



U.S. Department of Homeland Security

Immigration and Customs Enforcement

Office of Professional Responsibility

Inspections and Detention Oversight Division

Washington, DC 20536-5501

**Office of Detention Oversight
Compliance Inspection**

Enforcement and Removal Operations

ERO Buffalo Office

Clinton County Jail

Plattsburgh, New York

November 15-17, 2016

**COMPLIANCE INSPECTION
for the
CLINTON COUNTY JAIL
PLATTSBURGH, NEW YORK**

TABLE OF CONTENTS

EXECUTIVE SUMMARY

Executive Summary..... 1
Overall Findings..... 2
Findings by National Detention Standard (NDS) 2000 Major Categories..... 3

COMPLIANCE INSPECTION PROCESS 4

DETAINEE RELATIONS..... 5

COMPLIANCE INSPECTION FINDINGS

DETAINEE SERVICES

Access to Legal Material..... 8
Admission and Release..... 8
Detainee Classification System..... 8
Detainee Grievance Procedures 9
Detainee Handbook 9
Food Service 10
Funds and Personal Property..... 10
Staff-Detainee Communication..... 11
Telephone Access..... 12

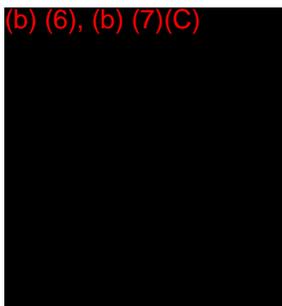
SECURITY AND CONTROL

Environmental Health and Safety..... 12
Special Management Unit (Disciplinary Segregation)..... 13
Use of Force 14

HEALTH SERVICES

Medical Care..... 14

COMPLIANCE INSPECTION TEAM MEMBERS



Lead Inspections and Compliance Specialist	ODO
Inspections and Compliance Specialist	ODO
Inspections and Compliance Specialist	ODO
Contractor	Creative Corrections

EXECUTIVE SUMMARY

The Office of Detention Oversight (ODO) conducted a compliance inspection of the Clinton County Jail (CCJ), in Plattsburgh NY, from November 15 to 17, 2016.¹ CCJ opened in 1989 and is owned and operated by the Clinton County Sheriff's Department. The Office of Enforcement and Removal Operations (ERO) began housing detainees at CCJ in 1991 pursuant to a United States Marshals Service (USMS) Intergovernmental Agreement (IGA), under the oversight of ERO's Field Office Director (FOD) in Buffalo.

ERO staff members are not assigned to the facility; neither is an ERO Detention Services Manager. A CCJ Major is responsible for oversight of daily facility operations and is supported by (b) personnel. The CCJ provides food and medical services. The facility held no accreditations at the time of the inspection. The CCJ is not contractually obligated to comply with the ICE Performance-Based National Detention Standards (PBNDS) 2011, Sexual Abuse and Assault Prevention and Intervention (SAAPI) standard and has made minimal efforts to comply.²

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity ³	13
Average ICE Detainee Population ⁴	14
Male Detainee Population (as of 11/15/2016)	2
Female Detainee Population (as of 11/15/2016)	22

¹ Male and female detainees with low, medium low, medium high and high security classifications levels are detained at the facility for longer than 72 hours.

² The Clinton County, *Non-Discrimination and Anti-Harassment Policy*, revised December 2014, applies to Clinton County employees. The facility *Inmate Handbook Rules/Regulations*, updated May 26, 2016, lacks a "zero-tolerance" statement pertaining to sexual abuse or assault in the facility.

³ Data Source: ERO Facility List Report as of October 3, 2016.

⁴ *Ibid.*

OVERALL FINDINGS

This is ODO’s first inspection of CCJ under the National Detention Standards (NDS) 2000. ODO reviewed the facility’s compliance with 15 standards and found the facility compliant with two standards. ODO found 30 deficiencies in the remaining 13 standards. Finally, ODO identified seven instances where the facility initiated corrective action during the course of the inspection.⁵

Compliance Inspection Results	FY 2016 (NDS 2000)
Standards Reviewed	15
Deficient Standards	13
Overall Number of Deficiencies	30
Corrective Action	7

⁵ Corrective actions immediately implemented have been identified in the *Compliance Inspections Finding* section and annotated with a “C”.

FINDINGS BY NDS 2000 MAJOR CATEGORIES

NDS 2000 STANDARDS INSPECTED ⁶	DEFICIENCIES
Part 1 – Detainee Services	
Access to Legal Material	1
Admission and Release	2
Detainee Classification System	2
Detainee Grievance Procedures	2
Detainee Handbook	1
Food Service	3
Funds and Personal Property	1
Staff-Detainee Communication	4
Telephone Access	2
Sub-Total	18
Part 2 – Security and Control	
Environmental Health and Safety	5
Special Management Unit (Administrative Segregation)	0
Special Management Unit (Disciplinary Segregation)	2
Use of Force	1
Sub-Total	8
Part 3 – Health Services	
Medical Care	4
Suicide Prevention and Intervention	0
Sub-Total	4
Total Deficiencies	30

⁶ For greater detail on ODO's findings, see the *Compliance Inspection Findings* section of this report.

COMPLIANCE INSPECTION PROCESS

Every fiscal year, the Office of Detention Oversight (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.⁷ Any violation of written policy specifically linked to ICE detention standards, ICE policies, or operational procedures that ODO identifies is noted as a deficiency.

Immediately following an inspection, ODO hosts a closeout briefing in person with both facility and ERO field office management to discuss ODO's 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.

⁷ ODO reviews the facility's compliance with selected standards in their entirety.

DETAINEE RELATIONS

ODO interviewed 19 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 below concerns.

Access to Legal Material: Four detainees claimed they were charged to print or make photo copies of legal documents.

- Action Taken: ODO interviewed facility senior staff and found that the facility does in fact charge detainees 25 cents per page to print or make a photo copy. ODO informed the ERO supervisory detention and deportation officer (SDDO) of this issue. The SDDO stated to ODO, prior to the end of the inspection, that ERO was unaware the facility charges for this service and stated he will have each of his deportation officers inform the detainees on their docket that ICE will print and provide photo copies of legal material at no cost.

Admission and Release: Two detainees stated they were strip searched during the intake process and/or upon their return from contact legal visit.

- Action Taken: ODO reviewed each detainee's detention file, as well as the facility policy on detainee searches and interviewed facility senior staff regarding the strip search procedures. ODO determined that CCJ does not maintain a strip search log. However, the facility staff was aware that the two detainees had been strip searched after a contact visit with their respective attorneys. ODO discussed the issue of documenting detainee strip searches with the SDDO.

Detainee Grievance System: One detainee claimed she filed a written grievance after being in a physical altercation with another detainee. Additionally, the detainee claimed she was hit in the head with a remote control and was segregated for 3 days for her involvement in the incident.

- Action Taken: ODO reviewed the detainee's detention file, as well as the facility's grievance and detainee request logs, but ODO was unable to find any documentation to substantiate the detainee's claim. ODO interviewed a facility lieutenant and found that the detainee was only involved in a verbal altercation, *not* a physical altercation, and as a result, was moved to another housing unit to separate her from the other female involved in the altercation.

Detainee Grievance System: Two detainees claimed they submitted grievances regarding the extremely cold temperature in the housing unit.

- Action Taken: ODO reviewed the detainee's detention files and reviewed the facility's grievance and detainee request logs. ODO found no record of a grievance having been filed. ODO also interviewed the facility's grievance officer and determined no documentation was available which could substantiate the detainee's claim. However, ODO interviews with housing unit officers indicated detainees complained about the cold temperature in the housing unit. ODO provided this information to senior facility staff, who then raised the temperatures of the housing units to a more comfortable level. ODO indicated to facility staff that this resolution must be documented accordingly to comply with the Standard.

Detainee Handbook: One detainee claimed (via an interpreter) she did not understand English or Spanish. The detainee stated she only speaks French. The detainee claimed she did not understand the information within the ICE and facility handbooks, orientation materials or any housing unit postings.

- Action Taken: ODO reviewed the detainee's detention file and determined the detainee was issued and signed for the ICE National Detainee Handbook and the facility handbook, both written in English. Facility staff members were aware that the detainee only spoke French and informed ODO they had been communicating with the detainee through another detainee who spoke French and a small amount of English. ODO interviewed the SDDO, who stated he was unaware the detainee does not speak English. As a result, the SDDO is having the facility handbook and ICE National handbook translated into French. The SDDO also stated that, until the French handbooks are completed, he would have his native French speaking deportation officer (DO) come down every Monday to conduct staff-detainee communications with this and other French speaking detainees to ensure they understand key points of the handbooks and to answer any questions they might have.

Medical Care: Two detainees complained they requested to be seen by medical but were not provided any medication when they were seen.

- Action Taken: ODO reviewed the first detainee's medical record and found the detainee submitted a sick call request on November 13, 2016 and was seen by a facility physician's assistant (PA). During the exam the detainee claimed to be very nervous. The medical documentation did not indicate the detainee requested medication or that the detainee had a condition requiring medication. ODO reviewed the second detainee's medical record and found the detainee was seen upon intake and again on September 27, 2016 in response to a sick call request. The detainee was evaluated by a PA and provided appropriate medication for her complaint.

Sexual Assault Awareness and Prevention Intervention/Staff-Detainee Communication: Twelve (12) detainees claimed when officers of the opposite sex enter the housing units they do not announce their presence.

- Action Taken: ODO toured the housing units and interviewed facility staff members regarding their process when officers of the opposite gender enter detainee housing units. During the tour of the facility and observation of daily activities, ODO observed that when staff members of the opposite gender entered the housing units they did not consistently announce themselves. This issue was addressed with the SDDO.

Telephone Access: Two detainees stated they had not been given an opportunity to make calls to their family to inform them of their whereabouts because the money they were admitted with had not been posted to their commissary accounts. When asked, both detainees stated they had not submitted detainee requests to make a phone call or to inquire as to when their funds would be available in their accounts.

- Action Taken: ODO informed the detainee of the local policy for making a facility request. ODO then informed the SDDO and the facility compliance officer of the

detainees concerns. The facility compliance officer pulled up each detainee phone record and showed ODO and the SDDO, where each detainee had been given and conducted five minute phone calls during the admissions process. Additionally, each detainee was provided an opportunity to make a phone call prior to the end of the inspection.

COMPLIANCE INSPECTION FINDINGS

DETAINEE SERVICES

ACCESS TO LEGAL MATERIAL (ALM)

ODO reviewed the facility's detainee handbook and found the handbook provides the rules and procedures governing access to legal materials. However, the scheduled hours for access to the law library and procedures for notifying a facility staff member of missing or damaged material in the law library are not identified (**Deficiency ALM-1**⁸). CCJ is equipped with two mobile law library units containing the most current version of the LexisNexis© software. The mobile units are taken to housing unit classrooms when a detainee requests to use the law library.

Corrective Action: Prior to the completion of the inspection, the facility initiated corrective action by updating the handbook with the scheduled hours of access and the procedures for notifying facility staff of missing or damaged property regarding the law library. These same updates were also posted on each of the law library mobile units (**C-1**).

ADMISSION AND RELEASE (AR)

ODO reviewed the CCJ admissions policy Number B-01, *Admissions/Receiving of Inmates*, dated January 27, 2006, observed the CCJ intake process and conducted interviews with admissions staff members. ODO found the facility does not have an orientation video and the only information detainees receive during the admissions process is the facility handbook and the bundle of postings provided by ERO (**Deficiency AR-1**⁹).

ODO interviewed the SDDO and determined there is no documentation that the CCJ's orientation procedures had been approved by the ERO field office (**Deficiency AR-2**¹⁰).

DETAINEE CLASSIFICATION SYSTEM (DCS)

ODO reviewed CCJ policy Number B-02, *Classification*, dated January 27, 2006 and interviewed the facility's classification staff. ODO found that CCJ uses its own objective classification system in conjunction with documentation provided by ERO to determine custody levels. However, the CCJ classification supervisor does not review the assigned classification levels (**Deficiency DCS-1**¹¹).

⁸ "The detainee handbook or equivalent shall provide detainees with the rules and procedures governing access to legal materials, including the following information: the scheduled hours of access to the law library and the procedure for notifying a designated employee that library material is missing or damaged." See ICE NDS 2000, Standard, Access to Legal Material, Section (III)(Q)(2)(6).

⁹ "The orientation process supported by a video (INS) and handbook shall inform new arrivals about facility operations, programs, and services." See ICE NDS 2000, Standard, Admission and Release, Section (III)(A)(1).

¹⁰ "All facilities shall have a medium to provide INS detainees an orientation to the facility. In IGSA's the INS office of jurisdiction shall approve all orientation procedures." See ICE NDS 2000, Standard, Admission and Release, Section (III)(J).

¹¹ "The first-line supervisor will review and approve each detainee's classification." See ICE NDS 2000, Standard, Detainee Classification System, Section (III)(A)(3).

ODO reviewed the facility handbook and found the handbook does not contain any information on detainee classification levels, the applicable conditions and restrictions of the levels, or the procedures for appealing a detainee's assigned classification level (**Deficiency DCS-2¹²**).

DETAINEE GRIEVANCE PROCEDURES (DGP)

ODO reviewed the facility's handbook and found that it does not inform detainees of the procedure for contacting ERO to appeal the decision of the facility's senior management (**Deficiency DGP-1¹³**).

CCJ maintains a physical grievance log that tracks names, dates, and types of grievances. ODO reviewed the grievance log, detainee files and interviewed the facility grievance coordinator. ODO found that the facility grievance log had no record of an ICE detainee filing a grievance. However, during the course of the inspection several detainees claimed to have submitted grievances and, although the facility acknowledged receiving some of the grievances, no grievances were recorded in the log, the originals were not found in any of the grievance files. No copies were found in any detainee files either (**Deficiency DGP-2¹⁴**).

DETAINEE HANDBOOK (DH)

ODO interviews with detainees, facility staff, and ERO representatives found that translation assistance for the ICE National Detainee Handbook and facility handbook are not consistently provided to detainees with literacy/language limitations, including those detainees who do not understand English or Spanish (**Deficiency DH-1¹⁵**).

FOOD SERVICE (FS)

ODO reviewed the master cycle menus utilized by the CCJ and found that all menus had been updated annually and certified by a registered dietician, with the exception of the master cycle kosher and common fare menus (**Deficiency FS-1¹⁶**).

¹² "The detainee handbook's section on classification will include the following: an explanation of the classification levels, with the conditions and restrictions applicable to each and the procedures by which a detainee may appeal his/her classification." See ICE NDS 2000, Standard, Detainee Classification System, Section (III)(I)(1)(2).

¹³ "The facility shall provide each detainee, upon admittance, a copy of the detainee handbook or equivalent. The grievance section of the detainee handbook will provide notice of the following: 4. The procedures for contacting the INS to appeal the decision of the OIC of a CDF or an IGSA facility." See ICE 2000 NDS, Standard, Detainee Grievance Procedures, Section (III)(G)(4).

¹⁴ "Each facility will devise a method for documenting detainee grievances. At a minimum, the facility will maintain a Detainee Grievance Log. A copy of the grievance will remain in the detainee's detention file for at least three years. The facility will maintain that record for a minimum of three years and subsequently, until the detainee leaves INS custody." See ICE 2000 NDS, Standard, Detainee Grievance Procedures, section (III)(E).

¹⁵ "The handbook will be written in English and translated into Spanish and, if appropriate, into the next most-prevalent language(s) among the facility's detainees. The OIC will provide translation assistance to detainees exhibiting literacy or language problems and those who request it. This may involve translators from the private sector...." See ICE NDS 2000, Standard, Detainee Handbook, Section (III)(E).

¹⁶ "A registered dietitian shall conduct a complete nutritional analysis of every master cycle menu planned by the FSA. Menus must be certified by the dietitian before implementation. If necessary, the FSA shall modify the menu in light of the nutritional analysis, to ensure nutritional adequacy." See ICE NDS 2000, Standard, Food Service, Section (III)(D)(2).

ODO observed the food service operations and interviewed food service staff members. ODO found that the facility does not have a chaplain to approve religious diets (**Deficiency FS-2¹⁷**). However, if a detainee requests a religious diet during intake, the booking officer notifies the cook manager and the diet is initiated. Detainees may request and receive Ramadan, and Passover Seder observance meals. The medical department approves all medical diets and forwards diet requirements to the cook manager. At the time of the ODO inspection, no detainees were receiving medical or religious diets.

ODO reviewed food service documentation provided by the facility's food service manager and interviewed food service staff members. ODO found that all detainee workers were medically cleared to work in the food service department; however, there was no documentation available to verify that all CCJ food service staff members had received pre-employment medical exams (**Deficiency FS-3¹⁸**).

Corrective Action: Prior to the completion of the inspection, the facility initiated corrective action by providing medical exam documentation on all food service staff members (**C-2**).

FUNDS AND PERSONAL PROPERTY (F&PP)

ODO reviewed CCJ's intake policy and the facility handbook. ODO found the facility handbook does not contain the required "notice to detainees" to inform the detainee what property a detainee can and cannot have in their possession, the rules and procedures for storing or mailing property not allowed in their possession, how to request an ICE-certified copy of any identity document, the rules and procedures for storing or mailing property not allowed in their possession, how to claim property upon release, transfer or removal, or the procedures for filing a claim for lost or damaged property (**Deficiency F&PP-1¹⁹**).

STAFF-DETAINEE COMMUNICATION (SDC)

ODO reviewed the facility handbook and found it does not contain the Department of Homeland Security, Office of Inspector General hotline information; nor does the facility have this information posted in all living areas with ICE detainees (**Deficiency SDC-1²⁰**). ODO

¹⁷ "Detainees whose religious beliefs require adherence to particular dietary laws will be referred to the Chaplain. After verifying the religious dietary requirement by reviewing files and/or consulting with local religious representatives, the Chaplain will issue specific written instructions. Special diets will be kept simple, as much like the food served on the main line as possible." See ICE NDS 2000, Standard, Food Service, Section (III)(E)(1).

¹⁸ "All food service personnel (both staff and detainee) shall receive a pre-employment medical examination. The purpose of this examination is to exclude those who have a communicable disease in any transmissible stage or condition..." See ICE NDS 2000, Standard, Food Service, Section (III)(H)(3)(a).

¹⁹ "The detainee handbook or equivalent shall notify the detainees of facility policies and procedures concerning personal property, including: 1. Which items they may retain in their possession; 2. That, upon request, they will be provided an INS-certified copy of any identity documents (passport, birth certificates, etc.) placed in their possession; 3. The rules for storing or mailing property not allowed in their possession; 4. The procedure for claiming property upon release, transfer, or removal; 5. The procedures for filing a claim for lost or damaged property." See ICE NDS 2000, Standard, Funds and Personal Property, Section (III)(J)(1)(2)(3)(4)(5).

²⁰ "Each Field Office Director shall ensure that the attached document regarding the OIG Hotline is conspicuously posted in all units housing ICE detainees. This applies to all Service Processing Center, Contract Detention Facilities and Inter-Governmental Service Agreement facilities. The OIG Hotline Information is to be included in the detainee handbooks in each of the aforementioned locations." See Change Notice: NDS—Staff-Detainee Communication Standard, dated June 15, 2007.

interviewed the SDDO and found that ICE provides each detainee with an informational packet upon admission to the facility, which contains the following required postings: consulate phone number list, detainee interview/visitation worksheet, Lexis Nexis quick reference guide for the law library, a legal advice notice, the DHS Hotline information posting, detainee alternatives information posting, online detainee locator information and privacy sheet, ICE Detainee Reporting Information Line (DRIL), the ICE Sexual Abuse and Assault Prevention and Intervention (SAAPI) posting and the ICE deportation officer visiting schedule for staff detainee communication.

ODO reviewed the CCJ facility handbook and found it does not inform detainees they have the opportunity to submit written questions, requests, or concerns to ICE staff; nor does the handbook provide the procedure to submit questions, requests or concerns to ICE (**Deficiency SDC-2**²¹). The ICE National Detainee Handbook does provide the procedure for submitting questions, requests or concerns to ERO staff; however, ODO observed that neither the facility nor ERO provide the ICE National Detainee Handbook to detainees (**Deficiency DH-1**²²).

Corrective Action: Prior to completion of the ODO inspection, ERO issued all ICE detainees in the facility an ICE National Detainee Handbooks (**C-3**).

ODO's review of Staff Detainee Communication procedures found that ERO has not posted a schedule for weekly visits in detainee living areas and other areas of detainee access (**Deficiency SDC-4**²³). ERO provides each detainee with an information sheet during the admission process that outlines when weekly staff detainee communication visits will occur.

Corrective Action: Prior to completion of the inspection, the facility initiated corrective action by posting the ERO deportation officer's weekly visiting schedule for staff detainee communication (**C-4**).

ODO interviewed senior ERO staff and found that ERO staff members were not utilizing any type of log specifically designed for the purpose of recording detainee requests (**Deficiency SDC5**²⁴). Additionally, the facility is not maintaining a log of when the request was forwarded to ERO or the date when the ERO response to the request was received at the facility.

²¹ "The handbook shall state that the detainee has the opportunity to submit written questions, requests, or concerns to ICE staff and the procedure for doing so, including the availability of assistance in preparing the request." See ICE 2000 NDS, Standard, Staff Detainee Communication, Section (III)(B)(3).

²² "The detention facility will provide an ICE National Detainee Handbook to detainees residing in an ICE approved facility." See Change Notice: ICE National Detainee Handbook, dated November 2, 2007.

²³ "The ICE Field Office Director shall devise a written schedule and procedure for weekly detainee visits by District ICE deportation staff. Written schedules shall be developed and posted in the detainee living areas and other areas with detainee access." See ICE NDS 2000, Standard, Staff Detainee Communication, Section (III)(A)(2)(b).

²⁴ "All requests shall be recorded in a logbook specifically designed for that purpose. The log, at a minimum, shall contain: The date the detainee request was received, detainee's name, A-number, nationality, officer logging the request, the date that the request, with staff response and action, is returned to the detainee, and any other site-specific pertinent information.

In IGSAs, the date the request was forwarded to ICE and the date it was returned shall also be recorded." See ICE 2000 NDS, Standard, Staff Detainee Communication, Section (II)(B)(2).

TELEPHONE ACCESS

ODO reviewed the facility handbook and found that telephone access rules are provided to detainees upon admittance. However, ODO's tour of each housing unit found that the hours for telephone access are not posted consistently near all telephones (**Deficiency TA-1²⁵**).

Corrective Action: Prior to completion of the inspection, the facility initiated corrective action by posting the hours of access near all detainee housing telephones (**C-5**).

The CCJ phone system is set to electronically monitor all detainee telephone calls. Detainees can request to make legal calls by submitting a detainee request. However, ODO's tour of the housing units found that notifications informing detainees that all calls are subject to monitoring, as well as the procedures for obtaining an unmonitored call are not posted at each monitored telephone (**Deficiency TA-2²⁶**).

Corrective Action: Prior to completion of the inspection, the facility initiated corrective action by posting that all detainee phone calls are monitored as well as procedures for requesting an unmonitored call at each monitored telephone. These postings were made in both English and Spanish (**C-6**).

SECURITY AND CONTROL

ENVIRONMENTAL HEALTH AND SAFETY (EH&S)

ODO reviewed fire and safety inspection documentation provided by the facility. ODO found that documentation of weekly fire and safety inspections were available; however, there was no documentation provided to verify the facility is consistently conducting monthly fire and safety inspections (**Deficiency EH&S-1²⁷**).

ODO reviewed the CCJ Fire Prevention, Control, and Evacuation Plan last reviewed in 2007. ODO found the plan addresses the requirements of the standard. ODO observed conspicuously posted exit diagrams in English and Spanish posted throughout the facility; however, the postings do not include emergency equipment locations (**Deficiency EH&S-2²⁸**).

ODO reviewed the facility-provided documentation pertaining to required fire drills. ODO found that fire drills are not consistently conducted and documented every month (**Deficiency**

²⁵ "Each facility shall provide telephone access rules in writing to each detainee upon admission, and also shall post these rules where detainees may easily see them." See ICE NDS 2000, Standard, Telephone Access, Section (III)(B).

²⁶ "If telephone calls are monitored, the facility shall notify detainees in the detainee handbook or equivalent provided upon admission. It shall also place a notice at each monitored telephone stating the procedure for obtaining an unmonitored call to a court, legal representative, or for the purposes of obtaining legal representation." See ICE NDS 2000, Standard, Telephone Access, Section (III)(K)(1)(2).

²⁷ "A qualified departmental staff member will conduct weekly fire and safety inspections; the maintenance (safety) staff will conduct monthly inspections." See ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(L)(2).

²⁸ "In addition to a general area diagram, the following information must be provided on existing signs: Emergency equipment locations." See ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(L)(5)(c).

EH&S-3²⁹). According to the documentation, the last fire drill CCJ conducted was in April 2016.

ODO reviewed facility documentation pertaining to the required inspections of the smoke detection system and found that the last inspection of the smoke detection system was on March 7, 2014 (**Deficiency EH&S-4³⁰**). The National Fire Protection Association, Act 72, requires annual inspection of smoke detection systems, (The National Fire Protection Association (NFPA) is the commonly accepted National Fire Safety Code of the United States. Complying with NFPA smoke detection protocol is also a mandatory ACA requirement both of which are cited in the ICE NDS 2000.)

Corrective Action: Prior to the completion of the inspection, the facility initiated corrective action by contacting Red Hawk Fire and Security and scheduling an inspection of the smoke detection system for December 1, 2016 (**C-7**).

ODO reviewed facility provided documentation pertaining to emergency diesel generator maintenance and found that CCJ emergency generators are started automatically and run weekly. However the process does not include load testing; furthermore, an external contractor does not test the generators on a quarterly basis (**Deficiency EH&S-5³¹**).

SPECIAL MANAGEMENT UNIT (DISCIPLINARY SEGREGATION) (SMU DS)

ODO reviewed CCJ policy Number G-10, *Inmate Discipline*, dated January 27, 2006 and found that sanctions for violations of some offenses include confinement to a cell for certain days or during certain hours for a specified period of time not to exceed 120 days (**Deficiency SMU DS-1³²**).

ODO reviewed CCJ policy Number G-9, *Disciplinary Segregation*, dated January 27, 2006 and found the policy has no written procedures for the regular review of all disciplinary segregation cases (**Deficiency SMU DS-2³³**).

USE OF FORCE (UOF)

ODO reviewed the CCJ policy Number G-56, *Use of Force* (January 27, 2006) and found that following all use-of-force and other serious incidents, CCJ completes a Reportable Incident report which is submitted to the New York State Commission of Corrections. This report lists the incident category, the staff involved, detainee information, description of the incident, and

²⁹ “Monthly fire drills will be conducted and documented separately in each department.” See ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(L)(4).

³⁰ “Every facility will comply with standards and regulations issued by the Environmental Protection Agency (EPA) and OSHA, the American Correctional Association's "mandatory" standards, local and national fire safety codes, and the applicable standards of the American Society for Testing and Materials, American National Standards Institute, and Underwriters' Laboratories or Factory Mutual Engineering Corporation.” See ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(L)(1).

³¹ “The emergency generator will also receive quarterly testing and servicing from an external generator-service company. Among other things, the technicians will check starting battery voltage, generator voltage and amperage output.” See ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(O).

³² “A maximum sanction of 60 days in disciplinary segregation shall apply to violations associated with a single incident.” See ICE NDS 2000, Standard, Special Management Unit, (Disciplinary Segregation), Section (III)(A).

³³ “All facilities shall implement written procedures for the regular review of all disciplinary segregation cases.” See ICE NDS 2000, Standard, Special Management Unit, (Disciplinary Segregation), Section (III)(C).

staff action in response to the incident. However, there are no written After Action Review procedures approved by the ERO field office to assess the reasonableness of the action taken by staff members involved in the incident (**Deficiency UOF-1**³⁴).

HEALTH SERVICES

MEDICAL CARE (MC)

ODO reviewed 24 detainee medical records and found that partial health appraisals were conducted for nine detainees. The documented health appraisals, which were conducted by the facility physician, consisted of auscultation of the lungs, heart, and bowel sounds. All other sections of the health appraisal form were blank. The remaining 15 detainee medical records contained no documentation to verify a health appraisal had been conducted (**Deficiency MC-1**³⁵).

ODO reviewed 24 detainee dental records and found that the records did not contain any documentation to verify dental screening exams were conducted (**Deficiency MC-2**³⁶).

ODO reviewed 24 detainee electronic medical records (EMR) to verify the EMR included consent for treatment forms, signed by way of electronic signature pad. ODO found that the signature pad did not work. Therefore, none of the 24 records reviewed included signed consent forms (**Deficiency MC-3**³⁷).

ODO reviewed 26 facility officers' training files and confirmed current training in first aid, the use of the facility's automated defibrillator (AED) and cardio pulmonary resuscitation (CPR). However, a review of medical staff training files found two recently-hired registered nurses did not have any documentation of their CPR/AED certification (**Deficiency MC-4**³⁸).

³⁴ "Written procedures shall govern the use-of-force incident review, whether calculated or immediate, and the application of restraints. The review is to assess the reasonableness of the actions taken (force proportional to the detainee's actions), etc. IGSA will pattern their incident review process after INS. INS shall review and approve all After Action Review procedures." See ICE NDS 2000, Standard, Use of Force, Section (III)(K).

³⁵ "The health care provider of each facility will conduct a health appraisal and physical examination on each detainee within 14 days of arrival at the facility." See ICE NDS 2000, Standard, Medical Care, Section (III)(D).

³⁶ "An initial dental screening exam should be performed within 14 days of the detainee's arrival. If no on-site dentist is available, the initial dental screening may be performed by a physician, physician's assistant or nurse practitioner." See ICE NDS 2000, Standard, Medical Care, Section (III)(E).

³⁷ "The facility health care provider will obtain signed and dated consent forms from all detainees before any medical examination or treatment, except in emergency circumstances." See ICE NDS 2000, Standard, Medical Care, Section (III)(L).

³⁸ "Detention staff will be trained to respond to health-related emergencies within a 4-minute response time. This training will be provided by a responsible medical authority in cooperation with the OIC and will include the following: The administration of first aid and cardiopulmonary resuscitation (CPR)." See ICE NDS 2000, Standard, Medical Care, Section (III)(H)(2).