



November 29, 2018

TO: [REDACTED]  
Assistant Director for Detention Management

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

SUBJECT: **Annual Detention Inspection of the Geauga County Jail**

The Nakamoto Group, Inc. performed an annual inspection for compliance with the ICE National Detention Standards (NDS) of the Geauga County Jail in Chardon, OH, during the period of November 27-29, 2018. This is an IGSA facility.

The 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 NDS for Over 72 hour facilities. The facility received a previous rating of Acceptable during the November 2017 annual inspection.

### **Inspection Summary**

The Geauga 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 2017 and 2018 annual compliance inspections:



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<b>2017 Annual Inspection</b>	
Acceptable	35
Deficient	1
At Risk	0
Repeat Deficiency	0
Not Applicable	3

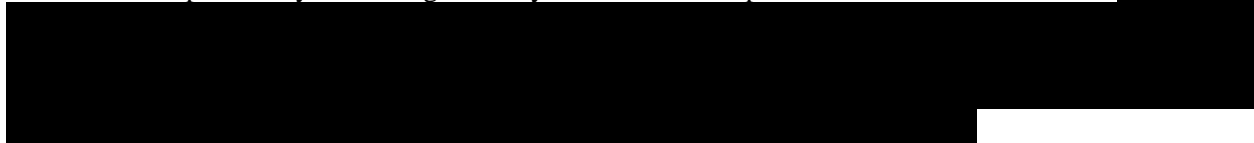
<b>2018 Annual Inspection</b>	
Acceptable	33
Deficient	3
At Risk	0
Repeat Deficiency	1
Not Applicable	3

The inspection team identified thirty-four (34) deficient components in the following sixteen (16) standards:

- Admission and Release—2
- Classification System—5
- Correspondence and Other Mail—1
- Detainee Handbook—3, one of which is a repeat deficiency
- Issuance and Exchange of Clothing, Bedding and Towels—1, which is a repeat deficiency
- Recreation—1, which is a repeat deficiency
- Access to Telephones—2, one of which is a repeat deficiency
- Disciplinary Policy—2
- Environmental Health and Safety—2, one of which is a repeat deficiency
- Hold Rooms—1, which is a repeat deficiency
- Key and Lock Control—1, which is a repeat deficiency
- Post Orders—1
- Special Management Unit (Administrative Segregation)—2
- Special Management Unit (Disciplinary Segregation)—2
- Staff/Detainee Communications—6, four of which are repeat deficiencies
- Sexual Abuse and Assault Prevention and Intervention—2, one of which is a repeat deficiency

### **Facility Snapshot/Description**

The Geauga County Jail is located in a rural area just outside the city limits of Chardon, Ohio. The facility is owned and operated by the Geauga County Sheriff’s Office pursuant to an IGSA with ICE.



ICE detainees are housed in both dormitory and cell design housing units and are intermingled with non-ICE detainees. The large dormitory has a capacity of 60 beds; there are two smaller dorms each with a capacity of eight beds. There are six cell design housing units, four of which have fifteen beds each and two with 23 beds each. The facility does not have a separate housing unit designated as a special management unit. Detainees requiring segregation are housed in a cell inside a general population housing unit and managed according to the administrative segregation or disciplinary segregation standard. One female ICE detainee was housed in disciplinary segregation status during the inspection.

The facility employs the indirect supervision model. A roving officer is required to visit each housing unit at least hourly. The primary method of oversight for the housing units is via cameras which are monitored in central control.





The housing units each have a dayroom area equipped with one television, telephones and various board games. Both indoor and outdoor recreation areas are available. Outdoor recreation is unavailable during the winter months due to cold and inclement weather. The entire facility is climate controlled. Sanitation throughout the facility was observed to be average.

All housing units for ICE detainees and all common areas of the facility which are used by ICE detainees were observed during the inspection. Each member of the inspection team made multiple visits to the housing units and numerous detainees were interviewed. Some interviews were with small groups of detainees and several were private and confidential and included detainees with limited English proficiency (LEP), some of which spoke neither English nor Spanish. A telephonic language service was used to interview these detainees. Detainees who had recently arrived at the facility and some who had been housed at the facility for longer periods of time were interviewed. The detainees voiced no concerns regarding life/safety issues and none had received any threats while housed at the facility. Detainees were generally satisfied with food service and access to medical services, the law library, telephones, visitation and recreation.

A few detainees voiced specific medical concerns. The Medical SME followed-up with the medical department and confirmed that each of these detainees had recently been seen by medical staff for their concerns.

One detainee complained of suffering from anxiety and was uncomfortable living in the low custody dormitory housing. The detainee stated he had been threatened at another facility. The detainee stated he voluntarily discontinued taking prescribed anti-anxiety medication because it made him drowsy. The Lead Compliance Inspector provided the detainee's name and A-number to the facility OIC for review of his concerns.

The primary complaints received by the SMEs concerned the lack of issuance and availability of the local site-specific handbook and access to ICE staff. During interviews with numerous ICE detainees within their housing units, the inspection team was only able to find two detainees in possession of a local handbook. The OIC confirmed that for an undetermined amount of time during the inspection period, but at least two months, the local handbooks had not been available. Additionally, the local handbook is only provided in English although the majority of the ICE detainees housed at the facility are non-English speaking. The OIC informed the inspection team that the Spanish translation of the local handbook should be completed in the near future. Issues with access to ICE staff are detailed in the Staff/Detainee Communications summary found below in this letter.

All services, with the exception of detainee telephone services contracted with Combined Public Communications (CPC), are provided by the Geauga County Sheriff's Office. ICE detainees do not incur medical co-pays.

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

Three standards were rated Deficient during the inspection.

### **Classification System**

*Policy:* All facilities will develop and implement a system according to which ICE detainees are classified. The classification system will ensure that each detainee is placed in the appropriate category, physically separated from detainees in other categories.



*Findings:* The facility relies on ICE to classify ICE detainees prior to their arrival at the facility. However, ICE detainees transported to the facility by the U. S. Border Patrol are not classified by an objective classification tool either before or subsequent to arrival at the facility. Absent any indication of a criminal history on form I-203, the facility routinely places these detainees in low custody housing. The facility does not routinely receive any additional information with which to complete an objective classification tool. Additionally, one I-203 from ICE was reviewed which did not contain the custody classification assignment for the detainee. In these instances, the facility routinely places the detainee in low custody housing absent any indication of a criminal history. One detainee classified by ICE as high custody as indicated on form I-203 was assigned to a low custody housing unit. Neither a supervisor or classification specialist reviews each classification/housing decision.

*Recommendation:* Ensure that every ICE detainee assigned to the facility is classified by use of an objective classification system. Ensure that housing unit assignments are based on the classification-level determined by an objective classification tool. A supervisor or classification specialist should review each classification/housing decision.

### **Detainee Handbook**

*Policy:* Every OIC will develop a site-specific detainee handbook to serve as an overview of, and guide to, the detention policies, rules, and procedure in effect at the facility. The handbook will also describe the services, programs, and opportunities available through various sources, including the facility, ICE, private organizations, etc. Every detainee will receive a copy of this handbook upon admission to the facility.

*Findings:* Detainees did not receive a copy of the local site-specific handbook for an undetermined period of time, but for at least two months, during the inspection period. Inspectors found only two ICE detainees in possession of a site-specific handbook. Although the handbook was not issued to detainees for some period of time, detainees were instructed to sign a form during intake processing which indicated they were provided a local handbook. The site-specific handbook is only available in English. The handbook does not advise detainees attending court that they will be afforded the opportunity to shave first.

*Recommendation:* Ensure that detainees receive a copy of the local site-specific handbook. The handbook should be available in both English and Spanish as required by the Standard. A statement should be included in the site-specific handbook advising detainees attending court that they will be afforded the opportunity to shave first.

### **Staff Detainee Communications-(Repeat Deficiency)**

*Policy:* Procedures must be in place to allow for formal and informal contact between key facility staff and ICE staff and ICE detainees and to permit detainees to make written requests to ICE staff and receive an answer in an acceptable time frame.

*Findings:* Weekly announced and unannounced visits do not occur. ICE personnel provided no documentation to support that ICE staff visited the facility or observed and noted current climate and conditions of confinement for much of the inspection period. Scheduled visits by ICE staff were not posted in ICE detainee areas. Documentation did not support that ICE staff respond to detainee written requests within 72 hours.

*Recommendation:* Ensure that weekly announced and unannounced visits occur and are documented. Ensure that scheduled visits by ICE staff are posted in ICE detainee areas. Ensure that climate and condi-



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tions of confinement are documented during the weekly visits. Ensure that detainee requests are responded to within 72 hours as required.

### **Recommended Rating and Justification**

The Lead Compliance Inspector recommends that the facility receive a rating of Deficient. The facility does not comply with the ICE National Detention Standards (NDS) as evidenced by the finding of three Deficient standards; Classification System, Detainee Handbook and Staff/Detainee Communications, a repeat deficiency. Of the remaining thirty-six (36) standards, thirty-three (33) were found to be in compliance and three (3) were Not Applicable (N/A).

### **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. An out brief was conducted at the facility and 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

November 29, 2018

Date