



**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 Pennsylvania Field Office  
Cambria County Jail  
Ebensburg, PA**

**August 14-16, 2018**

**COMPLIANCE INSPECTION  
for the  
CAMBRIA COUNTY JAIL  
Ebensburg, PA**

**TABLE OF CONTENTS**

**OVERVIEW**

Facility Overview ..... 1  
Findings by National Detention Standards (NDS) 2000 Major  
Categories ..... 2

**COMPLIANCE INSPECTION PROCESS ..... 3**

**DETAINEE RELATIONS ..... 4**

**COMPLIANCE INSPECTION FINDINGS**

**DETAINEE SERVICES**

Admission and Release ..... 5  
Detainee Classification System ..... 6  
Food Service ..... 6  
Funds and Personal Property ..... 7  
Staff Detainee Communication ..... 7

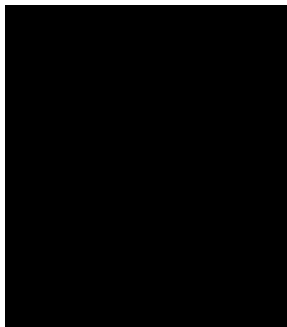
**SECURITY AND CONTROL**

Environmental Health and Safety ..... 8  
Special Management Unit (Administrative Segregation) ..... 8  
Special Management Unit (Disciplinary Segregation) ..... 9  
Use of Force ..... 9

**CONCLUSION ..... 10**

---

**COMPLIANCE INSPECTION TEAM MEMBERS**



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

## FACILITY OVERVIEW

The Office of Detention Oversight (ODO) conducted a compliance inspection of the Cambria County Jail (CCJ), in Ebensburg, Pennsylvania, from August 14-16, 2018.<sup>1</sup> The CCJ opened in 1997 and is owned and operated by Cambria County. The Office of Enforcement and Removal Operations (ERO) began housing detainees at CCJ in 1997 under the oversight of ERO's Field Office Director (FOD) in Pennsylvania. The facility operates under the National Detention Standards (NDS) 2000.

ERO Deportation Officers (DO) are assigned to the facility but are not assigned fulltime. A warden is responsible for daily facility operations. Medical services are provided by PrimeCare Medical Incorporated, and food services are provided by county employees and Nutrition Incorporated. The facility maintains American Correctional Association (ACA) accreditation.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity <sup>2</sup>	50
Average ICE Detainee Population <sup>3</sup>	36
Male Detainee Population (as of 8/15/2018)	37
Female Detainee Population (as of 8/15/2018)	1

This is ODO's first compliance inspection of CCJ as its previous average daily population fell outside ODO's criteria for an inspection.<sup>4</sup>

---

<sup>1</sup> This facility holds male and female detainees with low, medium low, medium high, and high security classification levels for periods greater than 72 hours.

<sup>2</sup> Data Source: ERO Facility List Report as of November 13, 2017.

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

<sup>4</sup> See the "Compliance Inspection Process" section of this report for further information.

## FY 2018 FINDINGS BY NDS 2000 MAJOR CATEGORIES

NDS 2000 STANDARDS INSPECTED <sup>5</sup>	DEFICIENCIES
<b>Part 1 – Detainee Services</b>	
Access to Legal	0
Admission and Release	6
Detainee Classification System	2
Detainee Grievance Procedure	0
Detainee Handbook	0
Food Service	7
Funds and Personal Property	1
Staff-Detainee Communication	2
Telephone Access	0
<b>Sub-Total</b>	<b>17</b>
<b>Part 2 – Security and Control</b>	
Environmental Health and Safety	3
Special Management Unit (Administrative Segregation)	4
Special Management Unit (Disciplinary Segregation)	2
Use of Force	5
<b>Sub-Total</b>	<b>14</b>
<b>Part 3 – Health Services</b>	
Medical Care	0
Suicide Prevention and Intervention	0
<b>Sub-Total</b>	<b>0</b>
<b>Total Deficiencies</b>	<b>32</b>

<sup>5</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. These inspections focus solely on facility compliance with detention standards that directly affect detainee life, health, safety, and/or well-being.<sup>6</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 in developing and initiating 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.

---

<sup>6</sup> ODO reviews the facility’s compliance with selected standards in their entirety.

## DETAINEE RELATIONS

ODO interviewed sixteen (16) detainees to assess the conditions of confinement at CCJ. Interview participation was voluntary, and none of the detainees made allegations of abuse, discrimination or mistreatment. The detainees reported being satisfied with facility services, apart from the complaints below:

*Environmental Health and Safety:* One detainee stated he was being charged from his commissary account for haircuts.

- Action Taken: ODO reviewed the detainee's commissary file and spoke with the Assistant Field Office Director (AFOD). Facility policy states ICE detainees are allowed one free haircut per month, and any haircuts beyond that are at the expense of the detainee. In this instance, the detainee received more than one haircut within the month and was subsequently charged for the extra haircut. ODO followed up with the detainee and explained the facility policy.

*Medical Care:* One detainee stated she was being denied her medication.

- Action Taken: ODO reviewed the detainee's file and spoke with health services staff and determined the medication, a nonsteroidal anti-inflammatory, is not prescribed as a daily dosage but is available upon the detainee's request to treat a chronic condition. At ODO's request the facility staff explained the procedure for obtaining this medication to the detainee.

# **COMPLIANCE INSPECTION FINDINGS**

## **DETAINEE SERVICES**

### **ADMISSION AND RELEASE (A&R)**

Upon arrival, detainees are pat searched, strip searched, and receive a full body scan. ODO's review of the intake process and documentation confirmed detainees are routinely strip searched by same gender staff without reasonable suspicion that the detainee is concealing contraband (**Deficiency A&R-1**).<sup>7</sup> Additionally, ODO's review of 25 detention files found 23 had a Pretrial Detainee Unclothed Search Form (USC-1), signed by the detainee consenting to the strip search. CCJ staff stated if the detainee does not consent to a strip search, they are able to leave their underwear on and a visual and pat search is conducted. Of the 25 files reviewed, there were only two detainees that did not consent. Several ODO staff observed the intake process, during which facility staff explained this process to each detainee.

ODO observed staff making calls to locate detainee missing property; however, this information was not documented on a Form I-387, "Report of Detainee's Missing Property" (**Deficiency A&R-2**).<sup>8</sup>

Detainees are provided with personal hygiene items, to include replenishment of those items. However, through interviews with facility staff, ODO found detainees are charged for replacement hygiene items (**Deficiency A&R-3**).<sup>9</sup>

ODO's review of documentation confirmed the admission process was completed within 12 hours of the detainee's arrival at the facility. ODO found no documentation indicating ERO approved the CCJ orientation procedures (**Deficiency A&R-4**).<sup>10</sup> ODO found the CCJ policy outlines the release process; however, the release procedures were not approved by ERO. (**Deficiency A&R-5**).<sup>11</sup>

ODO reviewed 25 randomly selected detainee files and found each contained a Form I-203/203a (Order to Detain or Release); however, none of the Form I-203s were signed by an ERO official (**Deficiency AR-6**).<sup>12</sup>

---

<sup>7</sup> "All facilities housing ICE detainees shall permit detainees to change clothing and shower in a private room without being visually observed by a staff member, unless there is reasonable suspicion that the individual possesses contraband." See ICE Change Notice - Admission and Release - NDS Strip Search Policy; dated October 15, 2007.

<sup>8</sup> "The officer shall complete Form I-387, "Report of Detainee's Missing Property" when any newly-arrived detainee claims his/her property has been lost or left behind. IGSA facilities shall forward the completed I-387s to INS." See ICE NDS 2000, Standard, Admission and Release, Section (III)(I).

<sup>9</sup> "Staff shall provide male and female detainees with the items of personal hygiene appropriate for, respectively, men and women. They will replenish supplies as needed." See ICE NDS 2000, Standard, Admission and Release, Section (III)(G).

<sup>10</sup> "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).

<sup>11</sup> "Staff must complete certain procedures before any detainee's release, removal, or transfer from the facility. Necessary steps include completing and processing forms, closing files, fingerprinting; returning personal property; and reclaiming facility - issued clothing, bedding, etc. INS will approve (sic) the IGSA release procedures." See ICE NDS 2000, Standard, Admission and Release, Section (III)(J). Note: "J" should be "L," the NDS standard is incorrect.

<sup>12</sup> "An order to detain or release (Form I-203 or I-203a) bearing the appropriate official signature shall accompany the newly arriving detainees." See ICE NDS 2000, Standard, Admission and Release, Section (III)(H).

## DETAINEE CLASSIFICATION SYSTEM (DCS)

New detainees are classified based on information found on the Form I-203; Form I-213 (Record of Deportable Alien); and the detainee's criminal history. Using this information, the classification staff completes an objective classification utilizing the Digital Systems, Inc., Offender Management System (OMS). [REDACTED]

[REDACTED] The tool recommends a custody level based on that score. Classification staff, with supervisory approval, can override the OMS-recommended custody level and document their rationale. However, ODO found no written procedures or documentation indicating the first-line supervisor approves a detainee's classification level before being admitted into the general population (**Deficiency DCS-1**).<sup>13</sup> [REDACTED]

<sup>14</sup>

## FOOD SERVICE (FS)

ODO conducted a sanitation inspection with the Food Service Director and found several unsanitary conditions in the food service department (**Deficiency FS-1**).<sup>15</sup> ODO observed dirty cleaning towels on the counters throughout food service, including food preparation areas (**Deficiency FS-2**).<sup>16</sup> The garbage cans did not have lids (**Deficiency FS-3**).<sup>17</sup> ODO observed several oven racks, sheet pans, and bread pans had an excessive amount of carbon and baked-on food build-up (**Deficiency FS-4**).<sup>18</sup> While cleaning schedules were posted and ODO observed staff conducting informal inspections throughout the day, it was not effective in achieving satisfactory sanitation.

ODO inspected food storage areas and found temperatures are maintained at appropriate levels. However, ODO observed meat and other food items stacked on the floor and against the walls in the freezer and refrigerators, boxes of drink bases on the floor, and bags of flour and other dry goods stacked against the walls in the dry storage area (**Deficiency FS-5**).<sup>19</sup> Proper storage of food

---

<sup>13</sup> "All detainees are classified upon arrival, before being admitted into the general population. INS will provide CDFs and IGSA facilities with the data they need from each detainee's file to complete the classification process. ...

3. The first-line supervisor will review and approve each detainee's classification."

See ICE NDS 2000, Standard, Detainee Classification System, Section (III)(A)(1)(3).

<sup>15</sup> All food service employees are responsible for maintaining a high level of sanitation in the food service department. Food service staff shall teach detainee workers personal cleanliness and hygiene; sanitary methods of preparing, storing, and serving food; and the sanitary operation, care and maintenance of equipment, including automatic dishwashers and pot-and-pan washers." See ICE NDS 2000, Standard, Food Service, Section (III)(H)(1).

<sup>16</sup> "Moist cloths for wiping food spills on kitchenware and food-contact surfaces on equipment shall be clean, rinsed frequently in sanitizing solution, and used solely for this purpose. They shall soak in the sanitizing solution between uses." See ICE NDS 2000, Standard, Food Service, Section (III)(H)(7)(e).

<sup>17</sup> "Garbage and other trash shall be collected and removed as often as possible. The garbage/refuse containers shall have sufficient capacity for the volume, and shall be kept covered cleaned frequently, and insect- and rodent proof. The facility shall comply with all applicable regulations (local, state, and federal) on refuse-handling and disposal." See ICE NDS 2000, Standard, Food Service, Section (III)(H)(5)(j).

<sup>18</sup> "All food service equipment and utensils shall meet the National Sanitation Foundation (NSF) standards (or equivalent standards of other agencies)." See ICE NDS 2000, Standard Food Service, Section (III)(H)(7)(a).

<sup>19</sup> "The following procedures apply when receiving or storing food: ...



protects against contaminants and facilitates pest-control measures.

CCJ has a satellite system of meal service for detainees. Temperatures of hot and cold food items on the regular tray assembly line were tested and were in line with the standard; however, staff did not test and record food temperatures for special diet foods (**Deficiency FS-6**).<sup>20</sup>

*Corrective Action:* The facility initiated corrective action during the inspection by having officers take food temperatures of the special diet food line and recording them (**C-1**).

ODO also observed food trays were placed on carts that were not locked and were then transported to the housing units by the inmate workers (**Deficiency FS-7**).<sup>21</sup>

## **FUNDS AND PERSONAL PROPERTY (F&PP)**

ODO reviewed the facility policy (Commitment Policy OP-1) and confirmed it addresses the requirements of the standard; however, facility policy does not address procedures for detainee property reported missing, lost or damaged (**Deficiency F&PP-1**).<sup>22</sup>

## **STAFF-DETAINEE COMMUNICATION (SDC)**

The ICE Supervisory Detention and Deportation Officer (SDDO) conducts regular unscheduled visits monthly to CCJ's housing units, food service area, recreation, and medical area. However, the schedule for ICE DO visits to detainee housing areas were not posted as required (**Deficiency-SDC-1**).<sup>23</sup>

Detainee requests are logged into an electronic logbook and then distributed to the appropriate case officer to answer. A review of the CCJ electronic request log and a subsequent interview with the ERO DO found that the facility is utilizing a log specifically designed for the recording of all detainee requests, but the log does not capture the detainee's A-number, nationality, or officer's name logging the request (**Deficiency-SDC-2**).<sup>24</sup>

---

e. Store all products at least six inches from the floor and sufficiently far from walls to facilitate pest-control measures. A painted line may guide pallet placement.

See ICE NDS 2000, Standard, Food Service, Section (III)(J)(3)(d).

<sup>20</sup> "Before and during the meal, the CS in charge shall inspect the line to ensure: ...

3. Sanitary guidelines are observed, with hot foods maintained at a temperature of at least 140 degrees F and foods that require refrigeration maintained at 41 degrees F or below."

See ICE NDS 2000, Standard, Food Service, Section (III)(C)(2)(a)(3).

<sup>21</sup> "Food will be delivered from one place to another in covered containers. These may be individual containers, such as pots with lids, or larger conveyances that can move objects in bulk, such as enclosed, satellite-feeding carts. Food carts must have locking devices." See ICE NDS 2000, Standard, Food Service, Section (III)(C)(2)(g).

<sup>22</sup> "Each facility shall have a written policy and procedure for detainee property reported missing or damaged." See ICE NDS 2000, Standard, Funds and Personal Property, Section (III)(H).

<sup>23</sup> "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).

<sup>24</sup> "All requests shall be recoded in a logbook specifically designed for that purpose. The log at minimum, shall contain: the date the detainee request was received, Detainee's name, A-number, Nationality, Officer logging request, the date the request, with staff response and action, is returned to the detainee and any other site-specific pertinent information." See ICE NDS 2000, Standard, Staff-Detainee Communication, Section (III)(B)(2).

## **SECURITY**

### **ENVIRONMENTAL HEALTH AND SAFETY (EH&S)**

ODO observed unsanitary conditions in B-pod to include: damaged mattresses that needed to be replaced; water dripping through the ceiling which was being diverted by way of plastic garbage bags taped to the stair railings into 5-gallon buckets; inmate clothing hanging on bunks; and newspapers and clothing blocking windows and light fixtures. According to staff, the ceiling leak was a result of a recent heavy rainstorm, and the facility immediately made arrangements to repair this problem. However, several other areas of the ceiling and wall in the common area appeared to have black mold, and there was a smell of mildew in the unit, suggesting this has been an ongoing issue. Additionally, there appeared to be black mold in the area referred to as the “loft” in A-pod and shower number 56 in the female unit (**Deficiency EH&S-1**).<sup>25</sup>

ODO verified that CCJ’s master index of hazardous substances meets the requirements of NDS. Safety Data Sheets (SDS) were current and present in all locations where hazardous substances were maintained and used; however, running inventories were not accurately maintained in the maintenance area (**Deficiency EH&S-2**).<sup>26</sup> Several flammable substances, including paint and aerosol cans were not stored in fire-resistant cabinets (**Deficiency EH&S-3**).<sup>27</sup>

### **SPECIAL MANAGEMENT UNIT (ADMINISTRATIVE SEGREGATION) (SMU-AS)**

ODO’s review found CCJ has not developed written procedures consistent with the SMU-AS standard (**Deficiency SMU-AS-1**).<sup>28</sup> The policy does not address: the female SMU; clothing and bedding exchange; meals served from the same menu as general population; the opportunity to shower and shave three times per week; the opportunity to recreate in one-hour increments, five days a week; the opportunity to possess personal property, although restricted; the opportunity for barber services through request; the opportunity to utilize the law library upon request; medical care and visits occurring daily by appropriate health care providers; the opportunity to visit; correspond, receive correspondence, and the opportunity to use telephones. ODO’s review of files found AS orders were not consistently completed and approved by a supervisor before a detainee was placed in AS (**Deficiency SMU AS-2**).<sup>29</sup> Six of the eight files did not contain AS orders

---

<sup>25</sup> “Environmental health conditions will be maintained at a level that meets recognized standards of hygiene. The standards include those from the American Correctional Association, the Occupational Safety and Health Administration, the Environmental Protection Agency, the Food and Drug Administration, the National Fire Protection Association’s Life Safety Code, and the National Center for Disease Control and Prevention.” *See* ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(R)(1).

<sup>26</sup> “Every area will maintain a running inventory of the hazardous (flammable, toxic, or caustic) substances used and stored in that area. Inventory records will be maintained separately for each substance, with entries for each logged on a separate card (or equivalent). That is, the account keeping will not be chronological, but filed alphabetically, by substance (dates, quantities, etc.)” *See* ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(A).

<sup>27</sup> “Every hazardous-material storage room will be of fire - resistant construction and properly secured.” *See* ICE NDS 2000, Environmental Health and Safety, Section (III)(F)(3)(a).

<sup>28</sup> “Administrative segregation is a non - punitive form of separation from the general population used when the continued presence of the detainee in the general population would pose a threat to self, staff, other detainees, property, or the security or orderly operation of the facility. Others in this housing status include detainees who require protective custody, those who cannot be placed in the local population because they are en route to another facility (holdovers), those who are awaiting a hearing before a disciplinary panel, and those requiring separation for medical reasons. The facility shall develop and follow written procedures consistent with this standard.” *See* ICE NDS 2000, Standard, SMU AS, Section (III)(A).

<sup>29</sup> “A written order shall be completed and approved by a supervisory officer before a detainee is placed in AS, except

completed and approved by a supervisory officer before the detainee was placed in AS. CCJ has not implemented written procedures for the regular review of all cases involving individuals placed in AS (**Deficiency SMU-AS-3**).<sup>30</sup>

A log is maintained to track meals, medical visits, recreation times, showers, and supervisory staff visits for both Detainee Housing Unit (DHU) East Large and in DHU East Small; however, the permanent log is not consistently completed documenting when a detainee refuses or accepts meals (**Deficiency SMU-AS-4**).<sup>31</sup>

### **SPECIAL MANAGEMENT UNIT (DISCIPLINARY SEGREGATION) (SMU-DS)**

The facility has not implemented written procedures for the regular review of all DS detainees and regular reviews were not completed and documented as required. ODO observed a file of one detainee who served 19 days in DS and had only one seven-day review (**Deficiency SMU DS-1**).<sup>32</sup>

A log is maintained to track meals, medical visits, recreation times, showers and supervisory staff visits for both DHU East Large, and in DHU East Small; however, the permanent log is not consistently completed documenting when a detainee refuses or accepts meals (**Deficiency SMU-DS-2**).<sup>33</sup>

### **USE OF FORCE (UOF)**

ODO's review of facility policy related to use of force found it: differentiates between immediate and calculated use of force; indicates when use of force is authorized; prefers confrontation avoidance as a first step; lists who has the authority, time permitting, to grant permission for the application of restraints; necessary precautions to be taken when using [REDACTED]; indicates when use of force incidents are to be videotaped, and when a supervisory officer must be present. However, the policy does not address use of force in special circumstances, specifically pregnant detainees or detainees with wounds or cuts (**Deficiency UOF-1**).<sup>34</sup> Further review of UOF forms and communication with the AFOD and SDDO revealed ERO has not approved all UOF forms (**Deficiency UOF-2**)<sup>35</sup> and has not reviewed and approved CCJ's After Action Review procedures (**Deficiency UOF-3**).<sup>36</sup>

---

when exigent circumstances make this impracticable. In such cases, an order shall be prepared as soon as possible." See ICE NDS 2000, Standard, SMU-AS, Section (III)(B).

<sup>30</sup> "All facilities shall implement written procedures for the regular review of all administrative detention cases, consistent with the procedures specified below." See ICE NDS 2000, Standard, Special SMU-AS, Section (III)(C).

<sup>31</sup> "A permanent log will be maintained in the SMU. The log will record all activities concerning the SMU detainees, e.g., meals served, recreation, visitors, etc." See ICE NDS 2000, Standard, SMU-AS, Section (III)(E)(1).

<sup>32</sup> "All facilities shall implement written procedures for the regular review of all DS cases, consistent with the procedures specified below. See ICE NDS 2000, Standard, SMU-DS, Section (III)(C).

<sup>33</sup> "A permanent log will be maintained in the SMU. The log will record all activities concerning the SMU detainees, e.g., meals served, recreation, visitors, etc." See ICE NDS 2000, Standard, SMU-DS, Section (III)(E)(1).

<sup>34</sup> "Occasionally, after the failure or impracticability of confrontation - avoidance, staff must make a judgment call as to whether to use force. In such cases, involving a pregnant detainee, for example, or an aggressive detainee with open cuts, sores, or lesions, staff shall consult with the Clinical Director before deciding the situation is grave enough to warrant the use of physical force." See ICE NDS 2000, Standard, UOF, Section (III)(I)(1)(2).

<sup>35</sup> "Staff shall prepare detailed documentation of all incidents [REDACTED]. Staff shall likewise document the use of restraints on a detainee who becomes violent or displays signs of imminent violence. A copy of the report shall be placed in the detainee's detention file." See ICE NDS 2000, Standard, UOF, Section (III)(J)(1).

<sup>36</sup> "Written procedures shall govern the UOF 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),

ODO’s interview with staff found the warden has not designated responsibility for maintaining the video cameras (**Deficiency UOF-4**).<sup>37</sup>

*Corrective Action:* The facility initiated corrective action during the inspection by revising the post orders and designating the Captain responsibility for maintaining and testing the video equipment (**C-2**).

ODO reviewed UOF files and found they contained written documentation and commentary to indicate the reasonableness of the actions and the force taken was proportional to the detainee's actions. However, there was no documentation of medical evaluations in two of the identified UOF incidents involving the passive restraint of detainees (**Deficiency UOF-5**).<sup>38</sup> Additionally, medical staff were unable to provide documentation to indicate medical personnel examined the detainee or treated any injuries.

## CONCLUSION

During this inspection ODO reviewed the facility’s compliance with 15 standards under NDS 2000. ODO found the facility compliant in six standards. ODO identified 32 deficiencies in the remaining nine standards. Inspectors note several of these deficiencies were related to unsanitary conditions (including ongoing water intrusion leading to black mold and the smell of mildew) in detainee housing, showers and food service areas. ODO recommends ERO work with the facility to address these conditions, as well as all other remaining deficiencies as soon as possible, and in accordance with contractual obligations.

Compliance Inspection Results	FY 2018 (NDS 2000)
Standards Reviewed	15
Deficient Standards	9
Overall Number of Deficiencies	32
Corrective Action	2

etc. IGSA’s will pattern their incident review process after INS. INS shall review and approve all After Action Review procedures.” See ICE NDS 2000, Standard, UOF, Section (III)(K).

<sup>37</sup> “The OIC shall designate responsibility for maintaining the video cameras and other video equipment. This shall include regularly scheduled testing to ensure all parts, including batteries, are in working order; and keeping back-up supplies on hand (batteries, tapes, lens-cleaners, etc.). This responsibility shall be incorporated into one or more post orders.” See ICE NDS 2000, Standard, UOF, Section (III)(A)(4)(1).

<sup>38</sup> “In immediate use-of-force situations, staff shall seek the assistance of mental health or other medical personnel upon gaining physical control of the detainee. ...

2. After any UOF or forcible application of restraints, medical personnel shall examine the detainee, immediately treating any injuries. The medical services provided shall be documented.

Medical staff shall immediately examine any staff member involved in a use-of-force incident who reports an injury and, if necessary, provide initial emergency treatment.”

See ICE NDS 2000, Standard, UOF, Section (III)(G)(2).