



**U.S. Department of Homeland Security**  
Immigration and Customs Enforcement  
Office of Professional Responsibility  
Inspections and Detention Oversight Division  
Washington, DC 20536-5501

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## Office of Detention Oversight Compliance Inspection

Enforcement and Removal Operations  
ERO Boston Field Office  
Bristol County Detention Center  
North Dartmouth, MA

July 11-14, 2016

**COMPLIANCE INSPECTION  
for the  
BRISTOL COUNTY DETENTION CENTER  
North Dartmouth, Massachusetts**

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## EXECUTIVE SUMMARY

The Office of Detention Oversight (ODO) conducted a compliance inspection of the Bristol County Detention Center (BCDC), in North Dartmouth, Massachusetts, from July 11 to 14, 2016.<sup>1</sup> BCDC opened in 1990 and is owned by the State of Massachusetts and operated by the Bristol County Sheriff's Office. The Office of Enforcement and Removal Operations (ERO) began housing detainees at BCDC in 2001 pursuant to a contract, under the oversight of ERO's Field Office Director (FOD) in Boston.

ERO staff members are not assigned to the facility. An ERO Detention Services Manager is assigned to the facility on a part-time basis (with assignments at other ERO locations as well). A Superintendent is responsible for oversight of daily facility operations and is supported by (b) (7) personnel. Medical care is provided by Correctional Psychiatric Services Healthcare (CPS). BCDC staff provides food services. The facility held no external accreditation at the time of the inspection.

| Capacity and Population Statistics            | Quantity |
|---|----------|
| ICE Detainee Bed Capacity <sup>2</sup>        | 238      |
| Average ICE Detainee Population <sup>3</sup>  | 114      |
| Male Detainee Population (as of 07/12/2016)   | 119      |
| Female Detainee Population (as of 07/12/2016) | 12       |

### OVERALL FINDINGS

In January 2013, ODO conducted an inspection of the BCDC under the Performance-Based National Detention Standards (PBNDS) 2008, reviewing the facility's compliance with 22 standards and finding the facility compliant with 15 standards.<sup>5</sup> There were a total of ten deficiencies in the remaining seven standards.

| Inspection Results Compared    | FY2013 (PBNDS 2008) | FY2016 (PBNDS 2008) |
|--------------------------------|---------------------|---------------------|
| Standards Reviewed             | 22                  | 15                  |
| Deficient Standards            | 7                   | 4                   |
| Overall Number of Deficiencies | 10                  | 8                   |
| Deficient Priority Components  | N/A <sup>4</sup>    | 1                   |
| Corrective Actions Initiated   | N/A                 | 3                   |

In FY2016, ODO conducted an inspection of BCDC under PBNDS 2008. ODO reviewed the facility's compliance with 15 standards and found the facility compliant with 11 standards. ODO found eight deficiencies in the remaining four standards, one of which was a priority

<sup>1</sup> Male and female detainees with low, medium-low, medium-high, and high security classification levels are detained at the facility for longer than 72 hours.

<sup>2</sup> Data Source: ERO Facility List Report as of July 13, 2016.

<sup>3</sup> *Ibid.*

<sup>4</sup> ICE identified and issued Priority Components for PBNDS 2008 in February 2013.

<sup>5</sup> At the time of the 2013 inspection, BCDC operated under the name Bristol County House of Correction and Jail.

component.<sup>6</sup> Finally, ODO identified three instances where the facility initiated corrective action during the course of the inspection.<sup>7</sup>

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<sup>6</sup> Male ICE detainees are strip searched prior to assignment to the facility's special management unit (SMU). ODO noted the deficiency under the "Searches of Detainees" section of this report.

<sup>7</sup> Corrective actions, where immediately implemented, best practices and ODO recommendations, as applicable, have been identified in the *Inspection Findings* section and annotated with a "C," "BP," or "R," respectively.

## FINDINGS BY PBNDS 2008 MAJOR CATEGORIES

| PBNDS 2008 STANDARDS INSPECTED <sup>8</sup>          | DEFICIENCIES |
|--|--------------|
| <b>Part 1 - Safety</b>                               |              |
| Environmental Health and Safety                      | 0            |
| <b>Sub-Total</b>                                     | <b>0</b>     |
| <b>Part 2 - Security</b>                             |              |
| Admission and Release                                | 0            |
| Classification System                                | 0            |
| Funds and Personal Property                          | 0            |
| Searches of Detainees                                | 1            |
| Sexual Abuse and Assault Prevention and Intervention | 0            |
| Special Management Units                             | 2            |
| Staff-Detainee Communication                         | 1            |
| Use of Force and Restraints                          | 0            |
| <b>Sub-Total</b>                                     | <b>4</b>     |
| <b>Part 4 - Care</b>                                 |              |
| Food Service   | 0            |
| Medical Care   | 2            |
| Suicide Prevention and Intervention                  | 0            |
| <b>Sub-Total</b>                                     | <b>2</b>     |
| <b>Part 5 - Activities</b>                           |              |
| Telephone Access                                     | 0            |
| <b>Sub-Total</b>                                     | <b>0</b>     |
| <b>Part 6 - Justice</b>                              |              |
| Detainee Handbook <sup>9</sup>                       | 2            |
| Grievance System                                     | 0            |
| Law Libraries and Legal Materials                    | 0            |
| <b>Sub-Total</b>                                     | <b>2</b>     |
| <b>Total Deficiencies</b>                            | <b>8</b>     |

<sup>8</sup> For greater detail on ODO's findings, see the *Inspection Findings* section of this report.

<sup>9</sup> Priority component. See section on Searches of Detainees.

## COMPLIANCE INSPECTION PROCESS

Every fiscal year, ODO, a unit within U.S. Immigration and Customs Enforcement's (ICE) Office of Professional Responsibility (OPR), conducts compliance inspections at detention facilities in which detainees are accommodated for periods in excess of 72 hours and with an average daily population greater than ten to determine compliance with the ICE National Detention Standards (NDS) 2000, or the Performance-Based National Detention Standards (PBNDS) 2008 or 2011, as applicable.

During the compliance inspection, ODO reviews each facility's compliance with those detention standards that directly affect detainee health, safety, and/or well-being.<sup>10</sup> Any violation of written policy specifically linked to ICE detention standards, ICE policies, or operational procedures that ODO identifies is noted as a deficiency. ODO also highlights any deficiencies found involving those standards that ICE has designated under either the PBNDS 2008 or 2011, to be "priority components."<sup>11</sup> Priority components have been selected from across a range of detention standards based on their critical importance to facility security and/or the health and safety, legal rights, and quality of life of detainees in ICE custody.

Immediately following an inspection, ODO hosts a closeout briefing in person with both facility and ERO field office management to discuss their preliminary findings, which are summarized and provided to ERO in a preliminary findings report. Thereafter, ODO provides ERO with a final compliance inspection report to: (i) assist ERO in working with the facility to develop a corrective action plan to resolve identified deficiencies; and (ii) provide senior ICE and ERO leadership with an independent assessment of the overall state of ICE detention facilities. The reports enable senior agency leadership to make decisions on the most appropriate actions for individual detention facilities nationwide.

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<sup>10</sup> ODO reviews the facility's compliance with selected standards in their entirety.

<sup>11</sup> Priority components have not been identified for the NDS.

## DETAINEE RELATIONS

ODO interviewed 26 detainees, each of whom volunteered to participate. None of the detainees made allegations of mistreatment, abuse, or discrimination. The majority of detainees reported being satisfied with facility services, with the exception of the complaints below:

*Environmental Health and Safety:* Three detainees assigned to the same housing unit claimed there were black worms in the showers.

- Action Taken: ODO inspected the shower and sink area with BCDC staff. ODO and BCDC staff observed black worms in one shower and in the area of one sink. BCDC submitted a work order to have the contract exterminator flush the shower and sink drains. The work was not completed prior to the end of the inspection.

*Admission and Release:* Eleven detainees complained that they did not receive a comb or brush at intake nor are they issued replacement personal hygiene products.

Action Taken: ODO reviewed 30 detention files and found that all detainees signed for the initial hygiene kit, which includes: toothbrush, toothpaste, soap/shampoo, deodorant, comb/brush, and feminine hygiene products, as appropriate. ODO interviewed senior facility staff and determined that detainees must submit a detainee request form to receive replacement hygiene supplies. ODO requested that facility staff remind the detainee population of the process to request replacement hygiene items.

*Staff-Detainee Communication:* One detainee complained that he does not know the status of his case because his Deportation Officer (DO) has not been in contact with him and that his personal property was taken from him.

- Action Taken: ODO reviewed the detainee's detention file and found no evidence the detainee had requested to see his DO. At the request of ODO, ERO staff advised the detainee to submit a detainee request asking to speak with his DO. Additionally, ERO staff informed the detainee that his property was inventoried during the ICE intake process at the Burlington sub-office and the detainee's property is being stored at the Burlington sub-office.

*Food Service:* Ten detainees complained that they receive potatoes with nearly every meal; fruit was not being served; the food was stale, and had a foul taste.

- Action Taken: ODO reviewed the cyclical menu and confirmed with the facility Food Service Administrator (FSA) that meals being served are certified by a nutritionist quarterly. The menu was approved by a registered dietician and included a variety of rice, potatoes, pasta and fruits. Additionally, ODO was advised by the FSA that the facility consults with the state-certified nutritionist monthly.

*Food Service:* One detainee complained that her meals were not consistent with a diabetic meal plan.

- Action Taken: ODO confirmed with the Health Services Administrator (HSA) and the FSA that the meals being served to the detainee are a diabetic appropriate diet. BCDC staff conveyed this information to the detainee.

*Medical Care:* One detainee complained that he was not receiving a low sodium diet.

- Action Taken: ODO reviewed the detainee's medical record with the facility's HSA and found that the detainee did not report any medical issues during intake screening or concerns during his physical examination and that his physical examination was normal. The detainee was advised to submit a sick call request for a low sodium diet.

*Medical Care:* One detainee complained that he was not receiving a low sodium diet.

- Action Taken: ODO reviewed the detainee's medical record with the facility's HSA and found that during the detainee's physical examination he requested a low sodium diet and was prescribed a low sodium diet by the facility's nurse practitioner. ODO confirmed with the FSA and HSA that the detainee was receiving a low sodium diet.

*Medical Care:* One detainee believes he has a heart condition for which he is not being treated.

- Action Taken: ODO's review of the detainee's medical record with the facility HSA and found extensive documentation of multiple sick call requests, as well as multiple evaluations by the facility medical provider and outside consultations for cardiac evaluation. Additionally, the detainee had been seen by the facility mental health provider to determine if the cardiac issue could be anxiety related. To date, all medical evaluations have shown the detainee does not have an existing cardiac condition. The detainee was scheduled for a follow-up evaluation with the facility mental health provider on July 14, 2016.

*Medical Care:* One detainee complained that he had requested a medical appointment to receive a medical diet and diagnose a pain in his left hand; however, the detainee claimed he was not scheduled for a medical appointment.

- Action Taken: ODO reviewed the detainee's medical record with the HSA and found that the detainee had not submitted a sick call request for a medical diet or the pain in his left hand. ERO staff advised the detainee to submit a sick call request to be evaluated for his medical diet request and for the pain in his left hand.

*Detainee Handbook:* Eleven detainees complained they did not receive the ICE National Detainee Handbook.

- Action Taken: ODO reviewed 30 detainees' detention files and found that all detainees received and signed for the facility handbook; however, the ICE National Detainee Handbook was not being issued. ERO staff provided additional copies of the ICE National Detainee Handbook to the housing units, and BCDC began issuing the handbook to all detainees at intake.



*Strip Search:* Nine detainees complained they were strip searched during the intake process.

Action Taken: ODO reviewed the detention files of the nine detainees and also reviewed the facility intake strip search log for the 12 months preceding the inspection. ODO determined none of these detainees were strip searched during the initial intake process. In fact, no detainees were strip searched during the intake process over this 12-month period. However, one of the complaining detainees was strip searched prior to placement in the facility's disciplinary segregation housing unit. ODO interviewed senior staff at the facility and determined that male detainees are routinely strip searched prior to placement in the facility's special management units, either disciplinary or administrative segregation. See "Searches of Detainees" for further information regarding this finding.

# INSPECTION FINDINGS

## SECURITY

### SEARCHES OF DETAINEES (SD)

ODO reviewed eight detainee files during inspection of the Special Management Unit standard. Seven of the files were for detainees assigned to disciplinary segregation and one file was for a detainee assigned to administrative segregation. ODO found a detainee strip search report form in each file documenting “Inmate strip searched prior to placement in the SMU area.” Specific, articulated suspicion justifying each strip search was not documented. ODO interviewed the facility’s Deputy Superintendent and Major who both confirmed that all male detainees are strip searched upon initial admission to the Special Management Units (**Deficiency SD-1**<sup>12</sup>).

### SPECIAL MANAGEMENT UNITS (SMU)

ODO reviewed the file of the one detainee placed in administrative segregation for 30 consecutive days during the preceding year and found that although an administrative segregation order was issued, and required status reviews were documented on Form I-885, “Administrative Segregation Review,” the detainee was not provided a copy of the reviewing officer’s decision and the basis for his or her finding (**Deficiency SMU-1**<sup>13</sup>). BCDC staff confirmed detainees are not provided with the review form, though staff verbally inform the detainee of the review decision.

ODO also reviewed the detention file of one of the detainees who was serving a ten day disciplinary segregation sanction during the inspection, and the detention files of six detainees who were previously housed in disciplinary segregation. ODO found none of the detainees were provided a copy of the initial decision and justification for remaining in segregation after each required status review (**Deficiency SMU-2**<sup>14</sup>). ODO confirmed disciplinary segregation orders were in the detention files as well as documentation showing the required segregation reviews were completed on time.

### STAFF-DETAINEE COMMUNICATION (SDC)

ODO reviewed staff detainee communication logs for the six months preceding the inspection, conducted interviews with ERO staff and observed ERO staff conducting staff-detainee communications at the facility. ODO determined that ERO staff makes scheduled and

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<sup>12</sup> “Staff may conduct a strip search only where there is reasonable suspicion that contraband may be concealed on the person....” See ICE PBNDS 2008, Standard, Searches of Detainees, Section (V)(D)(2)(2).

<sup>13</sup> “A copy of the decision and justification for each review shall be given to the detainee, unless, in exceptional circumstances, this provision would jeopardize the facility’s security.” See ICE PBNDS 2008, Standard, Special Management Units, Section (V)(C)(3)(e).

<sup>14</sup> “At each formal review, the detainee shall be given a written copy of the reviewing officer’s decision and the basis for his or her finding, unless it would result in a compromise of institutional security.” See ICE PBNDS 2008, Standard, Special Management Units, Section (V)(D)(3)(b).

unscheduled visits to the facility; however, ERO staff did not announce their presence when entering the housing units (**Deficiency SDC-1<sup>15</sup>**).

## **CARE**

### **MEDICAL CARE (MC)**

ODO reviewed 25 medical records and found that the initial dental screening examinations were not completed within 14 days by the on-site dentist (**Deficiency MC-1<sup>16</sup>**).

*Corrective Action:* The facility initiated corrective action approximately 30 days before ODO's inspection in response to a prior ERO inspection finding (**C-1**).

ODO reviewed 25 medical records of which ten were mental health records. ODO found that in six of the ten mental health records reviewed the facility failed to obtain informed consent from detainees receiving psychotropic medications (**Deficiency MC-2<sup>17</sup>**).

## **JUSTICE**

### **DETAINEE HANDBOOK (DH)**

ODO reviewed 30 detention files, interviewed detainees and determined the facility does not provide detainees with the ICE National Detainee Handbook (**Deficiency DH-1<sup>18</sup>**).

*Corrective Action:* The facility initiated corrective action by providing copies of the ICE National Detainee Handbook to the housing units and to new detainees during the intake process (**C-2**).

ODO also determined the facility does not provide employees with the ICE National Detainee Handbook (**Deficiency DH-2<sup>19</sup>**).

*Corrective Action:* The facility initiated corrective action by providing copies of the ICE National Detainee Handbook to facility employees. Facility staff confirmed that going

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<sup>15</sup> "The Field Office Director shall develop written schedules and procedures for weekly contact visits by ICE/DRO Field Office staff and ensure the schedules are posted in detainee living and other appropriate areas. During such contact visits, ICE/DRO staff shall: Announce their presence so ICE/DRO detainees know they are there...." See ICE PBNDS 2008, Standard, Staff-Detainee Communication, Section (V)(A)(2)(b).

<sup>16</sup> "An initial dental screening exam shall be performed within 14 days of the detainee's arrival." See ICE PBNDS 2008, Standard, Medical Care, Section (V)(M).

<sup>17</sup> "Upon admission at the facility, documented informed consent will be obtained for the provision of health care services. For any additional procedure, a separate documented informed consent will be obtained." See ICE PBNDS 2008, Standard, Medical Care, Section (V)(T).

<sup>18</sup> "Upon admission to a facility, as part of the orientation program, each detainee shall be provided a copy of the ICE National Detainee Handbook...." See ICE PBNDS 2008, Standard, Detainee Handbook, Section (V)(4). **This is a priority component.**

<sup>19</sup> "The facility administrator shall provide a copy of the ICE National Detainee Handbook and the local supplement to every staff member who has contact with detainees, and cover its contents in initial and annual staff training." See ICE PBNDS 2008, Standard, Detainee Handbook, Section (V)(7).

forward employees would receive the handbook during the initial employee in-processing phase and annual employee training (C-3).