



**U.S. Department of Homeland Security**

Immigration and Customs Enforcement

Office of Professional Responsibility

Inspections and Detention Oversight

Washington, DC 20536-5501

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**Office of Detention Oversight  
Compliance Inspection**

**Enforcement and Removal Operations  
Saint Paul Field Office  
Ramsey County Adult Detention Center  
Saint Paul, Minnesota**

**March 11-13, 2014**

**COMPLIANCE INSPECTION  
RAMSEY COUNTY ADULT DETENTION CENTER  
SAINT PAUL FIELD OFFICE**

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# INSPECTION PROCESS

The U.S. Immigration and Customs Enforcement (ICE), Office of Professional Responsibility (OPR), Office of Detention Oversight (ODO) conducts broad-based compliance inspections to determine a detention facility's overall compliance with the applicable ICE National Detention Standards (NDS) or Performance-Based National Detention Standards (PBNDS) and ICE policies. ODO bases its compliance inspections around specific detention standards, also referred to as core standards, which directly affect detainee health, safety, and well-being. Inspections may also be based on allegations or issues of high priority or interest to ICE executive management.

Prior to an inspection, ODO reviews information from various sources, including the Joint Intake Center (JIC), Enforcement and Removal Operations (ERO), detention facility management, and other program offices within the U.S. Department of Homeland Security (DHS). Immediately following an inspection, ODO hosts a closeout briefing at which all identified deficiencies are discussed in person with both facility and ERO field office management. Within days, ODO provides ERO a preliminary findings report, and later, a final report, to assist in developing corrective actions to resolve identified deficiencies.

## REPORT ORGANIZATION

ODO's compliance inspection reports provide executive ICE and ERO leadership with an independent assessment of the overall state of ICE detention facilities. They assist leadership in ensuring and enhancing the safety, health, and well-being of detainees and allow ICE to make decisions on the most appropriate actions for individual detention facilities nationwide.

ODO defines a deficiency as a violation of written policy that can be specifically linked to ICE detention standards, ICE policies, or operational procedures. Deficiencies in this report are highlighted in bold and coded using unique identifiers. Recommendations for corrective actions are made where appropriate. The report also highlights ICE's priority components, when applicable. Priority components have been identified for the 2008 and 2011 PBNDS; priority components have not yet been identified for the NDS. Priority components, which replace the system of mandatory components, are designed to better reflect detention standards that ICE considers of critical importance. These components have been selected from across a range of detention standards based on their importance to factors such as health and safety, facility security, detainee rights, and quality of life in detention. Deficient priority components will be footnoted, when applicable. Comments and questions regarding this report should be forwarded to the Deputy Division Director, OPR ODO.

## INSPECTION TEAM MEMBERS

Team members on this inspection included: (b)(6), (b)(7)c Special Agent (Team Lead), ODO; (b)(6), (b)(7)c Special Agent, ODO; (b)(6), (b)(7)c Inspections and Compliance Specialist, ODO; (b)(6), (b)(7)c Inspections and Compliance Specialist, ODO; (b)(6), (b)(7)c Contract Inspector, Creative Corrections; and (b)(6), (b)(7)c Contract Inspector, Creative Corrections; and (b)(6), (b)(7)c Contract Inspector, Creative Corrections.

## EXECUTIVE SUMMARY

ODO conducted a compliance inspection of the Ramsey County Adult Detention Center (RCADC) in Saint Paul, Minnesota, from March 11 to 13, 2014. RCADC, which opened in December 2003, is owned by the County of Ramsey and operated by the Ramsey County Sheriff's Office (RCSO). ERO began housing detainees at RCADC in February 2004 under an intergovernmental service agreement between ICE and the County of Ramsey. Male and female detainees of all security classification levels (Levels I-III) are detained at the facility for periods in excess of 72 hours. The inspection evaluated RCADC's compliance with the 2000 NDS.

Capacity and Population Statistics	Quantity
Total Bed Capacity/Emergency Capacity	500/600
ICE Bed Capacity/Emergency Capacity	20/60
Average ICE Detainee Daily Population	17
Average ICE Detainee Length of Stay (Days)	28
ICE Male/Female Count (on March 11, 2014)	17/2

The ERO Field Office Director (FOD) in Saint Paul, Minnesota, is responsible for ensuring facility compliance with the ICE NDS and ICE policies. There are no ICE employees physically located at RCADC. An Assistant Field Office Director (AFOD), a Supervisory Detention and Deportation Officer (SDDO) and Deportation Officers (DO) oversee ICE operations at RCADC. There is no Detention Service Manager (DSM) assigned to this facility.

The Undersheriff is the highest-ranking official at RCADC and is responsible for oversight of daily operations. (b)(7)e RCADC supervisory staff and (b)(7)e non-supervisory staff support the Undersheriff. There were no vacancies at RCADC at the time of the inspection. The County of Ramsey provides medical care, and A'viands Food and Services Management (AFSM) provide food service. The facility holds no accreditations.

In June 2012, ODO conducted an inspection of RCADC under the 2000 NDS. Among the 19 standards reviewed, six were in full compliance with the NDS. ODO cited 23 deficiencies in the remaining 13 standards.

During this inspection, ODO reviewed 18 standards, five of which were fully compliant.<sup>1</sup> Forty-four deficiencies were identified in the following 13 standards: Access to Legal Material (3), Admission and Release (6), Contraband (1), Correspondence and Other Mail (3), Detainee Classification System (4), Detainee Grievance Procedures (2), Detainee Handbook (1), Environmental Health and Safety (3), Food Service (5), Funds and Personal Property (2), Medical Care (2), Staff-Detainee Communication (8), and Telephone Access (4). ODO did not make any recommendations regarding facility policy and procedures or cite any best practices.

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<sup>1</sup> The following standards were compliant at the time of the inspection; therefore, synopses for these standards are not included in this report: Special Management Unit – Administrative Segregation, Special Management Unit – Disciplinary Segregation, Suicide Prevention and Intervention, Terminal Illness, Advanced Directives, and Death, and Use of Force.

This report details all deficiencies and refers to the specific, relevant sections of the NDS. ERO will be provided with a copy of this report to assist in developing corrective actions to resolve all identified deficiencies. These deficiencies were discussed with ERO and RCADC staff during the on-site inspection and at a subsequent closeout briefing conducted on March 13, 2014.

Upon admission to RCADC, detainees receive clothing, towels, bedding, personal hygiene items, and medical, mental health, suicide and sexual abuse and assault screenings. Medical staff performs follow-up evaluations depending on screening results. Detainees are expected to purchase replenishment hygiene items from the commissary; the facility only replenishes soap.

Detainee property is inventoried during the admission and stored in a dedicated room, which is locked and accessible only to authorized staff. RCADC does not have a dedicated safe or secured locker accessible to only designated supervisors to store valuables. Further, the facility handbook does not include a procedure for requesting certified copies of identity documents such as passports and birth certificates.

Per RCADC policy, all inmates and detainees with gross misdemeanor offenses are strip searched as they enter the facility and each time they re-enter the facility from outside the secure perimeter. All 19 detainees interviewed by ODO stated they had been strip searched at some point during their detention at RCADC. ODO reviewed the detention files of all 19 detainees present at the time of the inspection and found no documentation supporting strip searches based on reasonable suspicion. Further, ODO found ERO does not consistently provide documentation to assist RCADC management with classification. During the inspection, two detainees (Levels I and III) were improperly classified.<sup>2</sup>

ERO provides detainees an ICE National Detainee Handbook prior to arrival at RCADC; however, RCADC staff does not issue detainees a facility handbook or show an orientation video. Facility handbooks are maintained inside a drawer in the housing units accessible only to staff. RCADC has established policy and procedures for the handling and destruction of contraband. There has not been a seizure of contraband at RCADC during the 12 months preceding this inspection. The facility handbook addresses the safeguarding of detainee property, but it does not notify detainees of rules and procedures governing contraband.

Detainees may access computers with the current version of LexisNexis for a minimum of five hours per week. The facility handbook does not include scheduled hours of access to the law library, the procedures for requesting additional library time, legal reference material not maintained in the law library, or the procedure for notifying a designated employee that library material is missing or damaged. RCADC staff does not provide detainees photocopies of legal materials.

Detainees at RCADC are permitted to receive mail; however, the facility handbook lacks required notifications, including: the definition of special correspondence; instructions on the proper labeling for special correspondence; and the responsibility to inform senders of the labeling requirements for

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<sup>2</sup> These are all repeat deficiencies from the last ODO inspection in June 2012.

special correspondence. Further, RCADC management does not have a written record of items removed from detainee mail, notify detainees that packages cannot be sent or received without prior approval, or have a procedure for obtaining prior approval.

RCADC allows detainees to file informal, formal and emergency grievances. There is an established grievance committee and RCADC staff maintains a grievance log. Six formal grievances were filed by detainees during the 12 months preceding this inspection and each received a timely response. No grievances alleged staff misconduct. Responses are provided to detainees in writing, but a copy is not placed in the detention file. The facility handbook does not provide instructions on how to file complaints about officer misconduct.

Facility sanitation of RCADC was excellent at the time of the inspection. Hazardous materials are properly stored and inventories maintained. Fire drills are conducted quarterly instead of monthly as required by the NDS. In addition, the quarterly drills were not conducted in all areas of the facility and were not performed by all shifts. Exit diagrams are printed in English and Spanish and show the locations of emergency equipment; however, they do not identify areas of safe refuge.<sup>3</sup> The facility's emergency power generator is tested monthly for a period of four hours, rather than bi-weekly for one hour, as required by the NDS. In addition, testing by an external generator service company is completed every six months instead of quarterly.

The entire food service operation at RCADC is performed by the contractor AFSM. ODO observed a high level of sanitation throughout the food service area. The facility has a satellite feeding system. A registered dietician certifies the master menu, which is a 28-day cycle menu with a variety of foods. All food temperatures tested by ODO during the inspection complied with the NDS. Deficiencies identified include: no differentiation between medical diets for detainees versus inmates; RCADC's policy not requiring development of a ceremonial meal schedule; no common fare meal program for religious dietary needs; food service personnel not receiving pre-employment medical examinations;<sup>4</sup> the facility failing to provide meatless lunch and dinner meals on Fridays or Ash Wednesday; and food service inspections not occurring on a weekly basis.<sup>5</sup>

Health care at RCADC is provided by Ramsey County 24 hours per day, seven days per week. Seriously or terminally ill detainees are not accepted at RCADC. Correctional officers conduct medical and mental health screenings at intake; however, they do not receive training on how to perform these screenings. A nurse practitioner performs health appraisals within 14 days, which includes a hands-on physical examination and dental screening. Detainees access health care services by completing sick call forms and handing them to officers,<sup>6</sup> or placing them in an unsecured box in the housing unit.

RCADC conducts sexual abuse and assault screenings of detainees upon arrival to detect victimization and predatory risk. According to facility staff and a query of records from the Joint Integrity Case Management System (JICMS), there were no reported incidents or allegations of sexual abuse or assault at RCADC during the 12 months preceding this inspection.

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<sup>3</sup> This is a repeat deficiency from the last ODO inspection in June 2012.

<sup>4</sup> This is a repeat deficiency from the last ODO inspection in June 2012.

<sup>5</sup> This is a repeat deficiency (food service inspections) from the last ODO inspection in June 2012.

<sup>6</sup> This is a repeat deficiency from the last ODO inspection in June 2012.

ICE staff conducts scheduled weekly and unscheduled monthly visits at RCADC. All visits are documented on a log maintained by RCADC management; however, there is no documentation indicating which areas are visited.<sup>7</sup> ERO's visitation schedule was not posted in all housing units. Further, Facility Liaison Visit Checklists and Telephone Serviceability Worksheets were missing for specific periods. The facility initiated corrective action during the inspection by posting schedules in the housing units.

RCADC does not have written procedures for routing detainee requests through the appropriate ICE officials. Detainees can submit sealed, written requests to ICE by labeling it "immigration." ODO reviewed all detainee requests from October 2013 through March 2014 and confirmed that all requests received a response within 72 hours. RCADC does not maintain a log to track requests. RCADC staff initiated corrective action during the inspection by creating a log. The facility handbook lacks required notifications on how to submit written questions and concerns to ICE staff, the procedures for doing so, the availability of assistance in preparing the request and the Office of Inspector General's (OIG) contact information.

The Special Management Unit (SMU) at RCADC is comprised of two, single-occupancy cells used for administrative and disciplinary segregation for males and females. Each cell contains a single bed with a mattress, a toilet, a sink and a writing surface. The cells and shower areas were adequately lit, well ventilated, temperature-appropriate, and maintained in a sanitary condition. No ICE detainees were assigned to administrative and disciplinary segregation at the time of the inspection and none had been placed on administrative segregation during the 12 months preceding this inspection. Four detainees had been sanctioned with disciplinary segregation since March 2013.

RCADC's policy on suicide prevention and intervention covers training, identification, intervention, housing and hospitalization of at-risk detainees. Detainees identified as at-risk are immediately referred to the medical unit for further evaluation and housed and monitored in accordance with the standard. Only a physician or mental health professional is authorized to remove a detainee from suicide watch. RCADC staff reported no detainees were placed on suicide watch during the 12 months preceding this inspection. The cell designated for suicide watch is free of objects or structures that could facilitate a suicide attempt. Medical staff and detention staff receive suicide prevention and intervention training.

Detainees have equitable access to telephones at RCADC. Telephones are inspected daily by facility staff. ODO tested all telephones and found none allowed detainees free access to embassies, consulates, pro-bono entities, or other governmental agencies. Calls are limited to 15 minutes in length before automatic cut-off. RCADC does not provide detainees with written telephone access rules, and the procedure for obtaining an unmonitored call.

No uses of force involving ICE detainees occurred at RCADC during the 12 months preceding this inspection, according to facility staff and the JICMS. Detention personnel at RCADC use a restraint chair when needed and RCADC supervisors carry Tasers. Tasers have not been used on ICE detainees to date. Training records confirmed staff received current training in the application of force.

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<sup>7</sup> This is a repeat finding from the last ODO inspection in June 2012.

# OPERATIONAL ENVIRONMENT

## DETAINEE RELATIONS

ODO interviewed all detainees in custody (17 males and two females) to assess conditions of detention at RCADC. None of the detainees expressed concerns RCADC or treatment by RCADC staff. Detainees denied witnessing or experiencing abuse or discrimination from RCADC officers.

All 19 detainees alleged they were strip searched at some point during their detention at RCADC. Further, they all stated they did not receive a facility handbook or watch an orientation video upon admission. A majority of the detainees could not name their DO or knew how to contact him/her; however, all stated ERO visits the housing units weekly. Detainees complained about having to purchase hygiene items from the commissary. ODO confirmed that other than soap, the facility does not provide detainee replacements after issuance of the initial kit.

## **ICE 2000 NATIONAL DETENTION STANDARDS**

ODO reviewed a total of 18 NDS and found 44 deficiencies in the following 13 standards:

1. Access to Legal Material
2. Admission and Release
3. Contraband
4. Correspondence and Other Mail
5. Detainee Classification System
6. Detainee Grievance Procedures
7. Detainee Handbook
8. Environmental Health and Safety
9. Food Service
10. Funds and Personal Property
11. Medical Care
12. Staff-Detainee Communication
13. Telephone Access

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

## **ACCESS TO LEGAL MATERIAL (ALM)**

ODO reviewed the Access to Legal Material standard at the RCADC to determine if detainees have access to a law library, legal materials, courts, counsel and document copying equipment to facilitate the preparation of legal documents, in accordance with the ICE NDS. ODO interviewed detainees and staff, reviewed policies, procedures, and the detainee handbook, and inspected the area designated for law library use.

The facility maintains two computers and two printers for use by ICE detainees to access legal materials and prepare legal documents. Both are equipped with the most-recent version of LexisNexis. A computer is kept in each of the two housing units that house ICE detainees. Each computer is mobile and may be moved to an adjacent interview room to afford privacy. The interview room is well-lit, isolated from noise and contains a chair and table. The facility employs an ICE liaison who is responsible for checking the computers on a weekly basis to ensure they are in good working order. The facility handbook directs that ICE detainees may request access to the computer via a Law Library Request Form available in the housing units.

The law library is available for use from 7:30 a.m. to 10 p.m. There is no time limitation unless multiple detainees request use of legal materials at the same time.

Since the facility is near the county courthouse law library, RCADC officials routinely use that library to obtain legal materials that are not available in the RCADC law library. Detainees can request materials in writing by specifying a particular statute, decision, or other legal document (motions, briefs, etc.), and RCADC officials retrieve those documents from the courthouse law library. This procedure is reflected in written policy at RCADC.

RCADC does not have procedures in place to prevent detainees from damaging, destroying or removing equipment, materials or supplies from the library (**Deficiency ALM-1**).

According to RCADC policy and procedures, detainees are not allowed to obtain photocopies of legal material. The NDS requires that facilities ensure that detainees are able to obtain photocopies of legal materials necessary for legal proceedings involving the detainee (**Deficiency ALM-2**).

The facility handbook does not include the scheduled hours of access to the law library, the procedure for requesting additional time in the law library beyond the five hours per week minimum, the procedure for requesting legal reference materials not maintained in the law library, or the procedure for notifying a designated employee that library material is missing or damaged. During the inspection, ODO observed the rules associated with the use of the law library are not posted in the housing units, or in the Special Management Unit (**Deficiency ALM 3**).

## **STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS**

### **DEFICIENCY ALM-1**

In accordance with the ICE NDS, Access to Legal Materials, section (III)(H), the FOD must ensure, “The facility shall develop procedures that effectively prevent detainees from damaging, destroying or removing equipment, materials or supplies from the law library.

Facilities are encouraged to monitor detainees' use of legal materials to prevent vandalism.”

### **DEFICIENCY ALM-2**

In accordance with the ICE NDS, Access to Legal Materials, section (III)(J)(1)(2)(3)(4), the FOD must ensure “The facility shall ensure that detainees can obtain photocopies of legal material, when such copies are reasonable and necessary for a legal proceeding involving the detainee. This may be accomplished by providing detainees with access to a copier or by making copies upon request.

The number of copies of documents to be filed with a particular court, combined with the number required for INS records and at least one copy for the detainee's personal use will determine the number of photocopies required. Requests for photocopies of legal material shall be denied only if:

1. the document(s) might pose a risk to the security and orderly operation of the detention facility;
2. there are other legitimate security reasons;
3. copying would constitute a violation of any law or regulation; or
4. the request is clearly abusive or excessive.

Facility staff shall inspect documents offered for photocopying to ensure that they comply with these rules. However, staff may not read a document that on its face is clearly related to a legal proceeding involving the detainee.”

### **DEFICIENCY ALM-3**

In accordance with the ICE NDS, Access to Legal Materials, section (III)(Q)(2)(4)(5)(6), the FOD must ensure, “The detainee handbook or equivalent, shall provide detainees with the rules and procedures governing access to legal materials, including the following information:

2. the scheduled hours of access to the law library;
4. the procedure for requesting additional time in the law library (beyond the 5 hours per week minimum);
5. the procedure for requesting legal reference materials not maintained in the law library; and
6. the procedure for notifying a designated employee that library material is missing or damaged.

These policies and procedures shall also be posted in the law library along with a list of the law library's holdings.”

## **ADMISSION AND RELEASE (AR)**

ODO reviewed the Admission and Release standard at the RCADC 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, procedures, and the detainee handbook. ODO also inspected detention files, interviewed staff and detainees, and viewed the orientation video.

Upon admission to RCADC, detainees receive clothing, towels, bedding, personal hygiene items, and medical, mental health, suicide and sexual abuse and assault screenings. Medical staff completes required follow-up evaluations depending on the detainee's answers to the intake-screenings. Property bags are kept in a property room and receipts provided to detainees and placed in each property bag. All funds (U.S. currency) for each detainee are transferred to an individual vending card account, which can be accessed by the detainee while housed at RCADC.

RCADC has an orientation video that covers facility rules and regulations, but it is not shown to detainees at admission (**Deficiency AR-1**). The detainee handbook states that detainees receive one free personal hygiene kit. The hygiene kit includes deodorant, soap, toothpaste, a toothbrush and shampoo. Through detainee and staff interviews, ODO confirmed only soap is replenished at no cost to the detainee (**Deficiency AR-2**).

Among the 19 detention files reviewed by ODO, only two contained an Order to Detain or Release Alien (Form I-203) (**Deficiency AR-3**). Furthermore, ERO is not providing any documentation for classification purposes (**Deficiency AR-4**).

Detainees are not provided a copy of the facility handbook at admission (**Deficiency AR-5**). Handbooks are retained in the housing units; however, detainees are not told they are available, and the handbook is not issued as detainees arrive in the housing units. Facility staff stated the handbooks are kept in a drawer to prevent damage and detainees can request to read the handbook at any time. However, none of the detainees interviewed by ODO were aware a facility handbook was available that contained pertinent information regarding RCADC policies and procedures.

Upon admission, all detainees with a gross misdemeanor charge are automatically strip-searched as he/she enters the facility. Detainees are also strip searched each time they re-enter the facility from outside the secure perimeter. RCADC written policy states that all detainees with a misdemeanor charge will be strip searched during intake. Not one of the 19 detention files reviewed by ODO contained documentation to support a strip search based on reasonable suspicion (**Deficiency AR-6**). This is a repeat deficiency from the last ODO inspection in June 2012.

## **STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS**

### **DEFICIENCY AR-1**

In accordance with the ICE NDS, Admission and Release, section (III)(A)(1), the FOD must ensure, "The orientation process supported by a video (INS) and handbook shall inform new arrivals about facility operations, programs, and services."

**DEFICIENCY AR-2**

In accordance with the ICE NDS, Admission and Release, section (III)(G), the FOD must ensure, “Staff shall provide male and female detainees with the items of personal hygiene appropriate for, respectively, men and women. They will replenish supplies as needed.”

**DEFICIENCY AR-3**

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.”

**DEFICIENCY AR-4**

In accordance with the ICE NDS, Admission and Release, section (III)(B) , the FOD must ensure, “Admission staff will use the documentation accompanying each new arrival for identification and classification purposes. If the classification officers are not ICE employees, ICE will provide only the information needed for classification-processing.”

**DEFICIENCY AR-5**

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.”

**DEFICIENCY AR-6**

In accordance with the Change Notice: Strip Search Guidelines for Admissions to Detention Facility, dated April 14, 2003, the FOD must ensure, “Immigration detainees shall not be strip searched upon admission to a facility unless there is a reasonable suspicion that an individual may be concealing a weapon or other contraband.”

## **CONTRABAND (C)**

ODO reviewed the Contraband standard at RCADC to determine if procedures are in place to protect detainees and staff, enhance security, and identify, detect, control and properly dispose of contraband, in accordance with the ICE NDS.

RCADC has established policy and procedures for the handling and destruction of contraband. When contraband is discovered, an incident report is completed by the officer that describes the details of the contraband, and where it was found. The contraband is inventoried on a report form and placed in a secure storage area until it is destroyed. There has not been a seizure of contraband at RCADC during the 12 months preceding this inspection.

The facility handbook addresses the safeguarding of detainee property, but it does not notify detainees of rules and procedures governing contraband at RCADC (**Deficiency C-1**).

## **STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS**

### **DEFICIENCY C-1**

In accordance with the ICE NDS, Contraband, section (III)(D)(1), the FOD must ensure, “The detainee handbook, or equivalent, shall notify detainees of the following:

1. The facility’s rules and procedures governing contraband.”

## **CORRESPONDENCE AND OTHER MAIL (C&OM)**

ODO reviewed the Correspondence and Other Mail standard at the RCADC to determine if the facility provides detainees the opportunity to send and receive correspondence, in a timely manner, subject to limitations required for the safe and orderly operation of the facility, in accordance with the ICE NDS.

RCADC has no restrictions on the amount of mail detainees can send or receive. Procedures are in place at RCADC to ensure the confidentiality of legal correspondence. The facility handbook fails to notify detainees of specific requirements (**Deficiency C&OM-1**), including:

- General correspondence and other mail addressed to them shall be opened and inspected only in their presence, unless there are security concerns;
- Special correspondence will be opened only in their presence to inspect for contraband, but not read by RCADC staff;
- Definition of special correspondence;
- RCADC management provides no written notification to detainees about packages that may not be sent or received without advance arrangements, and there is no procedure at RCADC for obtaining prior approval;
- Description of rejected mail, or mail detainees are not permitted to keep; and
- Notification that detainees are not allowed to keep identity documents in their possession, but will be provided with copies of identity documents certified by an ICE officer to be true and correct copies.

Further, RCADC does not provide a written record documenting items removed from detainee mail (**Deficiency C&OM-2**).

The facility does not have a procedure in place that requires an officer to make a written record documenting the detainee's name and A-number, the name of the sender and recipient, a description of the mail in question, a description of the action taken, the reason for the action (including significant dates), disposition of the item, the date of disposition, and the signature of the officer in the event an item is removed from a detainee's mail (**Deficiency C&OM-3**).

## **STANDARD/POLICY REQUIREMENT FOR DEFICIENT FINDINGS**

### **DEFICIENCY C&OM-1**

In accordance with the ICE NDS, Correspondence and Other Mail, section (III)(B)(3)(4)(5)(6)(7), the FOD must ensure, "The facility shall notify detainees of its policy on correspondence and other mail through the detainee handbook or equivalent provided to each detainee upon admittance.

At a minimum, the notification shall specify:

3. That general correspondence and other mail addressed to detainees shall be opened and inspected in the detainee's presence, unless the OIC authorizes inspection without the detainee's presence for security reasons

4. That special correspondence may only be opened in the detainee's presence, and may be inspected for contraband, but not read;
5. The definition of special correspondence, including instructions on the proper labeling for special correspondence, without which it will not be treated as special mail. The notification shall clearly state that it is the detainee's responsibility to inform senders of special mail of the labeling requirement;
7. A description of mail which may be rejected by the facility and which the detainee will not be permitted to keep in his/her possession (for additional information refer to Section III.G., below). The notification will state that identity documents, such as passports, birth certificates, etc., are contraband and may be used by the INS as evidence or as otherwise appropriate. The notification will state that if detainees are not allowed to keep an identity document in their possession, they will be provided with a copy of the document, certified by an INS officer to be a true and correct copy."

#### **DEFICIENCY C&OM-2**

In accordance with the ICE NDS, Correspondence and Other Mail, section (III)(G), the FOD must ensure, "All facilities shall implement policies and procedures addressing the issue of acceptable and non-acceptable mail. Procedures shall cover the rejection of incoming and outgoing mail rejected for reasons of facility order and security. Incoming and outgoing general correspondence and other mail may be rejected by the OIC to protect the security, good order, or discipline of the institution; to protect the public; or to deter criminal activity.

The affected detainees shall be notified when incoming or outgoing mail is confiscated or withheld (in whole or in part). The detainee shall receive a receipt for the confiscated or withheld item(s)."

#### **DEFICIENCY C&OM-3**

In accordance with the ICE NDS, Correspondence and Other Mail, section (III)(H)(1)(2)(3)(4)(5)(6), the FOD must ensure, "When an officer finds an item that must be removed from a detainee's mail, he/she shall make a written record. This shall include:

1. The detainee's name and A-number;
2. The name of the sender and recipient;
3. A description of the mail in question;
4. A description of the action taken and the reason for it (including significant dates);
5. The disposition of the item and the date of disposition; and
6. The signature of the officer."

## **DETAINEE CLASSIFICATION SYSTEM (DCS)**

ODO reviewed the Detainee Classification System standard at the RCADC to determine if there is a formal classification process for managing and separating detainees based on verifiable and documented data, in accordance with the ICE NDS. ODO interviewed staff, and reviewed policy, housing unit rosters, and detainee files.

RCADC management classifies detainees as minimum, medium and maximum. Officers run criminal history checks using NCIC to determine the highest level conviction for each detainee. ODO confirmed that classification of detainees is not reviewed for accuracy and completeness by a supervisor (**Deficiency DCS-1**).

ERO does not consistently provide risk classification assessments to assist RCADC management with classification of detainees upon admission to the facility. A review of 19 detention files confirmed only two contained documentation from ERO regarding detainee classification (**Deficiency DCS-2**). This is a repeat deficiency from the last ODO inspection in June 2012.

RCADC has ten housing units, two of which are used for male and female ICE detainees. Each ICE housing unit has two tiers. Level I and II detainees are housed on one tier of the housing unit, and Level III detainees are housed on the remaining tier. RCADC release one tier out at a time to prevent commingling. ODO confirmed two detainees were improperly classified, which resulted in the commingling of Level I and III detainees (**Deficiency DCS-3**). This is a repeat deficiency from the last ODO inspection in June 2012.

ODO reviewed written policies and procedures at RCADC. According to RCADC policy, detainee classification is reviewed on a monthly basis. ODO found that detainees are not re-classified and a detainee's classification level is solely dependent on the highest criminal conviction contained in the criminal history (**Deficiency DCS-4**). The facility handbook contains information regarding appeals of security classifications via a formal grievance.

## **STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS**

### **DEFICIENCY DCS-1**

In accordance with the ICE NDS, Detainee Classification System, section (III)(C), the FOD must ensure, "In all detention facilities, a supervisor will review the intake/processing officer's classification files for accuracy and completeness. Among other things, the reviewing officer shall ensure that each detainee has been assigned to the appropriate housing unit."

### **DEFICIENCY DCS-2**

In accordance with the ICE NDS, Detainee Classification System, section (III)(D), the FOD must ensure, "ICE offices shall provide non-ICE facilities with the necessary information for the facility to classify ICE detainees."

**DEFICIENCY DCS-3**

In accordance with the ICE NDS, Detainee Classification System, section (III)(E)(1)(a), the FOD must ensure that, “Level 1 classification,

- a. May not be housed with Level 3 Detainees.”

**DEFICIENCY DCS-4**

In accordance with the ICE NDS, Detainee Classification System, section (III)(G), the FOD must ensure, “All facility classification systems shall ensure that a detainee may be reclassified any time and the classification level re-determined.”

## **DETAINEE GRIEVANCE PROCEDURES (DGP)**

ODO reviewed the Detainee Grievance Procedures standard at RCADC 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 interviewed staff and detainees, and reviewed facility policy, the detainee handbook, and grievance documentation.

ODO found the grievance system at RCADC allows detainees to file informal, formal and emergency grievances. Grievance forms are available in the housing units, and detainees may obtain assistance from another detainee or a facility staff member in preparing a grievance. RCADC policy identifies procedures for handling emergency grievances, and there is an established grievance committee.

RCADC maintains a grievance log to document and track grievances filed by detainees. A review of the log confirmed there were six formal grievances filed by detainees during the 12 months preceding this inspection, and each received a timely response. ODO confirmed responses are provided to detainees in writing, but a copy is not placed in the individual detention file (**Deficiency DGP-1**). All six grievances involved miscellaneous issues, and no pattern or trend was observed regarding grievance subject matter. No grievances alleged staff misconduct.

The facility handbook provides notice to detainees of the opportunity to file formal and informal grievances, the procedure for filing a grievance and an appeal, the right to have a grievance referred to a higher level of review, the procedure for contacting ICE to appeal a decision of the OIC, and the policy prohibiting staff from retaliating against a detainee for filing a grievance. The facility handbook does not provide instructions on how to file officer misconduct complaints directly with the U.S. Department of Justice (**Deficiency DGP-2**).

## **STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS**

### **DEFICIENCY DGP-1**

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."

### **DEFICIENCY DGP-2**

In accordance with the ICE NDS, Detainee Grievance Procedures, section (III)(G)(6), the FOD must ensure, "The grievance section of the detainee handbook will provide notice of the following:

6. The opportunity to file a complaint about officer misconduct directly with the Justice Department by calling 1-800-869-4499 or by writing to:

Department of Justice  
P.O. Box 27606  
Washington, DC 20038-7606."

## **DETAINEE HANDBOOK (DH)**

ODO reviewed the Detainee Handbook standard at RCADC to determine if the facility provides each detainee with a handbook written in English and any other languages spoken by a significant number of detainees housed at the facility, describing the facility's rules and sanctions, disciplinary system, mail and visiting procedures, grievance system, services, programs, and medical care, in accordance with the ICE NDS. ODO reviewed facility policy and the handbook, and interviewed staff and detainees.

The facility handbook is available in English, Spanish and Hmong. The ICE National Detainee Handbook is issued to detainees at the ERO Field Office in Bloomington, Minnesota, prior to arrival at RCADC. A committee consisting of two program officers and four lieutenants reviews and updates the facility handbook annually. After revisions and updates are made to the facility handbook, the administrative lieutenant approves the final revised version before it is printed. The facility handbook was last revised on October 29, 2012.

A review of 19 active detention files and interviews of 19 detainees confirmed the facility does not provide detainees a facility handbook upon admission (**Deficiency DH-1**).

## **STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS**

### **DEFICIENCY DH-1**

In accordance with ICE NDS, Detainee Handbook, section (I), the FOD must ensure, "Every OIC will develop a site-specific detainee handbook to serve as an overview of, and guide to, the detention policies, rules, and procedures in effect at the facility. The handbook will also describe the services, programs, and opportunities available through various sources, including the facility, ICE, private organizations, etc. Every detainee will receive a copy of this handbook upon admission to the facility.

Detainees are expected to behave in accordance with the rules set down in the handbook, and will be held accountable for violations. Therefore, the facility staff will advise every detainee to become familiar with the material in the handbook."

## ENVIRONMENTAL HEALTH AND SAFETY (EH&S)

ODO reviewed the Environmental Health and Safety standard at RCADC 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, reviewed policy and procedures, documents and logs, documentation of hazardous chemical management, and fire prevention and control policies and procedures.

ODO found the sanitation at RCADC to be excellent. Hazardous substances are stored in a fire resistant storage cabinet in the building services area, which is located outside the facility's secure perimeter. ODO confirmed RCADC has a system for storing, issuing, and maintaining inventories of hazardous materials. Inspection of storage sites confirmed hazardous substances are properly stored and a review confirmed inventories are accurate. ODO confirmed the master index of chemicals includes their locations and documentation of semi-annual review. MSDS are present for all chemicals.

A review of documentation confirmed fire drills are conducted quarterly instead of monthly as required by the NDS. The quarterly drills are not conducted in all areas of the facility and are not performed by all shifts (**Deficiency EH&S-1**). Monthly fire drills in all areas of the facility and on all shifts ensure the entire staff is knowledgeable of actions to take in the event of a fire, including evacuation procedures and routes. Exit diagrams were replaced following the last ODO inspection in June 2012, and the diagrams, printed in English and Spanish, are posted in common areas throughout the facility. The diagrams show the locations of emergency equipment; however, areas of safe refuge are not identified (**Deficiency EH&S-2**). Facility administrators believe including this information on exit diagrams is a security risk. Designation of areas of safe refuge serves an important life-safety function in the event of fire or other emergency requiring individuals to shelter in place. This is a repeat deficiency from the last ODO inspection in June 2012.

ODO reviewed documentation confirming pest and rodent control services are provided on a monthly basis by Plunkett's Pest Control, Inc. ODO also reviewed documentation of drinking and waste water testing by the City of St. Paul Municipal Water Plant.

The emergency power generator is run monthly for four hours and not biweekly for one hour, as required by the NDS. Testing by an external generator service company is completed every six months and not quarterly, as required by the NDS (**Deficiency EH&S-3**). ODO reviewed documentation that reflects the frequency and duration of generator tests is consistent with guidelines set by the manufacturer, but those guidelines do not comply with the NDS.

Barbering services are provided by a contractor on a monthly basis. Detainees are charged \$25 for a haircut. ODO confirmed RCADC management does not mandate hair length. Barbering is conducted in a dedicated room. Inspection of the room confirmed it is in excellent condition, and sanitation regulations are posted.

## **STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS**

### **DEFICIENCY EH&S-1**

In accordance with the ICE NDS, Environmental Health and Safety, section (III)(L)(4), the FOD must ensure, “Monthly fire drills will be conducted and documented separately in each department.”

### **DEFICIENCY EH&S-2**

In accordance with the ICE NDS, Environmental Health and Safety, section (III)(L)(5)(a)(b)(c), the FOD must ensure, “In addition to a general diagram, the following information must be provided on existing signs:

- a. English and Spanish instructions;
- b. “You Are Here” markers;
- c. Emergency equipment locations.

New signs and sign replacements will also identify and explain ‘Areas of Safe Refuge.’”

### **DEFICIENCY EH&S-3**

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.”

## FOOD SERVICE (FS)

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

All work associated with preparing meals is performed by the contractor AFSM. No detainees or county inmates are assigned to work in the food service area, which is located outside the secure perimeter of RCADC. The contractor employs a total of (b)(7)e food service staff, including the FSD, an assistant FSD, (b)(7)e full-time cooks, and (b)(7)e part-time cooks. ODO verified that RCADC reviews the master cycle menu annually and a registered dietician certifies the menu based on a complete nutritional analysis. Review confirmed the master menu is a 28-day cycle and offers a variety of food items.

The FSD provided documentation that 30 medical diets were approved at the time of the inspection; however, documentation did not differentiate detainees from inmates. The medical staff approves all medical diets. The facility does not offer a common fare program to accommodate detainees whose religious dietary needs cannot be met by the regular menu (**Deficiency FS-1**). Per facility policy, approval of a detainee request for a religious diet is granted in consultation with contract religious leaders, and arrangements are made to provide the approved diet. ODO confirmed RCADC policy does not require development of a ceremonial meal schedule (**Deficiency FS-2**). The FSD stated that during Lent, the facility does not provide a meatless lunch and dinner on Fridays, or on Ash Wednesday (**Deficiency FS-3**).

The FSD stated pre-employment medical examinations are not completed for food service staff, because medical examinations are not required by AFSM policy (**Deficiency FS-4**). Medical clearance serves the critical purpose of ensuring food service workers do not have a communicable disease in any transmissible stage or condition. This is a repeat deficiency from the last ODO inspection in June 2012.

RCADC employs a satellite system of meal service involving preparation of meals in the kitchen and delivery to housing units on insulated trays. ODO observed the food service staff preparing meals and loading carts for delivery to the housing units. ODO sampled the Wednesday evening meal and confirmed it was of good quality and taste. All items served were on the approved menu and in the prescribed portion size. Appropriate condiments were provided. Temperatures of the items served were verified in compliance with the NDS using a food service thermometer. ODO observed the cook supervisor checking temperatures as the trays were loaded at the serving line. Hot items were observed at 180 degrees Fahrenheit as trays were prepared and 140 degrees Fahrenheit upon service. Trays were served to detainees within 30 minutes of preparation. ODO observed the service of the meal in the housing units, and there were no complaints from detainees regarding food service. Inspection of sack meals provided to detainees confirmed the contents met NDS requirements.

During the inspection, ODO observed a high level of sanitation in the food service area. The most recent annual inspection by the Saint Paul-Ramsey County Public Health, Environmental Health Section was conducted on November 14, 2013. The report documents three minor violations, none

of which affected compliance with the NDS. The food service director stated daily and weekly inspections are completed; however, a review of documentation found the most-recent weekly inspection was documented in November 2013 (**Deficiency FS-5**). Frequent, documented inspections ensure sanitary conditions on an ongoing basis. This is a repeat deficiency from the last ODO inspection in June 2012.

The food service storage areas consist of a dry storage room, a walk-in freezer, and a walk-in cooler. ODO confirmed temperatures in the walk-in freezer and cooler unit are maintained at the required levels. The facility stocks a 15-day minimum supply of food and has a first-in/first-out stock rotation system. ODO observed RCADC has appropriate tool accountability in the food service area.

## **STANDARD/POLICY REQUIREMENT FOR DEFICIENT FINDINGS**

### **DEFICIENCY FS-1**

In accordance with ICE NDS, Food Service, section (III)(E)(2), the FOD must ensure, “Common fare is intended to accommodate detainees whose religious dietary needs cannot be met on the main line. The common-fare menu is based on a 14-day cycle, with special menus for the ten Federal holidays. The menus must be certified as exceeding minimum daily nutritional requirements.”

### **DEFICIENCY FS-2**

In accordance with ICE NDS, Food Service, section (III)(E)(10), the FOD must ensure, “The Chaplain, in consultation with the local religious leaders, if necessary, shall develop the ceremonial-meal schedule for the next calendar year, providing it to the OIC. This schedule shall include the date, religious group, estimated number of participants, and special foods required. Ceremonial and commemorative meals shall be served in the food service facility unless otherwise approved by the [Officer in Charge].”

### **DEFICIENCY FS-3**

In accordance with ICE NDS, Food Service, section (III)(E)(11)(c), the FOD must ensure, “During the Christian season of Lent, a meatless meal (lunch or dinner) shall be served on the main line on Fridays and on Ash Wednesday.”

### **DEFICIENCY FS-4**

In accordance with ICE NDS, Food Service, section (III)(H)(3)(a), the FOD must ensure, “All food service personnel (both staff and detainee) shall receive a pre-employment medical examination.”

### **DEFICIENCY FS-5**

In accordance with ICE NDS, Food Service, section (III)(H)(13)(a), the FOD must ensure, “The facility shall implement written procedures for the administrative, medical, and/or dietary personnel conducting the weekly inspections of all food service areas, including dining, storage, equipment, and food-preparation areas. All components of the food service department, (ranges, ovens, refrigerators, mixers, dishwashers, garbage disposal, etc.) require frequent inspection to ensure their sanitary and operable condition. Staff shall check refrigerator and water temperatures daily, recording the results.

The FSA or CS of food service shall inspect food service areas weekly.”

## **FUNDS AND PERSONAL PROPERTY (F&PP)**

ODO reviewed the Funds and Personal Property standard at RCADC to determine if controls are in place to inventory, receipt, store, and safeguard detainees' personal property, in accordance with the ICE NDS. ODO toured the facility, reviewed local policies, the detainee handbook, and detention files, interviewed staff, and inspected areas where detainee property and valuables are stored.

Property is inventoried during the intake process. ODO reviewed property bags for each of the 19 detainees at RCADC and confirmed inventory forms are signed by intake officers and detainees. Personal property is placed in hanging garment bags and stored in a locked property room. The property room is secure and only accessible to authorized staff. Documentation confirmed personal property is inventoried on a bi-weekly basis by the property room supervisor.

Upon admission, detainee cash is deposited in an electronic funds receiver, which creates an account for the detainee that is accessible via a vending card issued at admission. Valuable property items are placed in a sealed clear envelope, which is placed inside of the hanging garment bag. RCADC does not have a dedicated safe or secured locker accessible to only designated supervisors to store valuables (**Deficiency F&PP-1**).

The facility handbook provides notice to detainees of which items may be retained in their possession, the rules for storing or mailing property not allowed in their possession, the procedure for claiming property upon release, and the procedure for filing a claim for lost or damaged property. The facility handbook does not provide the procedure for requesting a certified copy of identity documents such as passports and birth certificates (**Deficiency F&PP-2**).

## **STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS**

### **DEFICIENCY F&PP-1**

In accordance with the ICE NDS, Funds and Personal Property, section (III)(A)(2)(3)(4), the FOD must ensure "each facility will have the following:

2. Valuable-property envelopes, accessible to designated supervisor(s) only;
3. A dedicated safe for the cash box and property envelopes;
4. A secured locker for holding large valuables, accessible to designated supervisor(s) only."

### **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:

2. That, upon request, they will be provided an INS-certified copy of any identity document (passport, birth certificate, etc.) placed in their A-files."

## MEDICAL CARE (MC)

ODO reviewed the Medical Care standard at RCADC to determine if detainees have access to healthcare and emergency services to meet health needs in a timely manner, in accordance with the ICE NDS. ODO toured the clinic, reviewed policies and procedures, observed medication distribution and sick call, and verified medical staff credentials. ODO examined the medical records of each of the 19 detainees held at RCADC, one of whom had a chronic health condition. Interviews were conducted with detainees, health care personnel, and administrative staff.

Health care at RCADC is provided by Ramsey County 24 hours per day, seven days per week by 14 registered nurses (RNs) and (b)(7)e medical assistants. (b)(7)e RN is a nurse clinician and serves as the administrative health authority. The clinical medical authority is a physician who is on site four hours weekly. Additional services are provided by a nurse practitioner eight hours per week, a psychiatrist on site six hours per week, and a dentist and dental assistant on site four hours per week. In-patient and out-patient services are provided by Regions Hospital, St. Paul, Minnesota. Health Partners Specialty Group, a group of physicians affiliated with Regions Hospital, provide medical specialty services. RCADC also has contracts with the Ramsey County Mental Health Crisis Team and with DaVita Dialysis for in-house dialysis three days weekly, as necessary. Bilingual staff and a telephone interpretation service are used as needed. ODO determined current staffing is sufficient to perform basic examinations and provide treatment to the detainee population at RCADC.

The clinic has two examination rooms, a medication room, a dental suite/dialysis room, a medical records room, three short-term observation rooms, a nursing station, and the nurse clinician's office. There is a waiting room with a drinking fountain and restroom facilities.

Correctional officers conduct intake medical screening, which addresses medical, mental health, and suicide risk factors. If the correctional officer identifies a medical or mental health issue, suicidal ideation, or confirms that a detainee is taking medication, the screening form is sent electronically to the nursing station in the medical unit, where it is printed. This system ensures nursing staff is notified immediately of any health care needs requiring follow-up. Based on interviews with facility staff assigned to the intake area, correctional officers do not receive training to perform intake screenings (**Deficiency MC-1**). Specialized training is critical to ensure officers possess the skill set necessary to conduct thorough intake screenings and to identify and document issues requiring attention.

A chest X-ray is performed in-house within 24 hours of admission to rule out tuberculosis (TB). ODO reviewed the medical records for each of the 19 detainees housed at RCADC and confirmed chest X-rays were performed within 24 hours of admission in all cases. RCADC does not have a negative pressure room; therefore, detainees with an abnormal chest X-ray or symptoms of TB are transported to the local hospital for continued observation and treatment.

A nurse practitioner performs health appraisals, which include a hands-on physical examination and dental screening. A review confirmed the appraisal form used at RCADC meets NDS requirements. ODO confirmed health appraisals were completed within 14 days of arrival at the facility in each of the 19 cases reviewed.

Detainees access health care by completing sick call request forms available in English and Spanish. The sick call request forms are obtained from a housing unit correctional officer. Completed sick call request forms are given to a correctional officer or directly to nursing staff during medication administration. ODO observed nursing staff picking up completed sick call request forms from an unsecured box in the officer's station within the housing unit. During interviews, detainees stated they turn in sick call request forms to a housing unit officer (**Deficiency MC-2**). Involvement of officers in this process violates patient confidentiality, because medical information is documented on the forms. Access to health care may be impeded if detainees are reluctant to request services through correctional staff. This is a repeat deficiency from the most-recent ODO inspection in June 2012.

ODO verified sick call requests are triaged upon receipt by nursing staff, and detainees are evaluated at sick call in a timely manner. Nursing staff conducts sick call five days per week using standardized nursing protocols. Consent for Treatment is included on each sick call request form. The nurse clinician stated that seriously or terminally ill detainees are not accepted at RCADC. If a detainee becomes seriously ill or injured, a transfer is arranged through ERO. ODO verified facility policy addresses required components of the NDS.

Omni Care provides mail order pharmacy services under contract. Nurses are responsible for administering medication within the housing units, and they complete rounds using medication carts. ODO reviewed medication administration records and confirmed entries were complete. ODO confirmed medication carts are inventoried three times per day at shift change.

RCADC has an emergency plan that includes emergency contact phone numbers. ODO observed an emergency response cart, including an automated external defibrillator (AED) located in the medical unit. There is an AED and a first aid kit at each correctional officer station. A review of training records for all medical staff and (b)(7) randomly-selected correctional officers confirmed all received initial and periodic training in first aid, including the requirement to respond to medical emergencies within a four-minute response time. Training records also confirmed current certification in cardio-pulmonary resuscitation (CPR) and the use of an AED.

## **STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS**

### **DEFICIENCY MC-1**

In accordance with ICE NDS, Medical Care, section (III)(D), the FOD must ensure, "All new arrivals receive initial medical and mental health screening immediately upon their arrival by a health care provider or an officer trained to perform this function."

### **DEFICIENCY MC-2**

In accordance with ICE NDS, Medical Care, section (III)(M), the FOD must ensure, "All medical providers shall protect the privacy of detainees' 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 standard at the RCADC 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, in accordance with the ICE NDS. ODO interviewed staff and ICE detainees, and reviewed logbooks, policies, and procedures.

Unannounced visits are conducted by an SDDO on a monthly basis, but there is no documentation of which areas are visited (**Deficiency SDC-1**). The facility staff member designated as the ICE liaison stated the SDDO only visits the housing units. A DO conducts weekly scheduled visits to the housing units on Fridays. While touring the housing units, ODO found weekly visitation schedules were not posted in all of the housing units (**Deficiency SDC-2**). The facility initiated corrective action during the inspection by posting schedules in the housing units. This is a repeat finding from the July 2012 ODO inspection.

RCADC does not have written procedures for routing detainee requests through the appropriate ICE officials (**Deficiency SDC-3**). Detainees can submit written requests to ICE staff by filling out a request form and labeling it "Immigration." Envelopes are available in the housing units if the detainee wishes to seal the request. A facility staff member scans and emails each request to ERO. ODO reviewed all detainee requests from October 2013 through March 2014 and confirmed all requests received a response within 72 hours. There is no log to track detainee requests (**Deficiency SDC-4**). Facility staff initiated corrective action during the inspection by creating a log.

The facility handbook does not inform detainees they can submit written questions and concerns to ICE staff, or the procedures for doing so, including the availability of assistance in preparing a request (**Deficiency SDC-5**). The facility handbook does not contain OIG Hotline information (**Deficiency SDC-6**).

ODO verified that ICE staff documents and completes the Telephone Serviceability Worksheet and the Facility Liaison Visit Checklist; however, records were missing from each for two and three-week periods (**Deficiencies SDC-7 and 8**).

## **STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS**

### **DEFICIENCY SDC-1**

In accordance with the ICE NDS, Staff-Detainee Communication, section (III)(A)(1)(a)(b)(c)(d), 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 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 room.”

#### **DEFICIENCY SDC-2**

In accordance with the ICE NDS, Staff-Detainee Communication, section (III)(A)(2)(b), the FOD must ensure, “written schedules shall be developed and posted in the detainee living areas and other areas with detainee access.”

#### **DEFICIENCY SDC-3**

In accordance with the ICE NDS, Staff-Detainee Communication, section (III)(B), the FOD must ensure, “all facilities that house ICE detainees must have written procedures to route detainee requests to the appropriate ICE official.”

#### **DEFICIENCY SDC-4**

In accordance with the ICE NDS, Staff-Detainee Communication, section (III)(B)(2)(a)(b)(c)(d)(e)(f)(g), 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.”

#### **DEFICIENCY SDC-5**

In accordance with the ICE NDS, Staff-Detainee Communication, section (III)(B)(3), the FOD must ensure, “The handbook shall state that the detainee has the opportunity to submit written questions, requests, or concerns to ICE staff and the procedures for doing so, including the availability of assistance in preparing the request.”

#### **DEFICIENCY SDC-6**

In accordance with the Change Notice National Detention Standards Staff-Detainee Communication Standard, dated June 15, 2007, the FOD must ensure, “The OIG Hotline information is to be included in the detainee handbook in each of the aforementioned locations.”

#### **DEFICIENCY SDC-7**

In accordance with the Change Notice, National Detention Standards Staff/Detainee Communication Model Protocol, dated June 15, 2007, the FOD must ensure, “For Inter-Governmental Service Agreements (IGSAs) facilities housing ICE detainees the model protocol should be completed weekly for regularly used facilities and each visit for facilities, which are used intermittently.”

**DEFICIENCY SDC-8**

In accordance with the Detainee Telephone Services memorandum, dated April 6, 2007, the FOD must ensure, “Effective immediately, concurrent with staff/detainee communications visits, ICE staff will verify serviceability of all telephones in detainee housing units by conducting random calls to pre-programmed numbers posted on the pro bono/consulate list. ICE staff will also interview a sampling of detainees and review written detainee complaints regarding detainee telephone access. The Field Office Director (FOD) shall ensure that all phones in all applicable facilities are tested on a weekly basis.

Each serviceability test shall be documented using the attached form [Telephone Serviceability Worksheet].”

## TELEPHONE ACCESS (TA)

ODO reviewed the Telephone Access standard at RCADC to determine if the facility provides detainees with reasonable and equitable access to telephones to maintain ties with family and others in the community, in accordance with the ICE NDS. ODO interviewed staff, reviewed local policies concerning telephone access, and tested randomly-selected telephones in the housing units to determine operability.

ODO verified detainees have reasonable and equitable access to telephones at RCADC. The telephone availability ratio is one detainee per telephone. The facility also provides a teletype (TTY) device, if needed. Notification that calls are subject to monitoring is posted in English and Spanish at each telephone station.

ODO verified both facility and ICE logbooks and serviceability worksheets which indicated the telephones were inspected daily by facility staff and at least weekly by ICE staff. During the inspection, ODO tested all the telephones in the detainee housing units and confirmed that none of the telephones in the male, female, and SMU housing units allowed detainees telephone access to embassies and consulates, pro-bono entities, DHS OIG, or other governmental agencies **(Deficiency TA-1)**.

RCADC policy limits detainee telephone calls to 15 minutes before the call is automatically cut-off **(Deficiency TA-2)**. RCADC explains the telephone access rules in the detainee handbook, but detainees are unaware of the telephone access rules because they are not receiving the detainee handbook upon admission **(Deficiency TA-3)**. The access rules for telephone use did not identify procedures for obtaining an unmonitored call to a court, a legal representative, or for the purposes of obtaining legal representation, and a notice of the procedures was not posted at each telephone location **(Deficiency TA-4)**.

## STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS

### DEFICIENCY TA-1

In accordance with the ICE NDS, Telephone Access, section (III)(E)(1)(2)(3)(4)(5), the FOD must ensure, "Even if telephone service is generally limited to collect calls, the facility shall permit the detainee to make direct calls:

1. to the local immigration court and the Board of Immigration Appeals;
2. to Federal and State courts where the detainee is or may become involved in a legal proceeding;
3. to consular officials;
4. to legal service providers, in pursuit of legal representation or to engage in consultation concerning his/her expedited removal case;
5. to a government office, to obtain documents relevant to his/her immigration case;

If the limitations of its existing phone system will initially preclude the facility from meeting these requirements, the OIC must report this to INS. INS will respond by providing some means of access, e.g., cell phones into which facility staff can pre-program authorized numbers (in the above categories) with all other numbers blocked. These phones will be maintained by on-site INS liaison officers or local officials, and must be provided in an environment that meets privacy standards."

## **DEFICIENCY TA-2**

In accordance with the ICE NDS, Telephone Access, section (III)(F), the FOD must ensure, “The facility shall not restrict the number of calls a detainee places to his/her legal representatives, nor limit the duration of such calls by rule or automatic cut-off, unless necessary for security purposes or to maintain orderly and fair access to telephones. If time limits are necessary for such calls, they shall be no shorter than 20 minutes, and the detainee shall be allowed to continue the call if desired, at the first available opportunity.

The facility may place reasonable restrictions on the hours, frequency and duration of the other direct and/or free calls listed above, but these must not unduly limit a detainee attempting to obtain legal representation.”

## **DEFICIENCY TA-3**

In accordance with the ICE NDS, Telephone Access, section (III)(B), the FOD must ensure, “As described in the “General Provisions” standard, the facility shall provide telephone access rules in writing to each detainee upon admittance, and also shall post these rules where detainees may easily see them.”

## **DEFICIENCY TA-4**

In accordance with the ICE NDS, Telephone Access, section (III)(K)(2), the FOD must ensure, “The facility shall have a written policy on the monitoring of detainee telephone calls. If telephone calls are monitored, the facility shall notify detainees in the detainee handbook or equivalent provided upon admission. It shall also place a notice at each monitored telephone stating:

2. the procedure for obtaining an unmonitored call to a court, legal representative, or for the purposes of obtaining legal representation.

A detainee’s call to a court, a legal representative, or for the purposes of obtaining legal representation will not be aurally monitored absent a court order. The OIC retains the discretion to have other calls monitored for security purposes.”