November 5, 2020

TO: Assistant Director for Detention Management
FROM: Lead Compliance Inspector
The Nakamoto Group, Inc.

SUBJECT: Annual Inspection of the Baker County Detention Center

The Nakamoto Group, Inc. performed an annual inspection for compliance with the ICE National Detention Standards (NDS 2019/SAAPI 2011) of the Baker County Detention Center in Macclenny, Florida during the period of November 3-5, 2020. This is an IGSA facility.

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

<table>
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<tr>
<th>Subject Matter Field</th>
<th>Team Member</th>
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<tr>
<td>Detainee Rights</td>
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<tr>
<td>Security</td>
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<td>Medical Care</td>
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<td>Medical Care</td>
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<td>Safety</td>
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Type of Inspection

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

Inspection Summary

The Baker 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 NDS 2000 and 2020 NDS 2019 annual inspections:
The inspection team identified three (3) deficient components in the following three (3) standards:

Post Orders – 1
Searches of Detainees – 1
Medical Care – 1

Facility Snapshot/Description

The Baker County Detention Center is owned by Baker County and operating under the jurisdiction of the Baker County Sheriff’s Office. The center is located in Macclenny, Florida, which is thirty miles west of Jacksonville on Interstate 10. The remaining population was comprised of U.S. Marshal Service detainees, Federal Bureau of Prisons inmates, and Baker and surrounding county detainees. The center only houses adult males and females. ICE detainees are not housed with non-ICE detainees.

The detention center compound was opened in 2009 and consists of two buildings connected by a covered corridor. One building houses administrative and support services and the other is comprised of the living areas. The compound is surrounded by one twelve-foot chain link fence supplemented with rows of razor ribbon. There is no perimeter road but the grounds are patrolled daily by an unarmed officer on an irregular basis. Surveillance cameras offer visibility around the entire perimeter as well as sight lines down interior movement corridors, into the housing units, common areas, and recreation areas. All exterior and interior doors are under constant camera surveillance and controlled by main control officers. The facility is equipped with a surveillance camera network with 128 cameras which are monitored 24 hours a day. All movement is escorted.

Each of the two individual general population housing units are divided into four sections having either eight four-bed cells or sixteen two-bed cells or a combination thereof. The cells do not have an outside window. There is one special management unit (SMU) designed with sixteen two-bed cells; it houses detainees in disciplinary and administrative segregation status. There were two ICE detainees housed in the SMU during the inspection. The medical unit does not have infirmary beds. The facility has dedicated part of one housing unit to serve as a COVID-19 wing; there were no active cases during the inspection. All detainees endure fourteen days of isolation housing upon arrival. If they test negative for COVID19 at the end of that period they are placed in general population.

Each housing unit has a common dayroom which are designed with skylights and furnished with a television, fixed table/chair units for detainees to eat their meals, play games and gather for conversation and two kiosks where detainees can order commissary, check their account balance, participate in video-visits, send/receive emails, and access the facility handbook, program schedules, and announcements. Detainees are provided indoor and outdoor (as reported) recreation.
Inspectors interviewed sixteen ICE detainees; thirteen were male, two were female and one was a transgender. Four interviews were aided with the use of a language line. All of the detainees stated they felt safe in the facility and had not been threatened or mistreated by staff or other detainees since their arrival, except for one detainee who stated he was attacked by three other detainees on 10/29/2020. This allegation was discussed with the chief of security by the LCI; she was aware of the incident. Proper investigative procedures were enacted and appropriate disciplinary measures followed. No further action was necessary. The few medical complaints received were discussed with the health services administrator by the medical SME. In all cases, the detainees had previously been seen by medical staff and had received consult/treatment for the conditions they presented. Follow-up care was already scheduled as necessary for those in need. There were two concerns expressed about the law library; one regarding the printer and its lack of paper and reliability, and the other with library access. The LCI discussed this concern with the programs coordinator and the captain. The law library printer is new and paper supplies are readily accessible by making a request to the supervising library officer. Paper supplies are in stock. Attention to the paper tray will be discussed with the assigned library officer. The lack of access was also discussed. Currently the law library room shares duty as an attorney visitation/telephone call room. If the room is in use for that purpose anyone requesting access at that time is deferred until the room becomes open. It is an obstacle, but an infrequent one, per the administration. Space limitations do not present a viable option at this time, per the captain. Three of the detainees registered complaints about clothing. During the weekly laundry exchange, the replacement uniform offered was not the correct size and they had to wait two weeks for the correct size to be available. Two of these detainees stated they filed a grievance, but they were not decided in their favor. The LCI ensured the captain was made aware of the allegations. The prevalent concern amongst several detainees was the lack of sunlight in the housing units and during recreation. The LCI discussed this issue with the captain. Cells do not have windows, but the dayrooms are designed with skylights. The defined outdoor recreation area is an enclosed long, narrow room with a small window positioned high up on one wall. It opens, thereby allowing for the exchange of air, and it does offer a glimpse of the outdoor light, but it is an enervated example of outdoor recreation.

There were no concerns raised about COVID-19 protocols and safety measures required of the detainee population. There were no active COVID-19 cases during the inspection. The facility is maintaining an average level of sanitation as determined by the on-site inspectors conducting this hybrid inspection.

Medical services are provided by Armor Correctional Health Services. Food service is operated by the Trinity Services Group. Maintenance services are managed by Baker County employees. Detainee telephone services and housing unit kiosk operations are provided by Securus Technologies. ICE detainees are not charged medical co-pays.

Areas of Concern/Significant Observations

There were no areas of concern or significant observations noted during the inspection. The inspection was conducted as a hybrid format where two inspectors were on-site and three were working remotely. Therefore, not all inspected practices and procedures were observed within the facility. The inspection team relied upon photographs and/or videos to validate the observation of many standard requirements.

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 National Detention Standards (NDS 2019) for Over 72-hour facilities. No (0) Standards were rated as Does Not Meet Standards and no (0) standards were Not Applicable (N/A). All remaining thirty-three (33) standards were found to be in compliance.
**LCI Assurance Statement**

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

- **ICE Officials** –
- **Facility Staff** –

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[Redacted], Lead Compliance Inspector

November 5, 2020

Printed Name of LCI

Date