

June 14, 2018

TO: [REDACTED]
 Assistant Director for Detention Management

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

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

The Nakamoto Group, Inc. performed an annual inspection for compliance with the ICE Performance-Based National Detention Standards (PBNDS 2008) of the Irwin County Detention Center in Ocilla, GA, during the period of June 12-14, 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 PBNDS 2008 for Over 72 hour facilities. The facility received a previous rating of Meets Standards during the June 2017 inspection.

Inspection Summary

The Irwin 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) - 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 inspections:



<i>2017 Annual Inspection</i>	
Meets Standard	40
Does Not Meet Standard	0
At Risk	0
Repeat Deficiency	0
Not Applicable	1

<i>2018 Annual Inspection</i>	
Meets Standard	40
Does Not Meet Standard	0
At Risk	0
Repeat Deficiency	0
Not Applicable	1

The inspection team identified nineteen (19) deficient components in the following nine (9) standards:

- Environmental Health and Safety - 1
- Special Management Units - 2, one of which is a priority component
- Staff Detainee Communication - 3, all of which are repeat deficiencies
- Food Service - 7, two of which are priority components and two are repeat deficiencies
- Hunger Strikes – 1, which is a repeat deficiency
- Medical Care – 1
- Personal Hygiene – 2, both of which are repeat deficiencies
- Detainee Handbook - 1, which is a repeat deficiency
- Detainee Transfer – 1, which is a priority component

Facility Snapshot/Description

The Irwin County Detention Center is a [REDACTED] facility owned and operated by LaSalle Corrections and governed by the Irwin County Commissioners. The facility houses [REDACTED]. On the first day of the inspection, [REDACTED]

The single-story facility consists of individual cells, multi-bed cells and 32-bed or 100-bed dormitories. The 100-bed dormitories are supervised by direct supervision. The housing units provide adequate open space and detainees were observed socializing in the dayrooms and watching television. The atmosphere was relaxed and detainees were observed interacting with facility staff and other detainees. Detainees approached the inspection team without hesitation.

The Language Line was used to conduct nine interviews of LEP detainees from Mexico, Eritrea, Sri Lanka, India, South Korea and Cameroon. During one of the LEP interviews a detainee stated that she did not feel safe in the facility. She was questioned further and it was determined that she had been assaulted by another detainee in her housing unit. The assistant warden was notified and he stated that he was aware of the incident and that it was still under investigation and that the detainees involved had been separated. He advised the inspector that the detainee’s concerns would be addressed. Another detainee complained that she had to wait four months for medical care. The medical SME checked her medical record and determined that she has been seen several times in a timely manner. No other complaints were voiced by the LEP detainees. Most of them requested information regarding their cases and they were advised to submit a request to ICE or to speak to the officers during their weekly visits.

The inspection team visited the housing units several times during the inspection and conducted numerous group and confidential interviews. No detainees expressed any concerns about their safety. One detainee com-



plained that the meals did not contain all of the items listed on the posted menu. The trays were checked by the Safety SME and compared to the approved menus and were found to be complete. Several detainees complained about not receiving their prescribed medication. One detainee stated that he was told that the medication was not available. The Medical SME followed-up on the complaints and was told that often the detainees did not get up in time to receive their medication or had refused the medication. The SME was unable to substantiate this information due to problems with the CorrecTek electronic records system.

Several detainees complained that hygiene items were only passed out twice a week and if they were not in the housing unit at the time they had to wait several days to receive the items. This was brought to the attention of the unit managers who stated that the hygiene items would be made available in the housing units to ensure that all detainees had access to them. The detainees stated that the telephones were working and that they were permitted to use the law library upon request.

Sanitation throughout the facility was observed to be good. Overall, the atmosphere at the facility was observed to be generally calm with no obvious indicators of high stress.

The facility does not charge co-pays for medical, mental health or dental care. Health services are provided by LaSalle Corrections. Food service is provided by Trinity Services.

Areas of Concern/Significant Observations

The inspection team identified four (4) deficient priority components, as below:

Special Management Units

Component #17- A health care provider visits every detainee in an SMU at least once daily, and detainees are provided any medications prescribed for them.

Detainees will have access to regularly scheduled sick call regardless of housing assignment.

Any action taken is documented in a separate logbook, and the medical visit is recorded on the detainee's SMU Housing Record (Form I-888)

Finding: A review of SMU housing unit records does not indicate that the health care provider visits are being conducted.

Recommendation: Health care providers need to visit each detainee daily and document the visit on the detainee's SMU housing record.

Food Service

Component #10- Before and during the display, service and transportation of food, sanitary guidelines are observed, with hot foods maintained at a temperature of at least 140 F degrees (120 degrees in food trays) and foods that require refrigeration maintained at 41 F degrees or below.

Finding: A review of documentation revealed that the temperatures of both hot and cold food are not consistently taken and recorded to ensure that they are prepared and maintained at the required temperatures as defined in the Standard.

Recommendation: Food service staff should take and document all temperatures on their current production logs.



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Component #39-Staff shall check refrigerator and water temperatures daily and record the results. The FSA or designee will verify and document requirements of food and equipment temperatures.

The FSA or CS shall inspect food service areas at least weekly.

An independent, external inspector shall conduct annual inspections to ensure that the food service facilities and equipment meet governmental health and safety codes.

Finding: Temperatures of refrigerators and freezers are not documented daily in accordance with the Standard. Additionally, dishwasher temperatures are not recorded after every meal.

Recommendation: Food service staff should ensure that all temperatures are documented daily.

Transfer of Detainees

Component #7-Prior to transfer, medical personnel shall provide the transporting officers instructions and, if applicable, medication(s) for the detainee's care in transit. Detainees shall be transferred with, at a minimum, 7 days' worth of prescription medications (TB medications, a 15-day supply) to ensure continuity of care throughout the transfer and subsequent intake process.

Medications shall be:

- Placed in a property envelope with the detainee's name and A-number on it,
- Accompany the transfer, and
- If unused, be turned over to an officer at the receiving Field Office.

Finding: During the past month three transfers had to be postponed due to the required medication not being available to accompany the detainees.

Recommendation: The facility should ensure that medication is available to accompany detainees to ensure continuity of care throughout the transfer and subsequent intake process.

Recommended Rating and Justification

The Lead Compliance Inspector recommends that the facility receive a rating of Meets Standards. The facility complies with the ICE Performance Based National Detention Standards (PBNDS) 2008 for Over 72 hour facilities. No (0) standards were found Does Not Meet Standards and one (1) standard was Not Applicable (N/A). All remaining forty (40) 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. An out brief was conducted at the facility and in addition to the entire Nakamoto Group, Inc. Inspection Team, the following were present:



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

[Redacted], Lead Compliance Inspector June 14, 2018
Printed Name of LCI Date