



The Nakamoto Group, Inc.

October 15, 2020

TO: [REDACTED]  
Assistant Director for Detention Management

FROM: [REDACTED]  
Lead Compliance Inspector  
The Nakamoto Group, Inc.

SUBJECT: **Annual Inspection of the Kay County Detention Center**

The Nakamoto Group, Inc. performed an annual inspection for compliance with the ICE Performance-Based National Detention Standards (PBNDS) 2011 of the Kay County Detention Center in Newkirk, Oklahoma, during the period of October 13-15, 2020. This inspection was conducted remotely due to the COVID-19 virus. This is an IGSA.

The annual inspection was performed under the guidance of [REDACTED], Lead Compliance Inspector. Team members were:

Subject Matter Field	Team Member
Detainee Rights	[REDACTED]
Security	[REDACTED]
Medical Care	[REDACTED]
Medical Care	[REDACTED]
Safety	[REDACTED]

### **Type of Inspection**

This is a scheduled annual inspection which is performed to determine overall compliance with the ICE PBNDS for Over 72 hour facilities. The facility received a rating of Meets Standards during the October 2019 annual inspection.

### **Inspection Summary**

The Kay County Detention Center is currently accredited by:

- The American Correctional Association (ACA) - No
- The National Commission on Correctional Health Care (NCCHC) - No
- The Joint Commission (TJC) - No
- Prison Rape Elimination Act (PREA) - Yes

### **Standards Compliance**

The following information is a summary of the standards that were reviewed and overall compliance that was determined as a result of the 2019 and 2020 PBNDS 2011 compliance annual inspections:



<b>2019 Annual Inspection</b>	
Meets Standards	40
Does Not Meet Standards	0
Repeat Finding	0
Not Applicable	2

<b>2020 Annual Inspection</b>	
Meets Standards	40
Does Not Meet Standards	0
Repeat Findings	0
Not Applicable	2

The inspection team identified five (5) deficient components in the following five (5) standards:

- Contraband – 1
- Special Management Units – 1
- Tool Control – 1
- Medical Care – 1, which is a priority component
- Detainee Handbook – 1

### **Facility Snapshot/Description**

The Kay County Detention Center is located in Newkirk, Oklahoma and is owned and operated by the Kay County Justice Facilities Authority. The [REDACTED] facility houses male and female Kay County inmates, Oklahoma Department of Corrections inmates, Bureau of Indian Affairs detainees, and male and female ICE detainees. [REDACTED]

There are eight housing units divided among two-person cells and open dormitory arrangement used to house detainees of all custody levels. A review of detainee rosters verified that detainees are not commingling with other detainees of dissimilar custody levels. Officers are posted in the immediate area of the living units providing indirect supervision. The entrance doors to each housing unit are controlled by the central control center and all housing units are equipped with an intercom system for detainee use if assistance is needed. There is a dedicated special management unit (SMU) containing eight cells with two-person occupancy. Roving officers share the responsibility of making personal observation checks on detainees housed in the SMU. The SMU is also equipped with an intercom system for detainee use if assistance is needed. Living units appear well lit with both natural and artificial light and have adequate open space for detainees. A housing unit floor plan and photographs of the housing units were provided for review. General population housing units have common areas that are furnished with stainless steel tables with attached seats for detainees to eat their meals, participate in leisure time activities, and socialize. The ICE sergeant reported that board games, leisure reading material, playing cards, and televisions are among the amenities available to detainees. Staff reported that detainees have access to computer tablets in each housing unit for ordering commissary items and reviewing the detainee handbook and submitting electronic requests to ICE. Detainees reported that they have daily access to outdoor recreational activities such as basketball, handball, and walking areas. General visitation and group religious services have been temporarily suspended due to health concerns associated with the COVID-19 virus. Video visitation is available to detainees and the facility part-time chaplain makes religious materials available for view in each of the housing units. Other COVID-19 response operational changes include all newly received detainees have been quarantined and COVID-19 tested at a previous facility before entering the Kay County Detention Center. In limited cases, ICE officers will use the facility to hold detainees under 72 hours before transferring them to another facility. Detainees being held are placed in a designated quarantine housing area until they are transferred to another facility. The facility has arranged with the telephone provider to allow 500



free minutes of monthly call time for detainees to maintain positive family ties in the absence of family visits due to COVID-19 restrictions.

The facility is reported to be climate controlled and appeared to be in good repair based on photographs reviewed by inspectors. All officers interviewed were well-versed in facility guidelines and operating procedures as well as the National Detention Standards. Officers and staff were professional during interviews and detainees spoke willingly and respectfully. A review of photographs, videos, sanitation inspection reports, and telephonic interviews with staff and detainees concluded that the sanitation level of the facility was average.

The inspection team interviewed sixteen LEP and English-speaking detainees housed at the facility. Interviews were held telephonically and with the assistance of an interpreter when needed. There were no substantive concerns voiced when asked about treatment by staff, telephone services, mail services, quality of food, or access to ICE. Four detainees complained of not receiving proper medical attention citing individual concerns of an injured shoulder, delayed eye examination, medication adjustment for vision problem, and not receiving a CPAP machine. The medical SME discussed all concerns with the HSA who referred to progress notes contained in the electronic medical records. At the completion of the discussion, the HSA agreed to have all four detainees brought to the medical area for a more detailed review of each of their medical concerns. One LEP detainee stated that she does not have enough access to the law library and had been waiting for staff to provide her access. This concern was brought to the attention of the chief of security and arrangements were made immediately for the detainee to use the legal laptop computer. One additional LEP detainee stated that he did not receive a copy of the local detainee handbook upon admission. The chief of security had a copy provided to him. A detainee housed in SMU had no concerns with the conditions of confinement, but reported that he didn't think that the circumstances for which he was placed in the SMU were properly investigated. The chief of security appointed the SMU lieutenant to conduct an interview with the detainee.

Finally, all detainees that raised substantive complaints or concerns during the interviews were asked if they had submitted their concerns to the Office of Inspector General. No detainee reported that they had submitted their concerns beyond facility staff.

Food service is provided by county employees while medical services is contracted with Turn Key Health Clinics. The facility does not charge co-pays for medical, mental health, or dental care. Dental and mental health services are subcontracted by the medical services provider.

Detainee telephone services are provided by City Tele Coin Co., Inc., via contract with the facility.

### **Areas of Concern/Significant Observations**

The inspection was conducted remotely, and inspectors were unable to personally observe practices and procedures within the facility. The inspection team relied upon photographs and/or videos to validate the observation of many standards.

The inspection team identified one (1) priority component that Does Not Meet Standards:

#### **Medical Care**

*Component #32:* Each facility's health care provider shall conduct a comprehensive health assessment, including a physical examination and mental health screening, on each detainee within 14 days of the detainee's arrival unless more immediate attention is required due to an acute or identifiable chronic condition. If such documentation exists of such a health assessment within the previous 90 days, the facility health care provider upon review may determine that a new appraisal is not required. Physical examinations shall be performed by a physician, physician assistant, nurse practitioner, RN (with documented training provided by physician) or other healthcare provider permitted by law.



*Findings:* The physical assessments conducted by a trained registered nurse (RN) within fourteen days of the detainee's arrival were not reviewed and signed by the physician or designee. This was a concern during the previous inspection but was negated with a corrective action plan.

*Recommendation:* The facility should implement a process that ensures that when physical examinations are completed by the registered nurse (RN), the examinations are reviewed and signed by a physician or designee.

**Recommended Rating and Justification**

The Lead Compliance Inspector recommends that the facility receive a rating of Meets Standards unless unobserved practices and conditions are contrary to what was reported to the inspection team. The facility complies with the ICE Performance-Based National Detention Standards (PBNDS) 2011. No (0) standard was found as Does Not Meet Standards and two (2) standards were Not Applicable (N/A). All remaining forty (40) standards were found to be in compliance.

**LCI Assurance Statement**

The findings of compliance and non-compliance are accurately and completely documented on the G-324A Inspection Form and are supported by documentation in the inspection file. An out brief was conducted telephonically with facility staff and ICE representatives. In addition to the entire Nakamoto Group, Inc. Inspection Team, the following were present:

- ICE Officials – [REDACTED]
- Facility Staff – [REDACTED]

[REDACTED]

[REDACTED], Lead Compliance Inspector  
Printed Name of LCI

October 15, 2020  
Date

[REDACTED]