



January 25, 2019

TO: [REDACTED]  
Assistant Director for Detention Management

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

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

The Nakamoto Group, Inc. performed an annual/180-day reinspection for compliance with the ICE Performance-Based National Detention Standards (PBNDS 2011) of the Tulsa County Jail (David L. Moss Criminal Justice Center) in Tulsa, OK, during the period of January 23-25, 2019. 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 180-day reinspection which is performed to determine overall compliance with the ICE PBNDS 2011 for Over 72 hour facilities. The facility received a previous rating of Does Not Meet Standards during the June 2018 annual inspection. A Technical Assistance Review (T.A.R.) was performed in September 2018.

### **Inspection Summary**

The Tulsa County Jail is currently accredited by:

- The American Correctional Association (ACA) - Yes
- The National Commission on Correctional Health Care (NCCHC) - Yes
- 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 2018 PBNDS 2011 T.A.R. and the 2019 PBNDS 2011 180-day reinspection:



<b>2018 T.A.R.</b>	
Meets Standard	40
Does Not Meet Standard	0
Repeat Finding	0
Not Applicable	2

<b>2019 180-Day Reinspection</b>	
Meets Standard	39
Does Not Meet Standard	1
Repeat Finding	0
Not Applicable	2

The inspection team identified thirty-two (32) deficient components in the following fourteen (14) standards:

- Custody Classification System - 1, which is a Priority component
- Funds and Personal Property - 1
- Special Management Unit - 7, one of which is a Priority component
- Staff-Detainee Communication - 2
- Disciplinary System - 1
- Food Service - 7
- Hunger Strikes - 1
- Personal Hygiene - 2
- Significant Self-Harm and Suicide Prevention and Intervention - 2, one of which is a Priority component
- Correspondence and Other Mail - 1
- Recreation - 3, two of which are Priority components
- Visitation - 1, which is a Priority component
- Detainee Handbook - 1, which is a Priority component
- Staff Training - 2

### Facility Snapshot/Description

The Tulsa County Jail is owned by Tulsa County and operated by the Tulsa County Sheriff's Department.

[REDACTED]

The facility houses local non-ICE detainee juveniles but does not house any juvenile detainees for ICE. Juvenile detainees are not comingled with adult detainees.

[REDACTED]

The Tulsa County Jail is a single level design although housing units have a lower and upper tier. The facility was constructed in 1999; four additional housing units were constructed and opened in 2017. The facility has 24 housing units; nineteen for general population, three restrictive housing units and two for detainees with mental health needs. Both cell and dormitory beds are available, all of which are directly supervised by officers stationed in the housing units. Each general population housing unit has a dayroom which contains at least one television; telephones; two kiosks for ordering commissary, communicating with ICE, submitting sick call requests and filing grievances; and video visitation monitors. Recently, electronic tablets were placed in the housing units, at a ratio of one tablet for every three detainees, which have similar functionality to the kiosks. Per the facility's information technology specialist, ICE detainees will be able to access LexisNexis on the tablets. Additionally, an outdoor recreation yard is attached to each general population housing unit. Male ICE detainees are not comingled with non-ICE detainees. Female ICE detainees are comingled with other detainees of similar classification levels. The entire facility is climate controlled.

[REDACTED]



All ICE detainees were removed from the facility as of 1/17/2019. Consequently, there were no ICE detainees housed at the facility during the inspection. Sixty ICE detainees, twelve females and 48 males, were scheduled to arrive on the last day of the inspection, 1/25/2019. The Security SME observed the first stages of in-processing for some of the female detainees as they arrived at the facility.

With the exception of the food service department and restrictive housing unit cells, sanitation throughout the facility was observed to be average. Sanitation and cleanliness in the food service department and the restrictive housing units was observed to be below average.

The facility does not charge co-pays for medical, mental health or dental care. Health services are provided by Turn-Key Medical Inc.

Food service operations are contracted with Aramark. However, the county has terminated the contract with Aramark and a new contractor, Summit Food Services, is scheduled to begin providing food service operations on 2/1/2019.

Detainee telephone services are provided via a contract with Correct Solutions Group. Video visitation kiosks and monitors are provided by HomeWAV.

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

#### **Food Service Standard - Rated Does Not Meet Standard**

*Policy:* This detention standard ensures that detainees are provided a nutritionally balanced diet that is prepared and presented in a sanitary and hygienic food service operation.

*Finding:* Although no Priority components are rated Does Not Meet Standard in the Food Service checklist, seven non-priority components are rated Does Not Meet Standard; six of which are due to very poor sanitation conditions. Cleaning schedules from manufacturers for various pieces of equipment were not followed. The general cleaning schedule for the kitchen was not posted or followed. Restroom facilities were littered with trash, no paper towels, and the walls and floors were dirty; standing water throughout kitchen; evidence of cockroaches and fruit flies were observed; walls throughout kitchen were dirty; bakery equipment was caked with dough and dust; back sides of steam kettles were covered in grease; walk-in coolers and freezer floors and walls were dirty; food was stored under dripping condensate in coolers; left-overs were not labeled; pots and pans were encrusted with baked on grease and food and the entire kitchen needed a deep cleaning. Many of these issues were identified during the Technical Assistance Review (T.A.R) in September 2018. Also, a recent inspection by the Tulsa Health Department, the governing health inspection authority for the Tulsa County Jail, found eleven repeat violations; all of which were related to sanitation. Of note is that the Tulsa County Jail has terminated its contract with the current food service provider and the new contract with Summit Food Service takes effect 2/1/2019.

*Recommendation:* The food service department should be thoroughly cleaned in order to meet sanitary conditions required by the Standard. Manufacturers' cleaning schedules and a general cleaning schedule should be followed in order to maintain sanitary conditions in the food service department.



## Priority Components Rated Does Not Meet Standard

### **Custody Classification System**

**Component #7-** Housing assignments are based on classification level. Low custody detainees may not be commingled with high custody.

*Finding:* ICE detainees are classified by ICE using an objective classification tool. Facility personnel assign housing for ICE detainees based on the ICE classification. A housing roster for 11/27/2018 was reviewed which indicated that three ICE detainees, one classified as medium-low custody and two classified as low custody, were assigned to the same housing unit as ICE detainees classified as high custody. It was discovered that the detainee classified as medium-low on the housing roster had previously been reclassified to high custody. One low custody detainee had previously requested protective custody. After determining that he had an issue with another low custody detainee in the housing unit to which he was assigned, the detainee was moved to the other housing unit which housed high custody detainees. The OIC states that the local SDDO approved this move. The SDDO stated that was possible but that he could not recall the request and/or approval with certainty. There was no documentation regarding the OIC seeking or the SDDO approving the move.

Documentation found in the record for the other low custody detainee housed with high custody detainees on 11/27/2018 indicated that the detainee had threatened staff and engaged in other disruptive behavior in the low custody housing unit. A note on this record indicates that the SDDO was contacted and approved the move to the other housing unit. The detainee was not formally charged with a disciplinary offense and there is no record that the detainee's classification level was changed by ICE.

*Recommendation:* Detainees should be housed based on the classification custody designation determined by ICE. ICE detainees classified as low custody should not be housed or commingled with high custody detainees.

### **Special Management Units**

**Component #11-** There are implemented written procedures for the regular review of all detainees in Administrative Segregation. A supervisor conducts a review within 72 hours of the detainee's placement in Administrative Segregation to determine whether segregation is still warranted. The review includes an interview with the detainee, and a written record is made of the decision and the justification. If a detainee is segregated for the detainee's protection, but not at the detainee's request, continued detention requires the authorizing signature of the facility administrator or assistant facility administrator. When a detainee has spent seven days in Administrative Segregation, and every week thereafter for the first thirty days and at least every ten days thereafter, a supervisor conducts a similar review, including an interview with the detainee, and documents the decision and justification.

*Finding:* Effective 1/3/2019, policy was revised to meet the requirements of the standard. However, the policy was not in effect during the inspection period, 9/20/2018 through 1/3/2019. Two detainees were housed in the SMU for several days during the inspection period.

*Recommendation:* Adhere to the requirements of the revised facility policy which was implemented on 1/3/2019.



## Significant Self-Harm and Suicide Prevention and Intervention

**Component #2-** All facility staff who interact with and/or are responsible for detainees are trained, during orientation and at least annually on the facility's Suicide Prevention and Intervention Program, to include:

- Why the environments of detention facilities are conducive to suicidal behavior,
- Standard first aid training, cardiopulmonary resuscitation (CPR) training and training in the use of emergency equipment,
- Liability issues associated with detainee suicide,
- Recognizing verbal and behavioral cues that indicate potential suicide,
- Demographic, cultural, and precipitating factors of suicidal behavior,
- Responding to suicidal and depressed detainees,
- Communication between correctional and health care personnel,
- Necessary referral procedures,
- Housing observation and suicide-watch procedures,
- Follow-up monitoring of detainees who have attempted suicide, and
- Reporting and written documentation procedures.

*Finding:* Not all medical staff received annual training in 2018 on the facility's Suicide Prevention and Intervention Program as required by the Standard.

*Recommendation:* All medical staff should receive annual training on the facility's Suicide Prevention and Intervention Program as required by the Standard.

## Recreation

**Component #3-** 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:* Only ICE detainees in the restricted housing unit have access to clothing appropriate for weather conditions. The facility received an exception to this requirement in the IGSA facility contract between the Department of Homeland Security and the Tulsa County Board of County Commissioners on behalf of the Tulsa County Sheriff which was approved on 5/8/2017. However, the facility does not have a waiver from ICE regarding the exception to the Standard.

*Recommendation:* Absent a waiver, all detainees should have access to clothing appropriate for weather conditions for outdoor recreation.

**Component #12-** Recreation for detainees housed in the SMU shall be separate from the general population. Detainees in the SMU for administrative reasons shall be offered at least one hour of exercise opportunities per day, seven days a week, outside their cells, and outdoors when practicable, and scheduled at a reasonable time. Detainees in the SMU for disciplinary reasons shall be offered at least one hour of recreation per day, five days per week, outside their cells, and outdoors when practicable, and scheduled at a reasonable time. Where cover is not provided to mitigate inclement weather, detainees shall be provided weather-appropriate equipment and attire.

*Finding:* Subsequent to the Technical Assistance Review, T.A.R., in September 2018, the facility devel-



oped policy which meets the requirements of the standard as it pertains to the number of hours out of cell offered for exercise opportunities. However, when it was not practicable to offer outdoor recreation due to inclement weather, appropriate indoor exercise opportunities were not provided. Additionally, the facility has not been providing weather-appropriate equipment and attire. During the inspection, the OIC revised policy to provide for appropriate indoor exercise opportunities when outdoor recreation is not practicable. Additionally, weather appropriate clothing will be provided for ICE detainees housed in the restrictive housing unit (SMU)

*Recommendation:* Adhere to the requirements of the revised facility policy implemented on 1/3/2019 which includes the provision of appropriate indoor exercise opportunities and weather appropriate clothing.

## Visitation

**Component #9-** The facility's written rules shall specify time limits for visits. Visits should be for the maximum period practicable but not less than one hour with special consideration given to family circumstances and individuals who have traveled long distances.

*Finding:* The facility revised policy on the first day of the inspection, 1/23/2019, to meet the requirements of the standard. On-site video visitation will be permitted for a minimum of one hour on Friday, Saturday, Sunday and holidays. There are no fees for on-site video visitation. Special consideration is given to family circumstances and individuals who have traveled long distances. The policy was not in effect during the inspection period, 9/20/2018 through 1/23/2019.

*Recommendation:* Adhere to the requirements of the revised facility policy implemented on 1/23/2019 which provides for a minimum of one hour of visitation on Friday, Saturday, Sunday and holidays.

## Detainee Handbook

**Component #7-** The detainee handbook (local supplement) address the following issues:

- The rules, regulations, policies and procedures with which every detainee must comply
- Detainee rights and responsibilities
- Procedures for requesting interpretive services for essential communication
- The facility's services and programs
- The facility's classification system
- Medical care
- The facility's zero tolerance policy for all forms of sexual abuse and assault
- The facility's rules of conduct and prohibited acts, the disciplinary scale, the sanctions imposed for violations of the rules, the disciplinary process, the procedure for appealing disciplinary findings, and detainees' rights in the disciplinary system (as required by Standard 3.1)
- Information about the facility's grievance system, including medical grievances (as required by Standard 6.2)
- The facility's policies on telephone access and on the monitoring of telephone calls, if telephone calls are monitored
- The facility's visitation rules and hours
- Rules and procedures governing access to the law library (as required by Standard 6.3) and to legal counsel
- Content and procedures of the facility's rules on legal rights group presentations, and the availability of legal orientation programs
- The facility's rules on correspondence and other mail (including information on correspondence



- procedures as required by Standard 5.1)
- The facility’s policies and procedures related to personal property (as required by Standard 2.5)
- The facility’s marriage request procedures
- Contact information for the ICE/ERO Field Office and the scheduled hours and days that ICE/ERO staff is available to be contacted by detainees at the facility
- Procedures to submit written questions, requests, or concerns to ICE/ERO staff, as well as the availability of assistance to prepare such requests.

*Finding:* All of the items listed in this component are now addressed in the site-specific local supplement handbook which will be provided to ICE detainees. This handbook has not been provided to ICE detainees during the inspection period, 9/20/2018 through 1/24/2019. However, the handbook is ready and available for immediate distribution in English. The Spanish version will be available within thirty days. Twelve female ICE detainees arrived at the facility on the last day of the inspection, 1/25/2019, and the English version of the newly developed site-specific local supplement was provided to the detainees.

*Recommendation:* The new site-specific local supplement handbook should be provided to each newly arriving ICE detainee. The facility should obtain the Spanish version of the new site-specific local supplement handbook and begin distribution as soon as is practicable.

**Recommended Rating and Justification**

The Lead Compliance Inspector recommends that the facility receive a rating of Does Not Meet Standards. The facility does not comply with the ICE Performance-Based National Detention Standards (PBNDS) 2011. Seven Priority components were rated Does Not Meet Standard. One standard was found Does Not Meet Standard and two (2) standards were Not Applicable (N/A). All remaining thirty-nine (39) 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-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

January 25, 2019  
Date