



U.S. Department of Homeland Security

Immigration and Customs Enforcement

Office of Professional Responsibility

Inspections and Detention Oversight

Washington, DC 20536-5501

**Office of Detention Oversight
Compliance Inspection**

**Enforcement and Removal Operations
Detroit Field Office
Calhoun County Correctional Facility
Battle Creek, Michigan**

May 13–15, 2014

**COMPLIANCE INSPECTION
CALHOUN COUNTY CORRECTIONAL FACILITY
DETROIT 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 replaced 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

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

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EXECUTIVE SUMMARY

ODO conducted a compliance inspection of the Calhoun County Correctional Facility (CCCF) in Battle Creek, Michigan, from May 13 to 15, 2014. CCCF, which opened in 1994, is owned by the County of Calhoun and operated by the Calhoun County Sheriff’s Department. ERO began housing detainees at CCCF in 1999 under an intergovernmental service agreement with the Montgomery County Sheriff’s Department. Male and female detainees of all security classification levels (Levels I through III) are detained at CCCF for periods in excess of 72 hours. This inspection evaluated CCCF’s compliance with the 2000 NDS and the 2011 Sexual Abuse and Assault Prevention and Intervention (SAAPI) PBNDS.¹

Capacity and Population Statistics	Quantity
Total Bed Capacity	632
ICE Detainee Bed Capacity	200
Average Daily Population	477
Average Daily ICE Population	117
Average ICE Detainee Length of Stay (Days)	45
Male Detainee Population (as of 05/13/14)	80
Female Detainee Population (as of 05/13/14)	24

The ERO Field Office Director (FOD) in Detroit, Michigan, is responsible for ensuring facility compliance with the 2000 NDS, 2011 SAAPI standard, and ICE policies. An Assistant Field Office Director and an Immigration Enforcement Agent oversee daily ICE operations at CCCF. A Detention Service Manager is assigned to the facility.

The Chief Deputy is the highest-ranking official at CCCF and is responsible for oversight of daily operations. (b)(7)e and (b)(7)e staff members supported CCCF management at the time of the inspection. Aramark Correctional Service provides food service and Corizon Health Incorporated provides medical care at the facility. The facility is accredited by the National Commission on Correctional Health Care.

In December 2011, ODO conducted an inspection of CCCF under the 2000 NDS. During that inspection, ODO reviewed 15 NDS and found CCCF compliant with five standards. Twenty-two deficiencies were found in the nine remaining standards.

During this inspection ODO reviewed 15 NDS and the 2011 SAAPI and found CCCF compliant with ten standards. ODO found 11 deficiencies in the following six areas: Access to Legal Material (1 deficiency), Admission and Release (1), Food Service (3), Funds and Personal Property (1), Special Management Unit – Administrative Segregation (3), and Telephone Access (2). ODO made one recommendation² regarding facility policy and procedures in the Funds and Personal Property Standard and did not cite any best practices.

This report details all deficiencies and refers to the specific relevant sections of the 2000 NDS. ERO will be provided a copy of this report to assist in developing corrective actions to resolve all identified deficiencies. These deficiencies were discussed with ERO and CCCF staff during the on-site inspection and at a subsequent closeout briefing conducted on May 15, 2014.

¹ CCCF signed a contract modification with ICE on August 30, 2012 to comply with SAAPI.

² The recommendation is annotated in the report as “R.”

Detainees are screened, interviewed and classified by CCCF staff upon arrival. Classification decisions are based on information provided by ERO. 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. All incoming detainees receive pat-down searches; strip searches are not performed unless reasonable suspicion is established in accordance with ICE and facility policy. However, on May 14, 2014, ODO observed four newly-arrived detainees, and witnessed those detainees being strip searched.

All detainees are issued an ICE National Detainee Handbook and facility handbook in either English or Spanish during intake. A review of 15 active and 15 inactive detention files confirmed detainees routinely receive these books. A CCCF committee reviews the facility handbook annually to make revisions wherever necessary. The handbook was last reviewed by the committee in January 2014.

The facility offers detainees mobile computer stations to access legal materials. Mobile computer stations are available for use by detainees for up to 14 hours daily. The facility handbook does not include the procedure for notifying a designated employee that library material is missing or damaged, nor were these procedures posted.

The grievance system at CCCF allows detainees to file informal, formal and emergency grievances. Forty-six grievances were filed by detainees between January 14, 2014 and May 11, 2014. The grievance topics broke down as follows: food service (21), complaints about staff (9), discipline (8), medical care (5), ICE-specific questions (2), and telephone access (1). No trends or patterns were noted among the grievances. All grievances were signed and dated by the person receiving and handling the grievance and responses provided within the five days required by policy. None of the complaints about staff were reported to ERO; facility staff determined they did not involve “misconduct.”

Sanitary conditions throughout the facility were good at the time of the inspection. Material Safety Data Sheets are at each location where chemicals are used; inventories of cleaning chemicals used within the facility are accurate and current; required weekly and monthly fire and safety inspections are conducted throughout the facility; and exit/evacuation diagrams are posted in English and Spanish. The facility has a separate room dedicated for male barbering and female hair care.

Aramark Correctional Service manages food service operations. CCCF has a satellite feeding operation. Nutritional analysis of the master-cycle menu was completed by a registered dietitian in April, 2014. ODO observed trays being placed on open, unsecured carts delivered to the units by county inmates. The one knife used in the food service area was properly stored; however, ODO found the steel shank did not run the entire length of the plastic handle, as required by the relevant standard. A facility’s tool control officer is responsible for mounting a cable to the knife blade, so that it cannot be easily removed and possibly used as a weapon. Aramark employees had not received pre-employment medical examinations at the time of the inspection.

Detainee property is searched and inventoried during intake. Funds are counted twice by (b)(7)e different officers before being placed into a drop-safe kiosk. Foreign currency is counted, and

noted on the property form and stored with the detainee's valuables. ODO recommends all foreign currency be kept in a dedicated safe for the cash. Calhoun County audits detainee funds twice yearly. CCCF's Funds and Personal Property Standard Operating Procedures lack written procedures governing inventories and audits.

Corizon Health Incorporated provides medical services at CCCF. Medical services are provided on site 24 hours a day, seven days a week, by a Health Services Administrator (HSA), who is also a registered nurse (RN), a part-time physician, (b)(7)e additional RNs, (b)(7)e icensed practical nurses, and an administrative assistant. In addition, full-time mental health services are provided by a licensed clinical social worker and a contract psychiatrist on site eight hours weekly. Dental services are provided by a contract dentist.

Initial medical and mental health screenings are conducted upon arrival by trained correctional officers. Any significant findings, including medications, result in an immediate referral to the medical staff. The initial health appraisal is conducted by RNs. A medical record review confirmed health appraisals include hands-on physical examinations and dental screenings, signed by the physician. Nurses are trained in performing physical examinations by the physician and dental screenings by the dentist. The health appraisals were completed within 14 days, as required by the standard.

Detainees access medical care by completing sick call requests in each housing unit. Requests are retrieved from a secure box by medical staff and triaged within 24 hours. Medical staff sees detainees within 24 to 48 hours of receipt of the request. Segregated detainees follow the same process and receive daily visits from nursing staff. Medication rounds are made to all CCCF housing units by nursing staff and medication is provided in labeled blister packs.

CCCF signed a contract modification with ICE on August 30, 2012, agreeing to implement the 2011 SA-API standard. The facility's sexual assault policy addresses all requirements of the 2011 PBNDS, including written procedures for preventing, reporting, responding to, investigating and tracking incidents and allegations of sexual abuse or assault. Detainees are screened at intake in order to identify sexual victims and predators. In the event of an allegation, incident, or suspected sexual abuse or assault, the detainee victim is immediately taken to the health services department for stabilization and assessment. Mental health services are provided by health care staff. The jail administrator reports incidents and allegations to ERO and refers cases for investigation and potential prosecution. ODO's review of (b)(7)e randomly-selected staff training records confirmed staff completes pre-service and annual in-service training on sexual abuse and assault prevention and intervention. CCCF's program complies with all the requirements of the standard.

According to data from the Joint Integrity Case Management System (JICMS), three allegations of sexual contact were reported between December 1, 2011 and April 20, 2014. CCCF documentation included these three allegations and one additional allegation. The one additional allegation involved a July 1, 2013 incident. According to ERO, the July 1, 2013 incident was not reported to the JIC because the allegation did not meet the JIC's criteria for notification. The facility's investigation concluded the alleged incident did not meet the Prison Rape Elimination Act definitions. All allegations referenced above were reported to ERO by facility management and handled internally in accordance with the standard and facility policy.

The ERO Detroit Field Office has a staff-detainee communication policy. The policy encourages and requires informal, direct and written contact among detainees and staff. CCCF supervisory staff visits the detainee housing units daily, while ERO staff visits weekly to address detainee requests and concerns. ERO visits are also documented on a Facility Liaison Checklist. Detainees at CCCF submitted 195 requests to ICE between February and May 2014, involving the following topics: immigration status (97), telephone access (40), court dates (36), marriage inquiries (10) and miscellaneous topics (12). ERO responded to all requests within 72 hours.

CCCF's suicide prevention and intervention policy covers all elements required by the NDS. Staff receives training and the suicide watch rooms were "suicide resistant." The HSA reported that five detainees have been placed on suicide watch in calendar year 2014, two of whom were placed on suicide watch during the inspection. In one case, a female detainee was identified as at risk for suicide because she expressed fear of detention and potential deportation during intake. Booking officers referred her to medical staff. In the second case, a detainee received information about his family, which led him to declare he wanted to hurt himself. ODO observed the clinical social worker interview both detainees and reviewed documentation showing CCCF staff made 15-minute wellness checks. The detainees were issued suicide-resistant smocks and blankets. Both detainees were released from suicide watch during the course of this inspection. Discontinuation of suicide watch followed suicide risk assessments by the clinical social worker and consultation with the physician.

CCCF's administrative Special Management Unit (SMU) is a two-tiered unit with three cells on the upper and lower levels and a dayroom. Each cell has two bunks affixed to the wall, a toilet-sink combination, a desk and stool. Two male detainees and one female detainee were assigned to administrative segregation at the time of the inspection. Written orders assigning the three detainees to administrative segregation were incomplete and no status reviews were conducted. CCCF has not implemented procedures for conducting status reviews as required by the standard. ODO observed the facility completed orders and scheduled status reviews for all three detainees.

CCCF's disciplinary SMU is a double-tiered housing unit consisting of 20 single-capacity cells and a dayroom. A shower is available on each tier and an outdoor recreation area is adjacent to the unit. The cells contain a bunk, toilet-sink combination unit, a desk, and stool fixture. One detainee was in disciplinary segregation at the time of the inspection. Nine detainees were placed in disciplinary segregation in the 12 months preceding the inspection. Disciplinary segregation orders were issued and required status reviews were conducted. The SMU log documented that basic living conditions, services and privileges were provided as required by the NDS and facility policy.

Detainees have reasonable and equitable access to telephones at CCCF. The telephone availability ratio for each housing unit is approximately 11 detainees per telephone. The speed-dial listings were available in each housing unit. Telephone areas and the facility handbook do not notify detainees of the procedures for obtaining an unmonitored call to a court, legal representative, or of the reasons to obtain legal representation.

CCCF has a comprehensive use-of-force policy addressing the requirements of the standard, including confrontation avoidance and using force only as a last resort. CCCF has a Special

Response Team available, in the event calculated force arises. A review of (b)(7) randomly-selected training records confirmed current training in the use of force.

According to CCCF staff, six immediate use-of-force incidents involving three detainees occurred in the 12 months preceding the inspection. ICE was notified of these incidents. Documentation shows one detainee was involved in three use-of-force incidents, a second detainee was involved in two incidents, and the third was involved in one. ODO's review of video recordings and written reports confirmed compliance with the NDS, to include medical examinations and after action reviews.

OPERATIONAL ENVIRONMENT

DETAINEE RELATIONS

One hundred and four detainees were housed at CCCF at the time of the inspection (80 male and 24 female detainees). Thirty detainees (27 males and three females) voluntarily agreed to be interviewed by ODO regarding conditions of detention at CCCF. All detainees interviewed had been housed at the facility from one week to six months.

None of the detainees expressed any concerns or complaints about CCCF. Detainees stated they received personal hygiene items upon arrival, have access to indoor recreation and the law library, and are afforded opportunities to file requests and grievances. All expressed satisfaction with the food and medical care provided. None reported having ever witnessed or experienced any mistreatment, discrimination, or abuse (physical, verbal or sexual) while at CCCF.

All detainees stated they received both the facility handbook and ICE National Detainee Handbook and see ERO staff in the housing units weekly.

ICE 2000 NATIONAL DETENTION STANDARDS

ODO reviewed a total of 15 NDS and the 2011 SAAPI PBNDS and found CCCF fully compliant with the following ten standards:

1. Detainee Classification System
2. Detainee Grievance Procedures
3. Detainee Handbook³
4. Environmental Health and Safety
5. Medical Care
6. Sexual Abuse and Assault Prevention and Intervention (2011 PBNDS)
7. Special Management Unit – Disciplinary Segregation
8. Staff-Detainee Communication
9. Suicide Prevention and Intervention
10. Use of Force

As the standards above were compliant at the time of the review, a synopsis for each of these standards is not included in this report.

ODO found deficiencies in the following six standards:

1. Access to Legal Material
2. Admission and Release
3. Food Service
4. Funds and Personal Property
5. Special Management Unit – Administrative Segregation
6. Telephone Access

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

³ The Detainee Handbook standard was found compliant; however, deficiencies related to the detainee handbook are provided under Deficiencies ALM-2, and TA-1.

ACCESS TO LEGAL MATERIAL (ALM)

ODO reviewed the Access to Legal Material standard at CCCF 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.

Detainees access legal materials via three mobile computer carts circulated throughout housing units, upon request. One cart is permanently stored in one male housing unit. The two remaining carts are brought into housing units upon request. When not in use, the carts are stored in secured areas accessible only by staff. The carts are available to detainees during normal free hours, approximately 14 hours daily. Additional time may be requested and reasonable efforts will be made to accommodate these requests. Detainees in special management units have the same privileges.

ODO verified the computer contained a current version of LexisNexis and word-processing software. Detainees must submit a written request for paper, writing utensils, envelopes, and stamps. Legal documents can be printed by request.

Facility staff informed ODO that illiterate and limited English proficient detainees are provided assistance with their legal paperwork, as needed. Detainees with appropriate language, reading, and writing abilities are allowed to provide assistance. The law library custodian provides all indigent detainees with free envelopes, stamps, notary services, and certified mail for legal matters. These materials are all available through the submission of written requests.

The facility handbook did not include the procedure for notifying a designated employee that library material is missing or damaged, nor were these procedures posted in the law library (**Deficiency ALM-1**). This deficiency was present during ODO's last inspection in 2011. The facility initiated corrective action during the course of this inspection.

STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS

DEFICIENCY ALM-1

In accordance with the ICE NDS, Access to Legal Material, section (III)(Q), 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:

1. that a law library is available for detainee use;
2. the scheduled hours of access to the law library;
3. the procedure for requesting 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 CCCF 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 detention files, observed the admission process, and interviewed staff and detainees.

Detainees are screened and interviewed by booking officers upon arrival at CCCF. The intake process includes inventorying of funds and property and issuance of a plastic storage box containing two sheets, one blanket, a cup, comb, one bath towel, one wash cloth, a toothbrush, and tooth paste. The intake process also includes completion of medical and sexual assault and abuse questionnaires, issuance of the facility detainee handbook, and initial classification. The detainees are then screened by the medical staff and placed in the classification housing unit where they are shown CCCF's 58-minute orientation video. ODO viewed the video and found it comprehensively addresses information on CCCF's processes, services, and other useful information. The video is available in English and Spanish. Additional uniforms, underwear, and socks are issued in the classification housing unit. ODO's review of 15 active and 15 inactive detention files confirmed all required admission and release documentation was included.

All newly arrived detainees receive pat searches. Although facility policy prohibits strip searches of detainees without reasonable suspicion, ODO observed four newly arrived detainees being searched without clothing. On May 14, 2014, CCCF staff required the detainees to remove all their clothing and shoes. Detainees were asked to open their mouths, run their hands through their hair, hold both arms over their heads, turn and face the wall, and hold up one foot at a time so the bottoms of their feet could be seen. All four detainees were fully unclothed, prior to the officer issuing uniforms and shower shoes (**Deficiency AR-1**). The facility's policy prohibits strip searches of detainees without reasonable suspicion consistent with the NDS Change Order dated October 2007. Prior to completion of the inspection, CCCF management said all staff would be reminded strip searches are prohibited without reasonable suspicion and approval by a supervisor.

STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS

DEFICIENCY AR-1

In accordance with the ICE NDS, Admission and Release, Change Notice, dated October 15, 2007, issued by ICE Director John P. Torres, the FOD must ensure, "Detainees shall not be strip searched upon admission to a facility unless there is reasonable suspicion that an individual may be concealing a weapon or other contraband. Effective immediately, all facilities housing ICE detainees shall permit detainees to change clothing and shower in a private room without being visually observed by a staff member, unless there is reasonable suspicion that the individual possesses contraband. A staff member of the same gender will be present immediately outside the room when the detainee changes and showers, with the door opened to hear what transpires inside."

FOOD SERVICE (FS)

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

The food service operation at CCCF is managed by contractor Aramark Correctional Service. Staffing consists of the food service director, assistant director, and (b)(7)(e) kitchen supervisors, supported by a crew of (b)(7)(e) county inmates. No ICE detainees work in food service. ODO's review of documentation confirmed all inmate workers received medical clearance prior to working in the kitchen; however, no Aramark employees had undergone pre-employment medical examinations (**Deficiency FS-1**). This deficiency was identified by ODO during its last inspection.

The CCCF food service operation was inspected by the Calhoun County Public Health Department in February of 2014. There is a detailed sanitation inspection program in place and clean-as-you-go procedures were posted throughout the kitchen. However, on the first day of the inspection, ODO observed the sanitation in need of improvement. ODO observed food spills on the floor, dried food particles on the walls, and unwashed trash receptacles. During the course of this inspection, all issues were addressed and the overall sanitation of the area was acceptable.

A nutritional analysis of the master-cycle menu was completed by a registered dietitian in April 2014. During the inspection, 18 ICE detainees were receiving common fare and medical diets. Documentation supports the special diets were approved and provided in accordance with the standard.

CCCF has a satellite feeding operation. Trays are placed on open, unsecured carts and are delivered to the units by county inmates (**Deficiency FS-2**). Transporting trays on secured carts prevents food tampering. ODO tested food temperatures using a digital thermometer as food items were placed on trays and again upon issuance to detainees. The temperatures met the requirements of the NDS. All items served were listed on the menu.

Freezers and walk-in coolers were found in good sanitary condition and the temperatures levels were within the required range. Documentation reflects staff routinely checks and logs the temperatures. Storage rooms are secured when not in use and procedures are in place for rotating stock.

The one knife used in the food service area was found to be properly stored and accounted for in a locked cabinet in the manager's office. However, ODO's inspection of the knife found the steel shank did not run the entire length of the plastic handle, as required by the standards (**Deficiency FS-3**). A facility's tool control officer is responsible for mounting a cable to the knife blade, so that it cannot be easily removed and possibly used as a weapon. Other utensils were found properly controlled during the inspection.

STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS

DEFICIENCY FS-1

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. The purpose of this examination is to exclude those who have a communicable disease in any transmissible stage or condition.”

DEFICIENCY FS-2

In accordance with ICE NDS, Food Service, section (III)(C)(2)(g), the FOD must ensure, “Food will be delivered from one place to another in covered containers. These may be individual containers, such as pots with lids, or larger conveyances that can move objects in bulk, such as enclosed, satellite-feeding carts. Food carts must have locking devices.”

DEFICIENCY FS-3

In accordance with ICE NDS, Food Service, section (III)(B)(2), the FOD must ensure, “The knife cabinet must be equipped with an approved locking device. The on-duty cook foreman, under direct supervision of the [cook supervisor], shall maintain control of the key that locks the device. Knives must be physically secured to workstations for use outside a secure cutting room. Any detainee using a knife outside a secure area must receive direct staff supervision. To be authorized for use in the food service department, a knife must have a steel shank through which a metal cable can be mounted.”

FUNDS AND PERSONAL PROPERTY (F&PP)

ODO reviewed the Funds and Personal Property standard at CCCF to determine if controls are in place to inventory, receipt, and store and safeguard detainees' personal property, in accordance with ICE NDS. ODO reviewed policies, interviewed staff, observed the intake process, inspected property storage areas, and reviewed detainee files.

The facility handbook addresses policies and procedures for funds and personal property. Detainee property is searched and inventoried during intake, and any funds are counted and re-counted by (b)(7) different officers before being placed into a drop-safe kiosk. As cash is deposited into the drop-safe kiosk, it is automatically recorded in an account established for the detainee. All foreign currency is counted and noted on the property form and stored with the detainee's valuables. ODO recommends CCCF staff store foreign currency in a dedicated safe, as is the practice for U.S. currency (**R-1**).

The property inventory and funds receipt are signed by the detainee. Receipt copies are placed in the detention file and issued to the detainee. Detainees are assigned a personal identification number to access their funds via a kiosk in the housing units. Detainee property is placed in mesh hanging bags clearly marked with the detainee's name and A-number. ODO's inspection found the bags were stored in a secure property room in numerical order, and contained copies of the inventory. Valuables are stored in sealed plastic bags and placed in lock boxes in a separate area of the property room.

ODO reviewed documentation verifying the property officer inventories detainee property and valuables on a monthly basis, and per the accounting clerk, Calhoun County audits detainee funds twice yearly. However, there are no written procedures governing the inventories and audits (**Deficiency F&PP-1**). Facility management said they would consider developing procedures following receipt of the inspection report.

ODO's review of the files of 15 detainees who had been released from the facility confirmed all signed for their funds and property upon departing the facility. Funds are returned to the detainee in the form of either a facility check or a Visa debit card, depending on the detainee's destination. Though ODO identified no cases where property or funds were abandoned at CCCF, policy states any property or funds left at the facility must be forwarded to the ERO field office.

STANDARD/POLICY REQUIREMENT FOR DEFICIENT FINDINGS

DEFICIENCY F&PP-1

In accordance with ICE NDS, Funds and Personal Property, section (III)(F), the FOD must ensure, "Each facility shall have a written procedure for inventory and audit of detainee funds, valuables, and personal property."

SPECIAL MANAGEMENT UNIT – ADMINISTRATIVE SEGREGATION (SMU-AS)

ODO reviewed the Special Management Unit (SMU) – Administrative Segregation standard at CCCF to determine if the facility has procedures in place to temporarily segregate detainees for administrative reasons, in accordance with the ICE NDS. ODO toured the SMU, interviewed facility and ERO staff, and reviewed policies and available documentation.

CCCF's SMU for males assigned to administrative segregation is K Unit, a two-tiered unit with three cells on the upper level and three cells and a dayroom on the lower level. Each cell has two bunks affixed to the wall, a toilet and sink combination, and a desk and stool. There is a shower on each tier and the recreation area is located outside the adjacent housing unit. The SMU for females is located on the upper tier of G Unit. There are four cells separated by an enclosure, accessed through a locked door. Shower and recreation areas are adjacent to the unit. The cells were clean, adequately ventilated, temperature controlled, and well lit at the time of the inspection.

Two male detainees and one female detainee were assigned to administrative segregation at the time of the inspection. Based on interviews and a review of available documentation, ODO learned one male detainee was placed on administrative segregation on April 24, 2014, because information was received indicating he engaged in sexually assaultive behavior while at a previous facility. The second male detainee was placed in administrative segregation on March 27, 2014, due to his repeated refusal to cooperate with staff attempts to determine appropriateness for housing in the general population. The female detainee was placed in administrative segregation on April 20, 2014, at her own request for protective custody.⁴ Written orders assigning the three detainees to administrative segregation were not completed (**Deficiency SMU AS-1**), and no status reviews were conducted. CCCF has not implemented procedures for conducting status reviews as required by the standard (**Deficiency SMU AS-2**). During the inspection, the facility completed orders and scheduled status reviews for all three detainees.

ODO's review of the log maintained in the SMU for females confirmed the detainee currently in the unit received required services and privileges. A permanent log is not maintained in the administrative segregation SMU for males (**Deficiency SMU AS-3**). ODO interviewed the detainees currently in the SMU and all stated they received three meals a day, were issued necessary hygiene items, participated in the clothing exchange, and were given the opportunity to shave, shower, and participate in recreation daily. In addition, they are allowed to purchase commissary items and are provided with leisure reading materials. Medical staff provided documentation of daily visits to each detainee in the SMUs and ODO observed distribution of medications.

⁴ The female detainee told staff she was afraid to be placed in the general population and demonstrated a fear of people in uniform, particularly men. The facility counselor speculated the detainee may have been a victim of trauma in her home country. The detainee was receiving mental health care at time of ODO's inspection.

STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS

DEFICIENCY SMU AS-1

In accordance with the ICE NDS, Special Management Units – Administrative Segregation, section (III)(B), the FOD must ensure, “A written order shall be completed and approved by a supervisory officer before a detainee is placed in administrative segregation, except when exigent circumstances make this impartible. In such cases, an order shall be prepared as soon as possible. A copy of the order shall be given to the detainee within 24 hours, unless delivery would jeopardize the safety, security, or orderly operation of the facility.”

DEFICIENCY SMU AS-2

In accordance with the ICE NDS, Special Management Units – Administrative Segregation, section (III)(C), the FOD must ensure, “All facilities shall implement written procedures for the regular review of all administrative-detention cases, consistent with the procedures specified below.”

DEFICIENCY SMU AS-3

In accordance with the ICE NDS, Special Management Units – Administrative Segregation, section (III)(E)(1), the FOD must ensure, “A permanent log will be maintained in the SMU. The log will record all activities concerning the SMU detainees, e.g., meals served, recreation, visitors, etc.”

TELEPHONE ACCESS (TA)

ODO reviewed the Telephone Access standard at CCCF 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 facility staff and detainees, reviewed policy, procedures, and the detainee handbook; and conducted functionality tests on the telephones located in detainee housing units.

ODO verified detainees have reasonable and equitable access to telephones at CCCF. The telephone availability ratio for each housing unit is approximately 11 detainees per telephone. ODO confirmed the listings for pro bono services, DHS OIG, consulates, and embassies were located in each housing unit. The facility also provides a TTY if needed, located at the intake area. All calls are limited to 30 minutes and detainees are permitted to call back after this time expires.

CCCF ICE staff inspects phones regularly and reports out-of-order telephones for repair. ODO could not verify serviceability checks because there were no facility logbooks or telephone repair orders for the last 12 months. ODO conducted operation checks of telephones in detainee housing units and found them to be in good working order. Pro bono numbers were updated and working.

CCCF's handbook provides general telephone access rules and these rules are posted in each of the housing units. The facility has a policy in place to permit detainees in SMUs telephone access similar to detainees in the general population. Incoming call messages are not routinely distributed to detainees unless the call is an emergency or it is from ICE or legal representation.

Notifications that calls are subject to monitoring are posted on each phone, and detainees are also notified of monitoring in the facility handbook. Detainees may request an unmonitored call by submitting an oral or written request to the housing unit officer. However, the facility handbook did not provide notice of these procedures (**Deficiency TA-1**). CCCF staff stated and ODO verified that telephone areas do not notify detainees of the procedure for obtaining an unmonitored call to a court, legal representative, or for the purposes of obtaining legal representation (**Deficiency TA-2**). Detainees may submit a request to make legal calls in an area that provides privacy.

STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS

DEFICIENCY TA-1

In accordance with the ICE NDS, Telephone Access, section (III)(K), 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."

DEFICIENCY TA-2

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.”