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Office of Detention Oversight Compliance Inspection

Enforcement and Removal Operations
Baltimore Field Office
Worcester County Jail
Snow Hill, Maryland

June 12 - 14, 2012

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**COMPLIANCE INSPECTION
WORCESTER COUNTY JAIL
BALTIMORE FIELD OFFICE**

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EXECUTIVE SUMMARY

The Office of Professional Responsibility (OPR), Office of Detention Oversight (ODO) conducted a Compliance Inspection (CI) of the Worcester County Jail (WCJ) in Snow Hill, Maryland from June 12-14, 2012. WCJ, which opened in 1982, is owned and operated by Worcester County. In 2010, renovations at WCJ resulted in the addition of a medical wing and 60 beds to the female housing unit. WCJ houses county inmates, State inmates, and ICE detainees. U. S. Immigration and Customs Enforcement (ICE), Office of Enforcement and Removal Operations (ERO), began housing detainees at WCJ in 1982 under an Intergovernmental Service Agreement (IGSA) between ICE and Worcester County. Male and female detainees of all three security classification levels (Level I-lowest threat; Level II-medium threat; Level III- highest threat) are detained at the facility for periods in excess of 72 hours. WCJ currently reserves two housing units to accommodate males and two housing units to accommodate females. The average daily detainee population is 173. The average length of stay for ICE detainees at the facility is 76 days. WCJ has a total bed capacity of 507, with 200 beds available for ICE detainees. At the time of the inspection, WCJ housed a total of 177 detainees, including 167 males (74 Level I; 93 Level III), and 10 females (6 Level I; 4 Level III). Medical care is provided under contract by Conmed Health Care Management. WCJ is accredited by the Maryland Commission on Correctional Standards (MCCS).

The ICE, ERO Field Office Director, Baltimore, Maryland (FOD Baltimore), is responsible for ensuring facility compliance with ICE policies and the National Detention Standards (NDS). An Assistant Field Officer Director (AFOD) located at the FOD Baltimore has direct oversight of WCJ. ICE has a sub-office located in Salisbury, Maryland, which is managed by a Supervisory Detention and Deportation Officer (SDDO), also referred to as the officer-in-charge (OIC), who oversees a staff of (b)(7)e ERO personnel. The sub-office is responsible for maintaining ICE presence at WCJ. The SDDO conducts oversight visits at WCJ on Mondays, Wednesdays, and Fridays. On Tuesdays, Wednesdays, and Fridays, an Immigration Enforcement Agent (IEA) from the sub-office visits WCJ to interact with detainees and monitor facility conditions. A Deportation Officer (DO) visits detainees every Thursday to address case management and detention-related issues. All visits are documented in housing unit logbooks and on a Facility Liaison Checklist to verify the FOD/Baltimore is conducting proper oversight of the facility. ODO confirmed detainee requests and concerns are addressed in a timely manner in accordance with the NDS. There is no Detention Service Manager (DSM) assigned to WCJ, and no ERO personnel are stationed at WCJ.

The Warden is the highest ranking official at WCJ and is responsible for oversight of daily operations. In addition to the Warden, supervisory staff at WCJ includes (b)(7)e Deputy Wardens, (b)(7)e Captain, and (b)(7)e Lieutenants. WCJ employs a total of (b)(7)e staff members. At the time of this inspection, there were (b)(7)e vacant Sergeant positions and (b)(7)e vacancy for a Correctional Officer.

In July 2011, ODO conducted a Quality Assurance Review (QAR) at WCJ and cited 57 deficiencies in the 21 NDS reviewed. In September 2011, the ERO Detention Standards Compliance Unit contractor, MGT of America, Inc., conducted an annual review of the ICE NDS at WCJ. The facility received an overall rating of "Acceptable" and was found to be in compliance with all 38 standards reviewed.

During this CI, ODO reviewed 23 NDS. Thirteen standards were determined to be fully compliant. Fourteen deficiencies were identified in the following 11 standards: Access to Legal Material (2 deficiencies), Admission and Release (1), Detainee Grievance Procedures (2), Detainee Transfers (1), Detention Files (1), Environmental Health and Safety (2), Food Service (1), Medical Care (1), Special Management Unit – Administrative Segregation (1), Special Management Unit – Disciplinary Segregation (1), and Staff-Detainee Communication (1). This report details all deficiencies and refers to the specific, relevant sections of the NDS. ERO will be provided a copy of this report to assist in developing corrective actions to resolve the 14 identified deficiencies. These deficiencies were discussed with WCJ personnel onsite during the inspection as well as during the closeout briefing conducted on June 14, 2012.

Detainee handbooks are available in English and Spanish. Detainees confirm receipt of the handbook by signing an acknowledgement form that is placed in each detention file. ODO inspected 15 detention files and verified all detainees received handbooks at the time of admission. ODO confirmed all detainees go through an orientation process that includes viewing an ICE video, and being informed about facility operations, programs, and services. WCJ officials show the orientation video in the housing units every Saturday and maintain a log to document the presentation; however, a copy of the orientation paperwork is not maintained in each individual detention file.

ODO inspected 15 A-Files and corresponding detention files during the review of the Detainee Transfer NDS. ODO confirmed that none of the files contained copies of detainee transfer notifications. The notification will include the reason for the transfer and the name, address, and telephone number of the receiving facility. In the interest of safety and security, the notification will not include specific travel details (e.g., the day of travel, mode of travel, etc.).

Exit and evacuation diagrams are not posted in the housing units. WCJ management stated that in an emergency requiring evacuation, detainees would be instructed to follow the evacuation route painted on the corridor floor. Evacuation diagrams are present in areas other than the housing units in the form of "You Are Here" markers; however, the markers do not reflect the location of emergency equipment. The AFOD stated that ERO will work with WCJ to correct these deficiencies. These are repeat deficiencies from the July 2011 QAR.

The Assistant Warden has successfully completed the ServSafe Food Protection Manager Certification Examination, which is accredited by the American National Standards Institute - Conference for Food Protection. The ServSafe training program addresses the importance of food safety, good personal hygiene, time and temperature control, preventing cross-contamination, cleaning and sanitizing, safe food preparation, receiving and storing food, methods of thawing, cooking, cooling and reheating food, hazard analysis and critical control points, and food safety regulations. Completion of this program by the Assistant Warden provides added elements of safety, security, and efficiency to the food service program at WCJ.

ODO confirmed the WCJ menu does not include ethnic food choices despite the predominantly Hispanic detainee population. This is a repeat deficiency from the July 2011 QAR. The Assistant Warden stated that a revised menu would increase the variety of ethnic food choices, and a proposal to revise the menu is under review.

WCJ has a functioning grievance system that allows detainees to file both formal and informal grievances, as well as appeal grievance decisions. ODO reviewed all six of the grievances filed between January 2012 and June 2012. Three of the grievances involved medical care, two related to food service, and one concerned the commissary. All grievances reviewed were responded to within five days of being filed. A review of the grievance log confirmed grievances are logged with all pertinent information, including the nature of the grievance and date of resolution. Numbers pertaining to each grievance are assigned in chronological order. However, copies of the grievances are not placed in individual detention files. ODO reviewed the WCJ handbook and confirmed it informs detainees how to appeal decisions on grievances made by the Warden. The handbook does not inform detainees how to contact the Department of Homeland Security, Office of Inspector General to lodge complaints regarding officer misconduct.

WCJ has a fully functioning medical clinic sufficiently staffed to meet detainee health care needs. ODO reviewed 20 medical records and confirmed that 12 of those detainees did not receive a physical examination within 14 days of arrival at WCJ. This is a repeat deficiency from the July 2011 QAR. The 12 delinquent physical examinations were overdue by between three and 30 days. The Health Services Administrator (HSA) stated this issue will be addressed by adding a physician assistant (PA) to the contract staff in August 2012. The Conmed Regional Vice President confirmed the planned addition of a PA. ODO confirmed all completed physical examinations were hands-on and complied with ICE Health Service Corps (IHSC) performance improvement criteria.

WCJ has four rooms used for suicide watch located behind the booking area of the jail. Detainees placed in these rooms are monitored by camera from the facility control center, and direct visual observation by detention staff. There is a detention cell in the medical clinic, which can also be used for suicide watch; however, the room is not monitored by cameras. The medical record confirmed detainees receive mental health services on an on-going basis. Since the September 2011 ERO annual review, one female detainee was placed on suicide watch. As documented in the health record, the female detainee, who had a history of bi-polar disorder with hallucinations, expressed thoughts of suicide. The detainee remained under suicide watch for three days, and was released back into the general population upon the recommendation of the Clinical Director. ODO confirmed suicide watch management was consistent with the NDS and WCJ facility policy. The suicide prevention training plan contained all required elements, and all correctional and medical staff training in suicide prevention is current. ODO checked the medical log and confirmed WCJ officers conduct and document 15-minute interval checks of prisoners placed on suicide watch in accordance with the standard.

There has never been a detainee death at WCJ. The HSA informed ODO, detainees with terminal illnesses are not accepted at WCJ, and detainees who become seriously injured or ill while at WCJ are transferred to the local hospital.

During this inspection, ODO observed three male detainees in administrative segregation pending a disciplinary hearing for fighting. A fourth male was in disciplinary segregation serving a nine-day sanction for his involvement in a fight with another detainee. All four detainees stated they were being treated humanely and afforded the same privileges as detainees in the general

population. There were no female detainees in administrative or disciplinary segregation during the inspection.

ICE and WCJ personnel interact with detainees daily. ODO confirmed officials are not filing copies of completed detainee request forms in detention files as required by the NDS. This is a repeat deficiency from the July 2011 QAR. ODO addressed the issue with WCJ and ICE officials during the review, and at the close-out briefing. ICE staff stated that placing completed request forms in detention files is a breach of confidentiality for detainees who do not want their requests disclosed to facility staff. However, ERO and WCJ management stated a concerted effort will be made to ensure completed requests forms are maintained in each individual detention file.

ODO confirmed ICE detainees have access to television, outdoor recreation, a commissary, and two designated law libraries, and can send and receive mail. WCJ offers religious services, and vocational and educational programs. Detainees are allowed visitation privileges, and visitation hours are posted within the housing areas, special management units, and visitation areas.

INSPECTION PROCESS

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

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

REPORT ORGANIZATION

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

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

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

INSPECTION TEAM MEMBERS

(b)(6), (b)(7)c	Management and Program Analyst (Team Leader)	ODO, Headquarters
	Special Agent	ODO, Headquarters
	Detention and Deportation Officer	ODO, Headquarters
	Management and Program Analyst	ODO, Headquarters
	Contract Inspector	Creative Corrections
	Contract Inspector	Creative Corrections
	Contract Inspector	Creative Corrections

OPERATIONAL ENVIRONMENT

INTERNAL RELATIONS

ODO interviewed supervisory ICE and WCJ staff, to include the Warden, Assistant Warden for Security and Custody, and the ERO AFOD. ODO also interviewed other ICE and WCJ staff, including an ICE SDDO, a Supervisory Immigration Enforcement Agent (SIEA), an IEA, and (b)(7)e WCJ Correctional Officers. The Warden stated sufficient personnel are assigned to handle the current ICE detainee population at WCJ, and ERO officers consistently visit the housing units and communicate with ICE detainees to address their issues or concerns.

Both WCJ and ICE staff stated the working relationship is mutually beneficial and morale among WCJ and ICE staff is high. WCJ and ERO management described the working environment at WCJ as professional.

DETAINEE RELATIONS

ODO interviewed 18 randomly-selected detainees (12 males; 6 females). All detainees interviewed stated they have sufficient contact with facility staff and know the names of their respective ERO case officers. All stated they received the facility and ICE detainee handbooks, which are available in English and Spanish. All detainees stated they know how to use the facility telephones, and all fully understood how to gain access to and use the law library. All receive recreational opportunities each day, and officials facilitate family visitation.

A majority of the detainees stated the quality of medical care was good at the facility. Four of the 18 detainees claimed it took too long to be seen by medical staff once sick request forms were submitted. ODO reviewed the medical records of the four detainees, and determined adequate and timely medical care was provided in accordance with the NDS.

All detainees interviewed stated facility officials issued hygiene supplies during intake processing, and ensured replenishment thereafter. Detainees stated they were satisfied with the food; however, three of 18 detainees claimed their meals lacked variety and flavor.

ODO interviewed nine detainees (five males; four females) to determine their understanding of the detainee grievance system. All stated they were aware of the grievance process and had no complaints against the facility.

ICE NATIONAL DETENTION STANDARDS

ODO reviewed a total of 24 NDS and found WCJ fully compliant with the following 13 standards:

- Detainee Classification System
- Detainee Handbook
- Disciplinary Policy
- Emergency Plans
- Funds and Personal Property
- Hold Rooms in Detention Facilities
- Hunger Strikes
- Recreation
- Suicide Prevention and Intervention
- Telephone Access
- Terminal Illness, Advance Directives, and Death
- Use of Force
- Visitation

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

ODO found deficiencies in the following 11 areas:

- Access to Legal Material
- Admission and Release
- Detainee Grievance Procedures
- Detainee Transfer
- Detention Files
- Environmental Health and Safety
- Food Service
- Medical Care
- Special Management Unit (Administrative Segregation)
- Special Management Unit (Disciplinary Segregation)
- Staff-Detainee Communication

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

ACCESS TO LEGAL MATERIAL (ALM)

ODO reviewed the Access to Legal Material standard at WCJ 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 reviewed policies, procedures, and the detainee handbook, inspected the areas designated for law library use, tested computer operations, and interviewed facility staff and detainees.

WCJ has two designated law libraries, which contain computers equipped with the most recent version of Lexis-Nexis. The law library areas contain sufficient tables and chairs to facilitate legal research and writing for detainees. A separate general library is also used to supplement the two law libraries. Office supplies and materials are sufficiently stocked and provided to detainees upon request. Detainees are allowed access to the law library a minimum of five hours a week, upon request. Detainees in administrative and disciplinary segregation have the same law library access as the general population.

ODO confirmed the law library hours are posted in each housing area; however, the facility did not post a listing of the law library's holdings (**Deficiency ALM-1**).

WCJ officials issue each detainee the facility-specific detainee handbook, and the ICE National Detainee Handbook. The facility handbook does not provide the procedure for notifying a designated employee that library materials are missing or damaged (**Deficiency ALM-2**). This is a repeat deficiency from the July 2011 ODO QAR. ODO addressed this deficiency during the close-out briefing with the Warden, who instructed WCJ staff to revise the detainee handbook accordingly.

STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS

DEFICIENCY ALM-1

In accordance with the ICE NDS, Access to Legal Material, section (III)(C), the FOD must ensure the law library shall contain the materials listed in Attachment A. INS shall provide an initial set of these materials. The facility shall post a list of its holdings in the law library.

DEFICIENCY ALM-2

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

6. the procedure for notifying a designated employee that library material is missing or damaged.

ADMISSION AND RELEASE (AR)

ODO reviewed the Admission and Release standard at WCJ 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 interviewed officers and detainees concerning the intake and out-processing procedures at the facility, and reviewed detention files.

WCJ administers intake processing for new arrivals at the facility. The intake processing staff provides questionnaires to detainees, conducts medical screenings and determines security classifications. Detainees are issued personal-hygiene items, clothing, sheets and blankets appropriate for local weather conditions, and a handbook to inform new arrivals about facility operations, programs, and services. Any detainees identified as having an urgent medical concern during intake processing are promptly referred to the medical care unit. The intake officers complete basic medical health histories using the Jail Management System (JMS), and copies of the medical form are maintained in the medical files. The JMS is the computerized management system that tracks each detainee housed at WCJ.

ODO confirmed both the ICE National Detainee Handbook and the WCJ detainee handbook are available in English and Spanish. ODO confirmed detainees sign a property receipt acknowledging receipt of a handbook. Once a case number is assigned to a detainee in the JMS, the intake processing staff creates the detention file, which is also referred to at WCJ as the "base-file."

Two of the 18 detainees interviewed by ODO claimed they were not provided opportunities to shower during intake processing. WCJ staff stated detainees are provided opportunities to shower at two separate stages of intake processing. Review of written policy and procedures confirmed detainees are directed to take showers in the intake processing area. Showering during intake processing can prevent dangerous bacteria from being introduced into the general facility population.

ERO performs the initial classification of each detainee prior to confinement, and the paperwork for identification and classification accompanies each detainee to the facility. Form I-203, Order to Detain or Release, accompanies all newly-arriving detainees. WCJ obtains an emergency contact person for each detainee during processing and records the information in each individual detention file and the JMS.

WCJ staff stated that Level I detainees receive visual and pat-down searches, but are not strip-searched. WCJ policy and procedures require that strip searches of detainees classified as Level II and Level III be based on established reasonable suspicion. ODO confirmed that the required Form G-1025, Record of Search, is completed and maintained in each individual detention file. ODO reviewed JMS spreadsheet printouts in the detention files and confirmed that WCJ tracks all detainee searches.

ODO confirmed from interviews with detainees and WCJ staff that personal hygiene supplies are issued to detainees during the initial intake processing. However, a majority of the detainees prefer to purchase their hygiene supplies from the commissary once their hygiene supplies are exhausted, even though free hygiene packages are available to all detainees. WCJ replenishes personal hygiene supplies to indigent detainees free of charge.

ODO confirmed an orientation process supported by an ICE video informs new arrivals about facility operations, programs, and services. The orientation video is shown in the housing units every Saturday, and officials maintain a log to document the presentation; however, a copy of the paperwork documenting the orientation is not maintained in each individual detainee's detention file (**Deficiency AR-1**).

STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS

DEFICIENCY AR-1

In accordance with the ICE NDS, Admission and Release, section (III)(A) , the FOD must ensure staff will open a detainee detention file as part of the admissions process. This file will contain all paperwork generated by the detainee's stay at the facility.

DETAINEE GRIEVANCE PROCEDURES (DGP)

ODO reviewed the Detainee Grievance Procedures standard at WCJ 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 conducted interviews, reviewed policies and procedures, the detainee handbook, and grievance logs.

WCJ has a grievance procedure that allows detainees to file formal and informal grievances, as well as emergency grievances, and to appeal grievance decisions. The grievance process may begin as an informal grievance where facility officials attempt to resolve the issue at the lowest possible level, in an orderly and timely manner. The informal grievance may be given either verbally or in writing. If the grievance is not resolved at this level, or if the detainee decides to skip the informal process, the detainee may proceed with submitting a formal grievance in writing. When a detainee files an appeal, a Grievance Committee conducts a review of the initial findings within ten working days and provides a written response to the detainee stating the decision and the reason(s) for the decision. If the detainee agrees with a proposed resolution, the form is signed and a copy is placed in the WCJ grievance logbook. If the detainee is not satisfied with the decision, the detainee may file an appeal to the WCJ Warden. The Warden reviews the appeal and prepares a written decision within five days.

ODO interviewed ERO and WCJ staff members who have daily contact with detainees, to determine their awareness of the grievance system. All staff members were able to describe the grievance process, including the informal, formal, and emergency grievance processes, as well as the appeal process. WCJ staff stated illiterate and non-English speaking detainees may seek the assistance of other ICE detainees to complete a grievance form. Grievance forms are available upon request from WCJ housing unit staff, and detainees may give their grievance form to a WCJ officer or shift sergeant.

ODO reviewed six grievances filed between January 2012 and June 2012. Three of the grievances involved medical care, two related to food service, and one concerned commissary. WCJ officials responded to the reviewed grievances within five days of filing. ODO confirmed the grievance log contained all pertinent information, including the nature of the grievance and the date of resolution. Each grievance is assigned a log number in chronological order. Copies of grievances are not placed in individual detention files (**Deficiency DGP-1**).

ODO reviewed the facility handbook and confirmed guidance regarding the grievance process is provided. However, the WCJ handbook does not provide the procedures for contacting ICE to appeal the decision of the Warden. The handbook also does not inform detainees of the opportunity to file complaints about officer misconduct directly with the Department of Homeland Security, Office of the Inspector General (**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 each facility will devise a method for documenting detainee grievances. At a minimum, the facility will maintain a Detainee Grievance Log.

A copy of the grievance will remain in the detainee's detention file for at least three years. The facility will maintain that record for a minimum of three years and subsequently, until the detainees leaves INS custody.

DEFICIENCY DGP-2

In accordance with the ICE NDS, Detainee Grievance Procedures, section (III)(G)(4)(6), the FOD must ensure the grievance section of the detainee handbook will provide notice of the following:

4. The procedures for contacting the INS to appeal the decision of the OIC of a CDF or an IGSA facility.
6. The opportunity to file a complaint about officer misconduct directly with the Justice Department.

In accordance with Change Notice National Detention Standards Staff-Detainee Communication Standard, dated June 15, 2007, the FOD must ensure, until the detainee handbooks can be revised during the annual update, ICE staff shall ensure that each detainee in ICE custody is informed in writing the OIG contact information.

DHS OIG HOTLINE

Write to:

245 Murray Drive, S.E., Building 410
Washington, D.C. 20538

Email to:

DHSOIGHOTLINE@DHS.GOV

OR Telephone:

1-800-323-8603

DETAINEE TRANSFER (DT)

ODO reviewed the Detainee Transfer standard at WCJ to determine if transfers of detainees from one facility to another are responsibly managed in regard to notification, detention records, safety and security, and protection of detainee funds and property, in accordance with the ICE NDS. ODO reviewed policies, procedures, and detention files; and interviewed ICE and facility staff. ODO also reviewed ICE Policy 11022.1, Detainee Transfers, to determine if ERO officials make all notifications and provide all documents required by the policy.

According to ERO staff, detainee transfers are intended to be for operational purposes and are not used in retaliation against detainees. There are transfers of detainees outside of the FOD Baltimore area of responsibility to other field offices through the ICE Air Operations. ERO is aware of the policy update of detainee transfers and is abiding by the provisions. ODO confirmed personnel properly complete Medical Transfer Summary Sheets (USM 553), provide copies to detainees during transfers, and maintain copies in the detainee medical file.

According to ERO staff, ICE is responsible for initiating and processing detainee transfers. If an attorney-client relationship has been established, a Notice of Appearance as Attorney or Accredited Representative (Form G-28) is retained in the A-file. ERO officials provide notification to Attorneys of Record of the transfers once a detainee is en-route to a new location. The detainees are not notified of transfers until immediately prior to leaving the facility. Based on the prevailing security concerns, ERO provides notifications to the detainees of their transfer to a new facility. ERO personnel provide detainees with a Transfer Notification Sheet. However, the detention files reviewed by ODO did not contain copies of the notifications (**Deficiency DT-1**).

ERO staff stated that in preparation for transfer, field office personnel review detainee records and complete the required transfer paperwork. A Detainee Transfer Checklist annotates that processing has been completed. Copies of the required documents accompany each detainee to the receiving facility. ERO staff confirmed a significant number of detainees are transferred to other field offices via ICE Air Operations. In cases where the stay is fewer than 72 hours, or for transfers to staging areas or facilities for the purpose of facilitating a scheduled final removal from the United States, completion of the transfer checklist is not required.

STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS

DEFICIENCY DT-1

In accordance with the ICE NDS, Detainee Transfer, section (III)(A)(3), the FOD must ensure, at the time of transfer, ICE will provide the detainee, in writing, with the name, address and telephone number of the facility he/she is being transferred to. The attached [sic] Detainee Transfer Notification Sheet shall be used for this purpose. The detainee will also be instructed that it is his/her responsibility to notify family members. A copy of the transfer notification sheet will be placed in the detainee's detention file.

DETENTION FILES (DF)

ODO reviewed the Detention Files standard at WCJ to determine if files are created containing all significant information on detainees housed at the facility for over 24 hours, in accordance with the ICE NDS. ODO reviewed detention files, logbooks, policies, and procedures; toured the admissions and release area, and the property room; and interviewed staff.

ODO reviewed (b)(7)(e) training folders and confirmed all WCJ staff members received training in the classification of detainees. Staff members were also trained in creating, managing, and archiving detention files. Correctional officers stated they received in-service training and an additional Phase-I Classification training in June 2011.

ODO verified WCJ staff members create detention files for each detainee as part of the admissions process. The admissions process involves multiple steps including medical screening, classification, and orientation to the facility. WCJ staff activates files by making a notation on the inside cover of each detention file. The note may take the form of a generic statement in the Acknowledgement Form/Work assignment sheet.

ODO reviewed 15 active and ten archived detention files, and observed copies of booking cards, detainee photos, personal property inventory sheets, baggage checks (Form I-77), housing identification cards, classification worksheets, property receipts (Form G-589), and acknowledgement forms documenting receipt of the detainee handbook, and facility orientation. The ten archived detention files reviewed contained proper notation that they were complete and ready for archiving. When documents are forwarded from detention files, to a requesting facility or a detainee's legal representative, facility staff update the archived file noting the document request, and the name and title of the requester.

Detention files are located and maintained in a secure area at the facility. WCJ maintains sign-out cards to record the removal of detention files from the cabinet, which includes the detainee's name, as well as the date and signature of the person removing it. However, the sign-out cards do not include the reason for removal, the title and department of the person removing the file, the date and time returned, or the signature of the person returning the file (**Deficiency DF-1**). A detention file card or logbook enables the facility to locate detention files when they are removed from the storage area. In addition, detention file contents are subject to Privacy Act regulations. Personnel accessing detention files are accountable for securing personally identifiable information. WCJ officials corrected this deficiency on-site by including the absent criteria in the log.

STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS

DEFICIENCY DF-1

In accordance with the ICE NDS, Detention Files, section (III)(F)(2), the FOD must ensure staff shall accommodate all requests for detainee detention files from other departments, which may need the material for disciplinary hearings or other proceedings. A representative of the department requesting the file is responsible for obtaining the file, logging it out, and ensuring its return.

Unless the CDEO or equivalent determines otherwise, borrowed file(s) must be returned by the end of the administrative workday.

At a minimum, a logbook entry recording the file's removal from the cabinet will include:

- a. The detainee's name and A-File number;
- b. Date and time removed;
- c. Reason for removal;
- d. Signature of person removing the file, including title and department;
- e. Date and time returned; and
- f. Signature of person returning the file.

ENVIRONMENTAL HEALTH AND SAFETY (EH&S)

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

ODO observed WCJ to be clean, orderly, and well maintained. Since the ODO inspection in July 2011, WCJ has made significant improvements in their compliance with this standard. Facility staff maintains a running inventory of hazardous chemicals. The master index of hazardous chemicals contains a listing of emergency telephone numbers and documentation of required reviews of Material Safety Data Sheets. During ODO's tour of the facility, flammable substances were found to be properly controlled and accounted for in each department. WCJ now provides hard-wired air circulating fans within the housing units. Previously, WCJ was using extension cords to power the circulating fans located within the housing units, which was cited as a deficiency during the prior inspection because it was considered a life-safety hazard.

WCJ conducts weekly and monthly fire drills. During the fire drills, facility officials draw and test emergency keys. WCJ personnel produced documentation verifying the Worcester County Fire Marshal conducted an annual fire safety inspection on October 19, 2011. (b)(7)e WCJ staff successfully completed the Maryland Correctional Training Commission course in Fire Safety Officer Training.

ODO confirmed quarterly preventive maintenance inspections of the facility's generators are conducted under contract with an external service provider. WCJ provided ODO with a memorandum dated July 25, 2011, which instructs the facility's Maintenance Officer to test the facility's emergency generators bi-weekly for an hour and document compliance. Regular testing and servicing ensures operability in the event of a power outage.

Barbering service is provided in a large designated room at WCJ. The room is equipped with a sink that has hot and cold running water. All necessary equipment to support adherence to sanitation requirements was in place. In addition, towels, combs, and clippers are maintained in a secured cabinet.

ODO observed exit and evacuation diagrams posted in the facility control centers, the facility administration offices, the kitchen, and intake/release areas. However, there were no diagrams posted in the housing units (**Deficiency EH&S-1**). Due to security concerns, WCJ's Fire Control and Evacuation Plan states drawings of evacuation routes will not be posted in housing areas. ODO was advised, in an emergency requiring evacuation, detainees would be instructed to follow the evacuation route painted on the corridor floor. The existing exit and evacuation diagrams include "You Are Here" markers, but do not reflect the location of emergency equipment (**Deficiency EH&S-2**). Identification of emergency equipment locations expedites access and use of the equipment.

STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS

DEFICIENCY EH&S-1

In accordance with the ICE NDS, Environmental Health and Safety, section (III)(L)(3)(g)(h), the FOD must ensure every institution will develop a fire prevention, control, and evacuation plan to include, among other thing [sic], the following:

- g. Accessible, current floor plans (buildings and rooms); prominently posted evacuation maps/plans; exit signs and directional arrows for traffic flow; with a copy of each revision filed with the local fire department;
- h. Conspicuously posted exit diagram [sic] conspicuously posted for and in each area.

DEFICIENCY EH&S-2

In accordance with the ICE NDS, Environmental Health and Safety, section (III)(L)(5), the FOD must ensure, in addition to a general area 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."

FOOD SERVICE (FS)

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

The food service program at WCJ is managed by the Assistant Warden - Classification and Services. The Assistant Warden produced documentation certifying she successfully completed the ServSafe Food Protection Manager Certification Examination, which is accredited by the American National Standards Institute - Conference for Food Protection. The ServSafe training program teaches the importance of food safety, good personal hygiene, time and temperature control, preventing cross-contamination, cleaning and sanitizing, safe food preparation, receiving and storing food, methods of thawing, cooking, cooling and reheating food, hazard analysis and critical control points, and food safety regulations. Completion of this program by the Assistant Warden provides added elements of safety, security, and efficiency to the food service program at WCJ.

(b)(7)e Correctional Cooks employed by WCJ prepare the meals and supervise a work crew of (b)(7) county inmates. ICE detainees do not work in food service. ODO confirmed personnel and inmate workers received medical clearances and training prior to performing their duties. A correctional officer provides additional supervision and escorts the food carts to the housing units.

ODO confirmed required inspections and temperature logs were in compliance with the standard. The Correctional Cooks are trained to calibrate thermometers.

WCJ provides and properly documents religious and medically prescribed meals. The WCJ has a religious ceremonial meal schedule posted for the current year. Knives are maintained in a locked cabinet in the kitchen office. Staff maintains a log for daily use, and the knives are cabled to the workstation. ODO observed the knife cabinet was a wood-framed box with plexiglass doors, which could be easily compromised. During the review, the facility fabricated and installed metal cabinet doors to replace the plexiglass.

Though the ICE detainee population is predominantly Hispanic, the menu at WCJ does not include a variety of ethnic food choices (**Deficiency FS-1**). This is a repeat deficiency from the July 2011 ODO QAR. The Assistant Warden reported a revised menu with a variety of ethnic food choices is under review for future implementation.

WCJ staff provided documentation to ODO confirming, in December 2011, a registered dietician completed a nutritional analysis of the master-cycle menu, and certified it was calorically and nutritionally adequate. The Maryland Department of Health and Mental Hygiene completed its annual inspection of the WCJ food service department on November 16, 2011, and found it met State requirements. ODO found the storage rooms were secured when not in use and procedures were in place for rotating stock.

STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS

DEFICIENCY FS-1

In accordance with the ICE NDS, Food Service, section (III)(D)(Menu Planning)(1), the FOD must ensure the FSA shall consider the ethnic diversity of the facility's detainee population when developing menu cycles. While each facility must meet all INS standards and follow required procedures, individuality in menu planning is encouraged. Institutions geographically near one another should consider the benefits of coordinating their menus, and the cost-reductions to be achieved through joint purchasing.

MEDICAL CARE (MC)

ODO reviewed the Medical Care standard at WCJ 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 medical unit, reviewed policies and procedures, examined 20 medical records, and confirmed medical staff credentials. ODO also conducted interviews of the Health Services Administrator (HSA), the Assistant Warden, the Detention Training Manager, the Regional Vice President of Conmed Healthcare Management, and additional WCJ staff.

The facility holds no national accreditations but maintains compliance with the Maryland Department of Public Safety and Correctional Services jail standards. Delivery of health care services was transferred from Worcester County personnel to contractor Conmed Healthcare Management, Inc. in July 2011. Health care is provided to the detainee population by (b)(7) full-time health care staff to include an HSA, who is also an accredited registered nurse. WCJ also has an additional registered nurse, (b)(7) licensed practical nurses, (b)(7) certified medical technicians, and (b)(7) administrative assistant. A physician is on-site one day a week for a half day, and a nurse practitioner is on-site two half-days per week. As of July 1, 2012, a physician assistant will be added to this staffing, which means a provider will be on-site four days a week. Psychiatric services are provided by a contract psychiatrist. Spanish language translation is provided by Spanish-speaking staff.

WCJ does not have an infirmary. The clinic consists of three examination rooms, four medical holding cells, and four suicide watch rooms located behind the booking area. The examination rooms have doors affording privacy during examinations. The facility does not have negative pressure rooms for housing detainees with symptoms suggestive of tuberculosis (TB). WCJ officials informed ODO, detainees are transferred to the local hospital if they test positive for TB. Detainees are held in a designated area of the clinic as they await medical care, and have access to drinking water and a toilet. Correctional officers escort detainees to and from the medical unit. Medications, needles, and syringes are stored behind two locked doors, and are inventoried at the change of every shift. ODO observed clinic space is adequate for delivery of medical services.

Intake health screenings are performed at the time of booking by trained officers, and are reviewed by a nurse the next working day. This is followed by a medical and mental health screening performed by nursing staff within 24 hours of a detainee's arrival. ODO's review of 20 medical records revealed all detainees were tested for TB at the time of the medical staff screening by skin test (PPD) or chest x-ray.

The nurse practitioner conducts health appraisals and physical examinations. ODO's review of medical records revealed 12 of 20 detainees did not receive a physical examination within 14 days of arrival at WCJ (**Deficiency MC-1**). This is a repeat deficiency from the July 2011 ODO QAR. The 12 delinquent physical examinations were overdue by three to 30 days. The HSA informed ODO the physician assistant being added to the contract staff in August 2012 will address this issue. ODO confirmed this plan of action during an interview with the Regional Vice President of Conmed. ODO confirmed all completed physical examinations were hands-on and met IHSC performance improvement criteria.

Detainees access health care services by filling out written sick call requests and placing them in locked boxes in the housing units. To assure the privacy of medical information, requests are retrieved by medical staff during the dispensation of medication. Medical staff makes medication rounds to the housing units three times a day. ODO confirmed medical requests were being triaged and detainees were seen in a timely manner. A review of 27 sick call slips submitted by detainees revealed it took the facility medical staff an average of one to three days to triage the sick-call encounter.

WCJ policy states only one detention officer per shift is required to be certified in cardiopulmonary resuscitation (CPR). However, the WCJ Training Officer and Associate Warden stated all staff is currently CPR certified. ODO's review of (b)(7) detention staff training records confirmed all (b)(7) have current CPR certifications. ODO recommends revision of the WCJ policy to assure continued compliance with the standard. ODO reviewed (b)(7) Conmed employee files and confirmed they possessed current CPR certifications, state licenses, and certifications validated by the HSA. There are four automated external defibrillators (AED) located in the facility.

Detainees sign consent-for-treatment statements as part of the intake screening process. All 20 ICE detainee health records reviewed included signed consent-for-treatment statements. ODO noted Conmed's generic policy, "Right to Refuse Treatment," does not address consultation with ICE when a detainee refuses treatment. According to the standard, ICE must be consulted to determine if forced treatment is to be administered, except during a medical emergency. There was no record of detainee refusal of treatment to confirm whether notification would occur in practice. ODO notes there is an IEA at WCJ three days a week, and the IEA meets with the HSA three times a week to discuss medical issues that ICE detainees present to the IEA. However, in order to assure compliance with the standard regarding a detainee's refusal of medical treatment, ODO recommends modification of the policy to require ICE notification.

ODO notes the presence of the IEA at WCJ three days a week has resulted in a positive and productive working relationship between ICE and the HSA on health care issues, such as detainee special needs and health care grievances. ODO further notes Conmed has well-written and detailed nursing assessment protocols for use by nursing staff, and health educational materials for detainees.

STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS

DEFICIENCY MC-1

In accordance with the ICE NDS, Medical Care, section (III)(D), the FOD must ensure the health care provider of each facility will conduct a health appraisal and physical examination on each detainee within 14 days of arrival at the facility. If there is documented evidence of a health appraisal within the previous 90 days, the facility health care provider may determine that a new appraisal is not required.

SPECIAL MANAGEMENT UNIT (SMU) Administrative Segregation (AS)

ODO reviewed the Special Management Unit (SMU) standard at WCJ 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, reviewed policies, interviewed staff, and inspected detainee files for required documentation.

Four single-bed cells are designated as SMUs. If additional space is required, cells in the facility's maximum security units are used. During the review, ODO observed three detainees in administrative segregation pending a disciplinary hearing for fighting. ODO confirmed segregation orders were issued in accordance with facility policy and the NDS. ODO's review of detention files for detainees previously in administrative segregation confirmed the existence of segregation orders as required by the NDS.

WCJ officials informed ODO, detainees are most commonly placed in administrative segregation pending a disciplinary hearing for a serious rule violation. Other common reasons include protective custody or known gang affiliation, where continued presence in general population would pose a threat to the detainee, the general detainee population, or facility staff. ICE detainees with mental health concerns, or who require special observation, are housed in the facility's medical unit. The facility notifies ICE as required when a detainee is housed in the medical unit for mental health concerns.

Detainees in administrative segregation status are reviewed every seven days by a classification counselor, and a copy of the review form is provided to the detainee. Visits to detainees in the SMUs by the shift supervisor, classification staff, clergy, and medical personnel are documented. ODO confirmed detainees receive recreation, showers, meals, visits, and telephone privileges in accordance with the standard; however, they are only allowed to shave twice per week rather than three times per week (**Deficiency SMU AS-1**). The SDDO provided ODO with a memorandum stating this requirement was waived by the ICE Detention Management Division on April 2, 2012, because allowing shaves twice per week meets the intent of the standard. The waiver was requested on the grounds that a third day of shaving privileges would be cost-prohibitive and interfere with other activities, such as recreation.

STANDARD/POLICY REQUIREMENT FOR DEFICIENT FINDINGS

DEFICIENCY SMU AS-1

In accordance with the ICE NDS, Special Management Unit - Administration Segregation, section (III)(D)(6), the FOD must ensure segregated detainees shall have the opportunity to maintain a normal level of personal hygiene. Staff shall provide toilet tissue, a wash basin, tooth brush, shaving utensils, etc., as needed, and may issue retrievable kits of toilet articles.

Each segregated detainee shall have the opportunity to shower and shave at least three times a week, unless these procedures would present an undue security hazard. This security hazard will be documented and signed by the OIC, indicating his/her review and approval. Denial of showers will be temporary and situational, and will continue only as long as justified by the security threat.

SPECIAL MANAGEMENT UNIT (SMU) Disciplinary Segregation (DS)

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

Four single-bed cells are designated as SMUs. If additional space is required, cells in the facility's maximum security units are used. During the review, there was one male detainee in disciplinary segregation status. ODO's review of documentation found he was serving a nine-day sanction for involvement in a physical altercation with another detainee. ODO confirmed placement in the SMU was in accordance with facility policy and the NDS. A review of detention files for detainees previously on disciplinary segregation found they all contained the required documentation.

The status of detainees in disciplinary segregation is reviewed every seven days by a classification counselor, and a copy of the review form is provided to the detainee. Visits to detainees in the SMUs by the shift supervisor, classification staff, clergy, and medical personnel are documented. ODO confirmed detainees in disciplinary segregation status receive recreation, showers, meals, visits, and telephone privileges in accordance with the NDS; however, they are only allowed to shave twice per week rather than three times per week (**Deficiency SMU DS-1**). The SDDO provided ODO with a memorandum stating this requirement was waived by the ICE Detention Management Division on April 2, 2012, because shaving twice per week meets the intent of the standard. The waiver was requested by WCJ on the grounds that a third day of shaving privileges would be cost-prohibitive and interfere with other activities, such as recreation.

STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS

DEFICIENCY SMU DS-1

In accordance with the ICE NDS, Special Management Unit – Disciplinary Segregation, section (III)(D)(11), the FOD must ensure segregated detainees shall have the opportunity to maintain a normal level of personal hygiene. Staff shall provide toilet tissue, a wash basin, tooth brush, shaving utensils, etc., as needed, and may issue retrievable kits of toilet articles.

Each segregated detainee shall have the opportunity to shower and shave at least three times a week, unless these procedures would present an undue security hazard.

- a. The security hazard will be documented and signed by the OIC, indicating his/her review and approval.
- b. Denial of showers will be temporary and situational, and will continue only as long as justified by the security threat.

STAFF-DETAINEE COMMUNICATION (SDC)

ODO reviewed the Staff-Detainee Communication standard at WCJ 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 ERO employees, WCJ staff, and ICE detainees. Additionally, ODO reviewed logbooks, relevant policies, and procedures.

WCJ employs both informal and formal procedures for key ICE and facility staff to interact with detainees on a regular basis. Facility staff interacts with detainees daily. ICE staff initiates informal contact through unannounced visits from the FOD, AFOD and SDDO. During these visits, ICE officials visit the facility's living and activity areas, including the housing units, food service area, recreation area, SMUs, and medical care infirmary rooms. During interviews, ODO confirmed ICE staff is familiar with the WCJ operations and services provided to detainees. Two separate logbooks verify contact visits. One of the logbooks is located at the main entrance of the facility and maintained by WCJ staff, while the other is maintained by ERO staff. An SDDO designated as the OIC conducts unscheduled visits twice a week. The weekly visits allow the SDDO to interact with WCJ staff and detainees, and to monitor the activities of ICE personnel. As part of the WCJ informal interaction procedures, the Warden designated two Assistant Wardens to walk through the housing units and make contact with detainees at least twice during every duty assignment. The Warden makes daily visits to the detainee housing units to interact with detainees.

Detainees may initiate formal interaction by submitting a detainee request form. The housing officers provide these forms to detainees upon request, and the completed forms are then either placed in the ICE lockbox or are submitted through the WCJ housing officers. Requests pertaining to facility services are handled in accordance with the facility's established guidelines. ERO does not have permanent staff stationed at the facility; however, one IEA and additional DOs are assigned on a part-time basis to conduct regular contact visits with the detainees. ODO confirmed the IEA conducts regular visits to WCJ on Tuesdays, Wednesdays, and Fridays. The weekly schedules for the DOs are located in each of the housing units. The DOs are scheduled to visit WCJ on Thursday every week, and to provide case management information to detainees assigned on their dockets.

ODO interviewed an IEA and an SIEA to determine compliance with the requirements of the ERO Model Protocol. ODO confirmed through interviews and logbook reviews that the Facility Liaison Visit Checklist and the Telephone Serviceability Forms are completed weekly as required. ODO observed the IEA took extra initiative in following-up on detainee complaints with WCJ staff to ensure services are rendered.

ODO reviewed the detainee request logbook and found the required information is properly recorded. ODO reviewed 60 completed detainee request forms, and confirmed all the responses addressed each individual detainee's concerns in a timely manner in accordance with the NDS. During the QAR in 2011, ODO noted the detainee handbook contained inadequate information regarding communication with ICE. Additionally, ODO observed completed detainee request forms were not being maintained in detention files. During this CI, ODO confirmed WCJ

improved its procedures for establishing effective communication between ICE staff and detainees. The facility installed lockboxes in each of the ICE housing units, marked "ICE Request Only," allowing detainees to submit requests directly to ICE. ODO recommends the handbook be updated to contain information pertaining to the lockboxes.

While reviewing detention files, ODO found WCJ officials do not maintain copies of completed detainee request forms (**Deficiency SDC-1**). ODO addressed this repeat deficiency during the review and at the close-out briefing. ICE staff contended that putting the request forms in the detention files is a breach of confidentiality for those detainees who do not want their requests released to facility staff. ICE staff explained the deficiency was not corrected because they wanted to protect detainees from possible reprisal from facility staff. ICE staff also stated detainees are fearful that certain information they conveyed to ICE about the facility, once placed in the detention file, may be revealed to facility staff and may result in possible reprisals. However, ERO and facility staff stated a concerted effort would be made to ensure the completed requests forms are maintained in each individual detainee's file.

STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS

DEFICIENCY SDC-1

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