODO confirmed intake screenings meet ICE Health Service Corps (IHSC) Performance Improvement criteria. Review of 35 records confirmed screenings are performed within eight hours and reviewed by the Medical Director. Detainees with complex or chronic medical conditions are scheduled for physical examinations (PE) within 24 to 48 hours. ODO notes this exceeds the NDS and is sound medical practice. During the medical intake screening, detainees are asked to give signed permission when non-medical staff is used to interpret. The medical staff also has access to the language line for translation assistance, if needed. Access to medical services is explained to the detainee during the intake screening. During the medical screening, a booking officer stands at the doorway within hearing distance of the interview. This constitutes a violation of the NDS, because medical information is communicated (**Deficiency MC-1**). This arrangement also potentially violates the Health Information Portability and Accountability Act (HIPAA), which protects all "individually identifiable health information held or transmitted by a covered entity or its business associate, in any form or media whether electronic, paper or oral." Interviews of five booking officers confirmed they completed annual training in HIPAA; however, the topic is not currently designated as mandatory for all custody staff. The HSA and the ECDC Administrator indicated they would take necessary corrective action to ensure compliance with the NDS and HIPAA. Effective April 2012, HIPAA will be included in initial and annual training for all staff.

In all 35 cases reviewed, ODO verified a physical examination (PE) is conducted by the RN or Medical Director from 24 hours to seven days after a detainee's arrival at ECDC. As administered, each PE met IHSC Performance Improvement criteria. Training in conducting a PE is documented in the training records of each RN on staff. Every PE conducted by an RN is submitted electronically to the Medical Director, who establishes the initial problem list/diagnosis and treatment plan. All 35 PE records examined by ODO were reviewed by the Medical Director within 24 hours of completion. The Medical Director schedules detainees for chronic care clinic and regular monitoring with the nurse practitioner.

Medications are administered only by the nursing staff. The pharmacy is secure and accessible only by medical staff. Pharmacy services are provided by a mail-order pharmacy, with a local pharmacy available to provide medications ordered to start immediately. The local pharmacist has a contract for quarterly review and monitoring of the ECDC pharmacy and pharmaceutical practice.

Medical staff makes daily rounds in the special management units. ODO observed the rounds and noted medical staff inquired about detainee well-being, addressed any complaints, and provided prescribed medications.

ODO determined that transfers of records and medical summaries met NDS requirements.

STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS

DEFICIENCY MC-1

In accordance with the ICE NDS, Medical Care, section (III)(M), the FOD must ensure all medical providers shall protect the privacy of detainee's medical information to the extent possible while permitting the exchange of health information required to fulfill program responsibilities and to provide for the well being of detainees.

STAFF-DETAINEE COMMUNICATION (SDC)

ODO reviewed the Staff-Detainee Communication NDS at ECDC 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 responses in a timely manner. ODO interviewed staff and detainees, and reviewed documentation relating to detainee requests.

Detainees have the opportunity to file requests with both ICE and ECDC staff. Request forms are available within housing units. ODO observed IEAs retrieving ICE request forms during daily visits performed to address detainee concerns. DOs make weekly scheduled visits with detainees for case reviews. Visits by both IEAs and DOs are documented in logbooks found in the housing units, and visitation schedules for ICE staff are conspicuously posted in the housing units.

According to ECDC staff, the AFOD makes weekly visits to the facility and the FOD visits quarterly. However, a review of facility logbooks and interviews with ECDC and ERO staff could not support that ERO department heads, including the FOD and AFOD, conduct regular, unscheduled visits to the housing units, food service area, recreation areas, special management units, and the medical unit (**Deficiency SDC-1**). A deficiency in this area was previously cited in the October 2010 ODO QAR when the facility fell under the area of responsibility of the Atlanta Field Office Director; a similar deficiency was also cited during the DFIG Focus Review of ECDC in November 2007.

ODO reviewed detention files and interviewed ERO and facility staff concerning the documentation and recording of detainee request forms. ODO found the facility does not maintain a log, electronic or otherwise, to record detainee requests (**Deficiency SDC-2**). Detainee requests are maintained in detainee detention files. Facility staff advised ODO that an electronic log system is being considered for recording detainee requests.

STANDARD/POLICY REQUIREMENTS 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. Recreational Area;
- d. Special Management Units (Administrative and Disciplinary Segregation); and Infirmary rooms

DEFICIENCY SDC-2

In accordance with the ICE NDS, Staff-Detainee Communication, section (III)(B)(2), the FOD must ensure all requests shall be recorded in a logbook specifically designed for that purpose. The log, at a minimum, shall contain:

- a. The date the detainee request was received;
- b. Detainee's name;
- c. A-number;
- d. Nationality;
- e. Officer logging the request;
- f. The date that the request, with staff response and action, is returned to the detainee; and
- g. Any other site-specific pertinent information.

In IGSAs, the date the request was forwarded to ICE and the date it was returned shall also be recorded.

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.