



**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 Miami Field Office  
Baker County Sheriff's Office  
Macclenny, Florida

April 10-13, 2017

**COMPLIANCE INSPECTION  
for the  
BAKER COUNTY SHERIFF'S OFFICE  
MACCLENNY, FLORIDA**

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**INSPECTION TEAM MEMBERS**

(b) (6), (b) (7)(C)

Section Chief (Team Lead)	ODO
Inspections and Compliance Specialist	ODO
Inspections and Compliance Specialist	ODO
Contractor	Creative Corrections

## FACILITY OVERVIEW

The Office of Detention Oversight (ODO), a unit within U.S. Immigration and Customs Enforcement's (ICE) Office of Professional Responsibility (OPR), conducted a compliance inspection of the Baker County Sheriff's Office (BCSO) in Macclenny, Florida, from April 10-13, 2017.<sup>1</sup> The BCSO opened in May 2009 and has been owned by Baker Correctional Development Corporation and operated by the Baker County Sheriff's Office since 2009. The Office of Enforcement and Removal Operations (ERO) started housing ICE detainees at BCSO in November 2009, pursuant to an Intergovernmental Service Agreement (IGSA) (non-dedicated), under the oversight of ERO Field Office Director (FOD) Miami.

Neither ERO staff members nor a Detention Services Manager are physically assigned to the facility. A Sheriff is responsible for oversight of daily facility operations and is supported by (b) (7) personnel. Armor Correctional Health Services provides detainee medical services, and Trinity Food Services provides food services.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity <sup>2</sup>	292
Average ICE Detainee Population <sup>3</sup>	270
Male Detainee Population (as of 4/10/2017)	243
Female Detainee Population (as of 4/10/2017)	28

In FY 2013, ODO conducted a compliance inspection of the BCSO under the National Detention Standards (NDS) 2000. ODO reviewed the facilities compliance with 18 standards and found the facility compliant with 12 standards. ODO found a total of six deficiencies in the remaining six standards (Detention Files, Environmental Health and Safety, Medical Care, Special Management Unit–Administrative Segregation, Special Management Unit–Disciplinary Segregation, and Staff-Detainee Communication).

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

<sup>2</sup> Data Source: ERO Facility List Report as of April 10, 2017.

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

## FY 2017 FINDINGS BY NDS 2000 MAJOR CATEGORIES

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

<sup>4</sup> For greater detail on ODO's findings, see the *Inspection Findings* section of this report.

## COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population greater than ten and where detainees are housed for over 72-hours to assess compliance with ICE National Detention Standards (NDS) 2000, or the Performance-Based National Detention Standards (PBNDS) 2008 or 2011, as applicable. These inspections focus solely on facility compliance with detention standards that directly affect detainee life, health, safety, and/or well-being.<sup>5</sup> ODO identifies violations linked to ICE detention standards, ICE policies, or operational procedures as *deficiencies*. ODO also highlights instances when the facility resolves deficiencies prior to completion of the ODO inspection--these corrective actions are annotated with "C" under the Inspection Findings section of this report.

At the conclusion of each inspection, ODO hosts a closeout briefing with facility and local ERO officials to discuss preliminary findings. A summary of these findings is also shared with ERO management officials. Thereafter, ODO provides ICE leadership with a final compliance inspection report to: (i) assist ERO develop and initiate corrective action plans; and (ii) provide senior executives with an independent assessment of facility operations. Additionally, ODO findings inform ICE executive management decision making in better allocating resources across the agency's entire detention inventory.

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<sup>5</sup> ODO reviews the facility's compliance with selected standards in their entirety.

## DETAINEE RELATIONS

ODO interviewed 21 randomly selected detainees to assess the conditions of confinement at BCSO. Interview participation was voluntary, and one detainee made allegations of physical and sexual abuse to ODO, but he later admitted it never occurred. The detainees reported being satisfied with facility services, with the exception of the complaints below:

*Admission and Release:* One detainee complained that when she was transferred from Virginia to BCSO her necklace and ring were missing from her personal property.

- Action Taken: ODO verified the validity of her claim with ERO. The detainee reported the jewelry missing, and it is actively being investigated and a claim is being processed.

*Admission and Release:* A female detainee, who does not identify as transgender, stated that she was taken to medical and told her gender needed to be visually confirmed. Although she was confused and not comfortable, she complied but told ODO that she felt her rights were violated. She specified that each time she has been asked about her gender identity that she has always claimed “female.” In response to being asked if she had reported her complaint, she stated she had not.

Action Taken: ODO verified the detainee’s complaint. ODO reviewed ERO Enforce Alien Removal Model (EARM) data and noted on February 10, 2017, comments were inadvertently entered into EARM: “subject is transgender, claims full operation to female,” by an ERO Washington Field Office deportation officer. Upon the detainee’s transfer to BCSO Jacksonville Sub-Office staff reviewed EARM, and not knowing the comments were entered erroneously, requested medical staff verify the detainee’s gender. ODO confirmed medical staff asked the detainee to remove her clothing so staff could view her genitalia. Once it became clear the comments were entered in error, EARM was corrected. ODO determined this incident was in violation of 11062.2: Sexual Abuse and Assault Prevention and Intervention Directive. ODO informed the ERO Prevention of Sexual Assault Coordinator about this incident. *See* the Compliance Inspection Findings: Security and Control section of this report.

*Detainee Handbook:* 18 detainees complained they did not receive the ICE National Detainee Handbook and/or the local supplement during intake.

- Action Taken: ODO reviewed the detention files of the 18 detainees and found they all signed for both the ICE National Detainee Handbook and the local supplement during the admissions process. Before ODO’s departure from the facility, the facility Lieutenant nevertheless provided both the ICE National Detainee Handbook and the local supplement to the 18 detainees. 13 detainees were given the handbooks in English and five detainees were provided copies in Spanish.

*Food Service:* Eight out of 21 detainees interviewed complained the food is horrible, bland, has very small portions.

Action Taken: ODO observed preparation and serving of lunch and dinner meals. Kitchen staff was monitored taking food temperatures, which ODO verified met the requirements of the standard. BCSO’s five-week general cycle, common fare, vegan, vegetarian, and medical diet

menus were certified by a registered dietitian based on a complete nutritional analysis. ODO sampled the noon meal on April 12, 2016 and found the items good tasting and served in ample portions.

*Medical Care:* One detainee complained he was seen by medical staff for a cyst on his wrist, but they did not provide any treatment.

- Action Taken: ODO reviewed medical records and determined there is no cyst on his wrist. Detainee was seen by medical September 13, 2016 for complaints of hand and wrist pain. Medical staff x-rayed both hands and wrists; no fractures were noted on either hand. An x-ray of his left hand showed calcification present, which is what the detainee described as a cyst, though is probably from an old fracture. No further treatment was determined to be required, as he has full range of motion and use of both hands.

*Medical Care:* A detainee stated that she was experiencing back pain and has not been treated.

- Action Taken: ODO reviewed the detainee's medical record and found the detainee claims to have fallen in the shower in December 2016. However, ODO found the detainee initially refused to see the physician at that time. In response to a sick call request, the detainee was evaluated by the physician for back pain in February 2017 and again on March 17, 2017. Records indicate the detainee was provided an anti-inflammatory medication following the recent evaluation.

*Medical Care:* One detainee complained she was having a reaction to her medication, resulting in body swelling and pain.

- Action Taken: ODO reviewed the detainee's medical record and found she is receiving ongoing treatment for anxiety and depression. The detainee was seen by medical staff on March 27, 2016 for complaints of a rash. The detainee's medical history, current course of treatment, and new symptoms were assessed. As a result of the evaluation the detainee was provided with a medicated cream to relieve itching and an antibiotic to prevent infection.

# COMPLIANCE INSPECTION FINDINGS

## DETAINEE SERVICES

### **Funds and Personal Property (F&PP)**

BCSO has written policies and procedures which provide for control and safeguarding of detainees' funds and personal property from admission to transfer or release. During observation of the intake process, ODO noted property and funds were searched for contraband, inventoried in the detainee's presence, and receipts issued. However, ODO's review of BCSO policy found it does not address procedures for managing lost or damaged property (**Deficiency F&PP-1**<sup>6</sup>).

*Corrective Action:* The facility initiated corrective action during the inspection by revising its policy and the detainee handbook to include procedures for managing lost or damaged property (C-1).

## SECURITY AND CONTROL

### **Detainee Searches (DS)**

A detainee informed ODO that she was taken to medical and told her gender needed to be visually confirmed. Although she was confused and uncomfortable; she complied. ODO determined this incident is in contravention of ICE policy (**Deficiency, DS-1**<sup>7</sup>).

## HEALTH SERVICES

### **Medical Care (MC)**

ODO reviewed medical records and identified a detainee who transferred from another facility to BCSO on December 14, 2016 with a medical diagnosis that requires ongoing monitoring. ODO reviewed the detainee's medical record and found he was prescribed two oral medications and refused an initial physical examination on December 22, and 29, 2016, on January 12, 2017, and on February 9, 2017. The detainee signed a refusal form documenting his refusal of ongoing blood monitoring. ODO brought this chronic condition to the attention of medical staff and ERO. Medical staff counseled the detainee on the seriousness of his condition and, on April 12, 2017, the detainee agreed to the testing. The medical care provider did not notify the OIC in writing when he was diagnosed as having a medical or psychiatric condition requiring special attention (**Deficiency MC-1**<sup>8</sup>).

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<sup>6</sup> "Each facility shall have a written policy and procedures for detainee property reported missing or damaged." See ICE NDS 2000, Standard, Funds and Personal Property, Section (III)(H).

<sup>7</sup> See U.S. Immigration and Customs Enforcement 11062.2: Sexual Abuse and Assault Prevention and Intervention Directive, dated May 22, 2014.

<sup>8</sup> "The medical care provider for each facility will notify the OIC in writing when a detainee has been diagnosed as having a medical or psychiatric condition requiring special attention." See ICE NDS 2000, Standard, Medical Care, Section (III)(J).

## CONCLUSION

ODO reviewed the facility's compliance with sixteen (16) standards and found the facility compliant with thirteen (13) standards, a notable improvement in performance from its last ODO inspection in FY 2013. ODO found three deficiencies in the remaining three standards. ODO recommends ERO work with the facility to remedy any deficiencies that remain outstanding, as applicable and in accordance with contractual obligations.

<b>Inspection Results Compared</b>	<b>FY 2013 (NDS 2000)</b>	<b>FY 2017 (NDS 2000)</b>
Standards Reviewed <sup>9</sup>	18	16
Deficient Standards	6	3
Overall Number of Deficiencies	6	3
Deficient Priority Components	N/A <sup>10</sup>	N/A
Corrective Actions	0	1
Repeat Deficiencies	0	0

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<sup>9</sup> The Standards reviewed in FY2013 included all the standards reviewed in 2017 except: Admission and Release, and Funds and Personal Property. Additionally, FY2013 included Disciplinary Policy, Hunger Strikes, Terminal Illness and Detention Files standards, not reviewed in FY2017.

<sup>10</sup> ODO began inspecting priority components in June 2013.