



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

Immigration and Customs Enforcement

Office of Professional Responsibility

Inspections and Detention Oversight Division

Washington, DC 20536-5501

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**Office of Detention Oversight  
Compliance Inspection**

**Enforcement and Removal Operations**

**ERO Washington Field Office**

**Virginia Peninsula Regional Jail**

**Williamsburg, Virginia**

**November 2–5, 2015**

**COMPLIANCE INSPECTION  
for the  
VIRGINIA PENINSULA REGIONAL JAIL  
WILLIAMSBURG, VIRGINIA**

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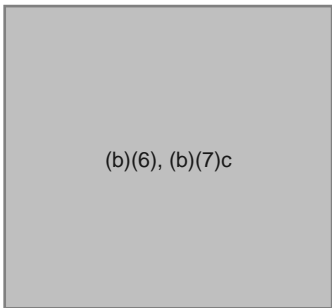
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**INSPECTION TEAM MEMBERS**



Lead Inspections and Compliance Specialist	ODO
Inspections and Compliance Specialist	ODO
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Contractor	Creative Corrections
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## EXECUTIVE SUMMARY

The Office of Detention Oversight (ODO) conducted a compliance inspection of the Virginia Peninsula Regional Jail (VPRJ) in Williamsburg, Virginia, from November 2 to 5, 2015.<sup>1</sup> VPRJ opened in 1997, is owned by the Virginia Peninsula Regional Jail Authority and operated by the Virginia Peninsula Regional Jail Office. The Office of Enforcement and Removal Operations (ERO) began housing detainees at VPRJ in 2014 pursuant to a United States Marshals Service (USMS)-Intergovernmental Agreement (IGA), under the oversight of ERO’s Field Office Director (FOD) in Washington, DC.

ERO staff members and a Detention Services Manager are assigned to the facility. A VPRJ Superintendent is responsible for oversight of daily facility operations and is supported by (b)(7)e personnel. VPRJ staff provides food services supported by Trinity Services Group. Health care is provided by VPRJ, and mental health services are provided by MEDIKO, P.C., based in Glen Allen, Virginia. The facility is accredited by the Board of Corrections; additionally, while VPRJ is not contractually obligated to comply with the ICE Performance-Based National Detention Standards (PBNDS) 2011, Sexual Abuse and Assault Prevention and Intervention (SAAPI) standard, it has made efforts to comply.<sup>4</sup>

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity <sup>2</sup>	As Needed
Average ICE Detainee Population <sup>3</sup>	45
Male Detainee Population (as of 11/02/2015)	28
Female Detainee Population (as of 11/02/15)	12

### OVERALL FINDINGS

This is ODO’s first inspection of VPRJ under the National Detention Standards (NDS) 2000. ODO reviewed the facility’s compliance with 15 standards and found the facility compliant with 12 standards. ODO found four deficiencies in the remaining three standards.

Inspection Results	FY2015 (NDS 2000)
Standards Reviewed	15
Deficient Standards	3
Overall Number of Deficiencies	4
Corrective Actions Initiated	0
Best Practice	0
Deficient Priority Components	N/A

<sup>1</sup> Male and female detainees of security classification levels “Low,” “Medium,” and “High” are detained at the facility for periods in excess of 72 hours.

<sup>2</sup> Data Source: ERO Facility List Report as of November 7, 2015.

<sup>3</sup> Ibid.

<sup>4</sup> The facility has a zero tolerance policy articulated in VPRJ Policy 3.5.8, *Sexual Abuse and Harassment of Inmates*. All facility staff, including volunteers and contractors, receives training in sexual assault and abuse prevention and intervention. The training curriculum specifically addresses the Prison Rape Elimination Act (PREA).

## FINDINGS BY NDS 2000 MAJOR CATEGORIES

NDS 2000 STANDARDS INSPECTED <sup>5</sup>	DEFICIENCIES
<b>Part 1 – Detainee Services</b>	
Access to Legal Material	0
Admission and Release	0
Correspondence and Other Mail	0
Detainee Classification System	0
Detainee Grievance Procedures	0
Detainee Handbook	0
Food Service	1
Funds and Personal Property	0
Staff-Detainee Communication	0
Telephone Access	1
<b>Sub-Total</b>	<b>2</b>
<b>Part 2 – Security and Control</b>	
Environmental Health and Safety	2
Special Management Unit (Administrative)	0
Special Management Unit (Disciplinary)	0
Use of Force	0
<b>Sub-Total</b>	<b>2</b>
<b>Part 3 – Health Services</b>	
Medical Care	0
Suicide Prevention and Intervention	0
<b>Sub-Total</b>	<b>0</b>
<b>Total Deficiencies</b>	<b>4</b>

<sup>5</sup> For greater detail on ODO's findings, see the *Inspection Findings* section of this report.

## INSPECTION PROCESS

Every fiscal year, the Office of Detention Oversight (ODO), a unit within U.S. Immigration and Customs Enforcement's (ICE) Office of Professional Responsibility (OPR), conducts compliance inspections at detention facilities in which detainees are accommodated for periods in excess of 72 hours and with an average daily population greater than ten detainees, to determine compliance with the applicable ICE National Detention Standards (NDS) 2000, the Performance-Based National Detention Standards (PBNDS) 2008 or 2011.

During the compliance inspection, ODO reviews each facility's compliance with those detention standards that directly affect detainee health, safety, and/or well-being.<sup>6</sup> Any violation of written policy specifically linked to ICE detention standards, other policies, or operational procedures that ODO identifies is noted as a deficiency. ODO also highlights any deficiencies found involving those standards that ICE has designated, under either the PBNDS 2008 or 2011, to be "priority components."<sup>7</sup> ICE considers those components to be of critical importance, given their impact on facility security and/or the health and safety, legal rights, and quality of life of detainees in ICE custody.

Immediately following an inspection, ODO hosts a closeout briefing in person with both facility and ERO field office management to discuss their preliminary findings, which are summarized and provided to ERO in a preliminary findings report. Thereafter, ODO provides ERO with a final compliance inspection report to: (i) assist ERO in working with the facility to develop a corrective action plan to resolve identified deficiencies; and (ii) provide senior ICE and ERO leadership with an independent assessment of the overall state of ICE detention facilities. The reports enable senior agency leadership to make decisions on the most appropriate actions for individual detention facilities nationwide.

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<sup>6</sup> ODO reviews the facility's compliance with selected standards in their entirety.

<sup>7</sup> Priority components have not been identified for the NDS 2000.

## DETAINEE RELATIONS

ODO interviewed 11 detainees, who volunteered to participate. None of the detainees made allegations of mistreatment, abuse, or discrimination. The majority of detainees reported being satisfied with facility services, with the exception of the complaints below:

- *Admission and Release:* One detainee alleged he was not provided with any paperwork explaining why he was being detained. Two female detainees alleged their housing unit had run out of toilet tissue and sanitary napkins.
  - o Action Taken: ODO reviewed the detention file of the detainee who alleged not receiving any paperwork regarding his detainment and found that the detention file contained all required documentation.

VPRJ notified ODO that the female housing unit had been replenished with toilet tissue and sanitary napkins in a timely manner. ODO observed a supply of toilet tissue in the commissary and sanitary napkins located at the housing unit during this inspection.

- *Funds & Personal Property:* One detainee alleged that the personal property he had in storage while being detained at the Immigration Centers of America, Farmville, VA detention facility went missing and was not transferred to VPRJ.
  - o Action Taken: ODO was informed by the AFOD that ERO was aware of the missing property and was looking into the issue.
- *Detainee Grievance Procedures:* One detainee alleged that he had not received a response to a grievance which he had filed over a month ago regarding a request for a new basketball.
  - o Action Taken: ODO reviewed the grievance log and the detainee's detention file and found no record of the grievance being filed. However, ODO did relay the detainee's concern to a facility staff member.
- *Food Service:* Four detainees expressed dissatisfaction with the food. Detainees alleged the food contains too much starch, is under cooked, high sugar content and the facility serves too many carbohydrates. One detainee alleged, despite her Hindu religious dietary restrictions, the facility continuously serves her meat.
  - o Action Taken: ODO reviewed the 28-day menu, medical diet, and the common fair menus and verified a dietician approved the menus.

Although ODO reviewed the detainee's dietary plan, which evidenced a Hindu religious diet requirement for the detainee, ODO nevertheless directly notified food service regarding the detainee's food service needs. Food Service then advised ODO that they will provide the detainee with the appropriate special diet. ODO observed the special diet being prepared.

- *Medical Care:* One detainee complained about access to dental care, specifically that he had to wait three months to receive a filling.
  - o Action Taken: ODO reviewed sick call requests as well as the detainee's medical records and found that the alleged delay in receiving a tooth filling was due to the detainee refusing to see the dentist on the day he was scheduled. The detainee was referred to medical for follow up.

# INSPECTION FINDINGS

## DETAINEE SERVICES

### FOOD SERVICE

ODO observed the food tray carts were not secured before being transported to the housing units (**Deficiency FS-1**<sup>8</sup>).

### TELEPHONE ACCESS

ODO was unable to verify that ERO conducted serviceability checks. ERO was made aware that no weekly telephone serviceability worksheets were available (**Deficiency TA-1**<sup>9</sup>).

## SECURITY AND CONTROL

### ENVIRONMENTAL HEALTH AND SAFETY

A review of the documented monthly fire drills conducted in the facility revealed detainees were not evacuated from the housing units (**Deficiency EH&S-1**<sup>10</sup>).

A review of the documented monthly fire drills conducted in the facility revealed emergency keys were not drawn and tested (**Deficiency EH&S-2**<sup>11</sup>).

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<sup>8</sup> “A member of the food service staff will oversee the loading of satellite feeding carts. Staff shall inspect and secure all food carts before allowing their removal from the food service area.” See ICE NDS 2000, Standard, Food Service, Section (III)(C)(2)(i).

<sup>9</sup> “Each serviceability test shall be documented using the attached form. The field office shall maintain forms in a retrievable format, organized by month, for a three-year period.” See ICE Memorandum to the Field Office Directors from the Office of Detention and Removal Operations dated April 4, 2007, Detainee Telephone Services.

<sup>10</sup> “Detainees will be evacuated during fire drills, except in areas where security would be jeopardized or in medical areas where patient health could be jeopardized or, in individual cases when evacuation of patients is logistically not feasible. Staff- simulated drills will take place instead in the areas where detainees are not evacuated.” See ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(L)(4)(b).

<sup>11</sup> “Emergency key drills will be included in each fire drill, and timed. Emergency keys will be drawn and used by the appropriate staff to unlock one set of emergency exit doors not in daily use. NFPA recommends a limit of four and one-half minutes for drawing keys and unlocking emergency doors.” See ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(L)(4)(c).