June 3, 2022

TO: [Redacted]  
Acting Assistant Director Custody Management

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

SUBJECT: Annual Detention Inspection of the Clay County Jail

The Nakamoto Group, Inc. performed an annual inspection for compliance with the ICE Performance Based National Detention Standards (PBNDS 2008) of the Clay County Jail in Brazil, Indiana during the period of June 1-3, 2022. This is an IGSA facility.

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

<table>
<thead>
<tr>
<th>Subject Matter Field</th>
<th>Team Member</th>
</tr>
</thead>
<tbody>
<tr>
<td>Detainee Rights</td>
<td></td>
</tr>
<tr>
<td>Security</td>
<td></td>
</tr>
<tr>
<td>Medical Care</td>
<td></td>
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<tr>
<td>Safety</td>
<td></td>
</tr>
<tr>
<td>Medical Care</td>
<td></td>
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</tbody>
</table>

**Type of Inspection**

This is a scheduled annual inspection which is performed to determine overall compliance with the ICE PBNDS 2008 for Over 72-hour facilities. The facility received a previous rating of Meets Standards during the December 2021 180 day follow-up inspection.

**Inspection Summary**

The Clay County Jail 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) – No
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 2021 180 day follow-up inspection and 2022 annual compliance inspection:

<table>
<thead>
<tr>
<th>2021 180 Day Follow-up Inspection</th>
<th>2022 Annual Inspection</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meets Standards</td>
<td>37</td>
</tr>
<tr>
<td>Does Not Meet Standards</td>
<td>1</td>
</tr>
<tr>
<td>Repeat Finding</td>
<td>0</td>
</tr>
<tr>
<td>Not Applicable</td>
<td>3</td>
</tr>
<tr>
<td>Meets Standards</td>
<td>38</td>
</tr>
<tr>
<td>Does Not Meet Standard</td>
<td>0</td>
</tr>
<tr>
<td>Repeat Finding</td>
<td>0</td>
</tr>
<tr>
<td>Not Applicable</td>
<td>3</td>
</tr>
</tbody>
</table>

The inspection team identified eight (8) deficient components in the following six (6) standards.

Key and Lock Control – 1, which is repeat deficiency
Special Management Units – 1
Staff-Detainee Communication – 1, which is a priority component
Personal Hygiene – 1, which is a repeat deficiency
Recreation – 2, one of which is a repeat deficiency and one is a priority component
Telephone Access – 2

Facility Snapshot/Description

The Clay County Jail (CCJ) is owned by Clay County and operated under the jurisdiction of the Clay County Sheriff’s Office. The facility is located approximately forty miles southwest of Indianapolis in Brazil, Indiana. The facility houses adult male and female Clay County detainees and adult male and female ICE detainees of all classification levels.

The CCJ physical plant consists of a two-story building housing the administrative offices of the Clay County Sheriff’s Office, Department of Natural Resources, central dispatch for all county emergency services, and the jail. There is no perimeter fencing around the building. The perimeter is foot patrolled by an armed officer once per shift. The exterior perimeter is the exterior walls of the building. The entire perimeter is under camera surveillance. Access through all exterior doors is controlled by central control officers.

The jail consists of ___ individual pod style housing units: ___ housing units are equipped with ___-bed cells; ___ housing units are equipped with ___-bed cells; and ___ dormitories range in size from ___ beds. However, ___ beds have been added to the capacity of each housing unit. The facility is under a multiple surveillance camera network which provides sight lines into all critical housing and common areas.
Housing areas provide adequate open dayroom space which is accessible to detainees daily from 6:00 a.m. to 11:00 p.m. Each housing unit is equipped with a television, a telephone bank, an informational kiosk, and stainless-steel tables with attached stools.

The facility does not offer outdoor recreation. The daily schedule governs detainee movement. All movement is escorted. Detainees are offered electronic tablets. Tablets and kiosks are available to submit grievances and requests to all departments. Tablets may be used to place telephone calls, e-messaging, e-cards, and video grams for a fee. Free applications include law library, religion, forms, viewers, books, and games.

Visiting privileges are scheduled through a video visitation platform. A video visiting station is located in each housing unit. A bank of monitors is located in a room adjacent to the front visitor entrance. Daily visits are permitted and can be conducted on-site or from a remote location.

The inspection team formally interviewed a total of twelve detainees and conducted numerous informal interviews of detainees while visiting the general population housing units. During a formal detainee interview one female detainee stated that she needed her inhaler changed but the physician would not do it. The Medical SME followed up with the medical staff who stated that the inhaler currently prescribed was sufficient per the physician. Detainees registered no substantive concerns regarding food, access to telephones, cleaning supplies, or access to legal materials.

All detainees stated that they felt safe in the facility, were treated fairly by the staff, and were able to access programs and services. Detainees were asked about the quality of the food and responses were generally favorable. None expressed any concern relating to staff or receiving services.

Detainees indicated they were aware of the grievance system and how to use it. None of the detainees had contacted the OIG but were aware of how to make contact if they needed to.

The facility staff was professional in appearance and demeanor, and those interviewed possessed a working knowledge of the standards as they applied to their duties. A number of employees are bilingual. The atmosphere of the facility appeared relaxed, and staff and detainee interactions were cordial and professional.

The facility is climate controlled and appeared to be in good repair. The sanitation level of the facility was observed to be maintained at an average level.

Medical services are provided by Quality Correctional Care. Detainees are not charged a co-pay for any health services. Telephone and tablet services are provided by Securus Technologies. All other services are provided by Clay County employees.
Areas of Concern/Significant Observations

This was a hybrid inspection with one inspector working remotely. Four inspectors were on-site. The remote inspector (Medical QMC SME) was unable to personally observe practices and procedures within the facility but was able to review files and documentation.

The facility reported that one detainee was currently in isolation having tested positive for COVID-19. The living unit to which the detainee had been assigned was currently on cohort status.

Standard 2-16 Staff-Detainee Communication

Priority Component Does Not Meet the Standard

Component 4: PRIORITY: Detainees may submit written questions, request, or concerns to ICE/ERO staff, using the detainee request form, a local IGSA form, or a sheet of paper.

Each facility administrator shall:

- Ensure that adequate supplies of detainee forms, envelopes, and writing implements are available.
- Have procedures to promptly route and deliver detainee requests to the appropriate ICE/ERO officials by authorized personnel (not detainees) without reading, altering, or delaying.
- Ensure that the standard operating procedures accommodate detainees with special assistance needs based on, for example, disability, illiteracy, or limited use of English.
- Ensure that each facility provides a secure drop box for detainees to correspond directly with ICE management, and that only ICE personnel have access to the drop box.

Finding: Detainees submit requests to ICE by using the kiosk located in each housing unit; however, the request goes to a facility sergeant (ICE Coordinator) who reviews the request and decides if it is a facility issue or something that ICE should handle. If it is decided that it is the latter, the request is logged and emailed to ICE for necessary action.

Recommendation: The facility should either go to an all paper request form system, with a secured lock box that only ICE has access to, or have the contract telephone service provided (Securus) to enable the system to be able for the kiosk request be sent directly to ICE.

Standard 5-29 Recreation

Priority Component Does Not Meet the Standard

Component 3: PRIORITY: If outdoor recreation is available at the facility, each detainee shall have access for at least one hour daily, at a reasonable time of day, weather permitting. Detainees shall have access to clothing appropriate for weather conditions. If only indoor recreation is available, detainees shall have access for at least one hour each day to a large recreation room with exercise equipment and access to natural sunlight. All detainees participating in outdoor recreation shall have access to drinking water and toilet facilities.
**Finding:** Detainees have access to a multi-purpose room for recreation purposes. This room has access to natural light and weight equipment fixed to the floor. Detainees have access to drinking water and toilet facilities. A recreation schedule has been developed providing for one hour of indoor recreation daily.

However, during informal interviews detainees stated they did not receive the required recreation period. There is no documentation to support detainees are in fact provided the required recreation time.

**Recommendation:** The facility should adhere to the developed recreation schedule providing for one hour of indoor recreation daily and document that recreation periods were provided.

**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 2008). No (0) standards were found Does Not Meet Standards and three (3) standards were Not Applicable (N/A). All remaining thirty-eight (38) standards were found to Meet Standards.

**LCI Assurance Statement**

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

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

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[Printed Name of LCI]  
June 3, 2022  
Date