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U.S. 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 Detroit Field Office**

**Butler County Jail  
Hamilton, Ohio**

**July 16-18, 2019**

**COMPLIANCE INSPECTION  
of the  
BUTLER COUNTY JAIL  
Hamilton, Ohio**

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## FACILITY OVERVIEW

The U.S. Immigration and Customs Enforcement (ICE) Office of Professional Responsibility (OPR) Office of Detention Oversight (ODO) conducted a compliance inspection of the Butler County Jail (BCJ) in Hamilton, Ohio, from July 16 to 18, 2019.<sup>1</sup> The facility opened in 2002; it is owned by Butler County Commissioners and operated by Butler County Sheriff’s Department. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at BCJ in 2003 under the oversight of ERO’s Field Office Director (FOD) in Detroit (ERO Detroit). The facility operates under the National Detention Standards (NDS) 2000.

ERO has assigned Deportation Officers (DOs) to the facility, however, there is no assigned Detention Services Manager (DSM). The BCJ warden handles daily facility operations and is supported by █████ personnel. Aramark Correctional Food Services provides food services and a combination of Butler County government employees and county contract healthcare professionals provide medical care at the facility. The facility holds no accreditations.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity <sup>2</sup>	As Needed
Average ICE Detainee Population <sup>3</sup>	125
Male Detainee Population (as of 7/2/2019)	102
Female Detainee Population (as of 7/2/2019)	6

During its last inspection, in Fiscal Year (FY) 2018, ODO found 31 deficiencies in the following areas: Detainee Classification System (4); Detainee Grievance Procedures (2); Food Service (2); Staff-Detainee Communication (3); Telephone Access (2); Environmental Health and Safety (8); Special Management Unit (Disciplinary Segregation) (3); Use of Force (4); Medical Care (2); and Sexual Abuse and Assault Prevention and Intervention (SAAPI) (1).

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

<sup>2</sup> Data Source: ERO Facility List Report as of April 1, 2019.

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

## 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 longer than 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>4</sup>

ODO identifies violations of ICE detention standards, ICE policies, or operational procedures as “deficiencies.” ODO also highlights instances in which the facility resolves deficiencies prior to completion of the ODO inspection. Where applicable, these corrective actions are annotated with “C” under the *Compliance Inspection Findings* section of this report.

Upon completion of each inspection, ODO conducts a closeout briefing with facility and local ERO officials to discuss preliminary findings. A summary of these findings is 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. ODO’s findings inform ICE executive management in their decision-making to better allocate resources across the agency’s entire detention inventory.

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<sup>4</sup> ODO reviews the facility’s compliance with selected standards in their entirety.

## FINDINGS BY NATIONAL DETENTION STANDARDS 2000 MAJOR CATEGORIES

NDS 2000 Standards Inspected <sup>5</sup>	Deficiencies
<b>Part 1 – Detainee Services</b>	
Access to Legal Material	4
Admission and Release	4
Detainee Classification System	1
Detainee Grievance System	2
Food Service	1
Funds and Personal Property	1
Recreation	0
Religious Practices	0
Staff-Detainee Communication	2
Telephone Access	5
Visitation	2
<b>Sub-Total</b>	<b>22</b>
<b>Part 2 – Security and Control</b>	
Environmental Health and Safety	1
Special Management Unit (Administrative Segregation)	2
Special Management Unit (Disciplinary Segregation)	0
Use of Force	1
<b>Sub-Total</b>	<b>4</b>
<b>Part 3 – Health Services</b>	
Medical Care	5
Suicide Prevention and Intervention	0
<b>Sub-Total</b>	<b>5</b>
<b>PBNS 2011 Standards Inspected</b>	
Disability Identification, Assessment, and Accommodation	2
Sexual Abuse and Assault Prevention and Intervention	0
<b>Sub-Total</b>	<b>2</b>
<b>Total Deficiencies</b>	<b>33</b>

<sup>5</sup> For greater detail on ODO's findings, see the *Compliance Inspection Findings* section of this report.

## DETAINEE RELATIONS

ODO interviewed 15 detainees, each of whom voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. Most detainees reported satisfaction with facility services except for the concerns listed below.

*Admissions and Release:* Five detainees stated that personal hygiene items are not replenished by the facility and that they are forced to use the commissary to replenish supplies.

- Action Taken: ODO and the assistant warden toured all detainee housing units and found that three housing units did not have personal hygiene items available. Prior to ODO's departure, the facility replenished the supplies and distributed them to the detainees.

*Medical Care:* One detainee stated that medical staff do not use gloves when handling detainees or equipment.

- Action Taken: ODO observed medical unit operations and found medical staff used gloves when handling detainees and equipment.

*Staff-Detainee Communication:* Five female detainees reported that ICE officers do not conduct routine visits to the facility.

- Action Taken: ODO reviewed the ICE detainee visitation logs and found that ICE officers conducted weekly visits to the detainee housing units. ODO also met with the Supervisory Detention and Deportation Officer (SDDO) and brought the complaints to his attention. The SDDO immediately responded to the female detainees and ensured them that an ICE officer would conduct routine visits to their housing unit.

# COMPLIANCE INSPECTION FINDINGS

## DETAINEE SERVICES

### ACCESS TO LEGAL MATERIAL (ALM)

ODO inspected all detainee housing units and found that detainees assigned to the F and J housing units do not have access to operating computers equipped with LexisNexis (**Deficiency ALM-1<sup>6</sup>**). ODO also found that while detainees assigned to the B and C housing units have access to operating computers equipped with LexisNexis, the computers are stored in video conferencing rooms that lack adequate space and privacy to facilitate legal research and writing (**Deficiency ALM-2<sup>7</sup>**).

ODO found that the facility has not designated an employee with responsibility to inspect library equipment at least weekly (**Deficiency ALM-3<sup>8</sup>**).

Additionally, ODO found that the detainee handbook does not provide detainees with the policies and procedures governing access to legal materials, nor is the information posted in the law library (**Deficiency ALM-4<sup>9</sup>**).

### ADMISSION AND RELEASE (AR)

ODO reviewed the BCJ admissions and release processes and found that neither the admission nor

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<sup>6</sup> “The Detention Standards *Access to Legal Materials* specifies that all ICE detainees held in detention facilities for longer than 72 hours must have access to the legal reference materials listed in Attachment A of the standard. Effective immediately, in facilities capable of providing detainees access to computers, the contents of the Lexis Nexis CD-ROMs may replace the hard-copy legal reference material that is listed in Attachment A of the *Access to Legal Material Standard*. Field Office Directors shall verify that the detention facilities in their Areas of Responsibility (AQR) that intend to replace hard-copy material with the Lexis Nexis CD-ROM have operating computers that are capable of printing, with a photocopier and all necessary supplies.” See Change Notice: Access to Legal Reference Materials and Lexis Nexis CD-ROMS, June 14, 2007.

<sup>7</sup> “The facility shall provide a law library in a designated room with sufficient space to facilitate detainees’ legal research and writing. The law library shall be large enough to provide reasonable access to all detainees who request its use. It shall contain a sufficient number of tables and chairs in a well-lit room, reasonably isolated from noisy areas.” See ICE NDS 2000, Standard, Access to Legal Material, Section (III)(A).

<sup>8</sup> “The facility shall designate an employee with responsibility to inspect the equipment at least weekly and ensure that it is in good working order, and to stock sufficient supplies.” See ICE NDS 2000, Standard, Access to Legal Material, Section (III)(B).

<sup>9</sup> “The detainee handbook or equivalent, shall provide detainees with the rules and procedures governing access to legal materials, including the following information:

1. that a law library is available for detainee use;
2. the scheduled hours of access to the law library;
3. the procedure for requesting access to the law library;
4. the procedure for requesting additional time in the law library (beyond the 5 hours per week minimum);
5. the procedure for requesting legal reference materials not maintained in the law library; and
6. the procedure for notifying a designated employee that library material is missing or damaged. These policies and procedures shall also be posted in the law library along with a list of the law library’s holdings.”

See ICE NDS 2000, Standard, Access to Legal Material, Section (III)(Q)(1-6).



release procedures (**Deficiency A&R-1<sup>10</sup>**) had been reviewed and approved by the local ERO field office.

*Corrective Action:* Prior to completion of the inspection, the Assistant FOD reviewed and approved the orientation and release procedures (**C-1**).

ODO found that while the initial issuance of personal hygiene items is provided at no charge to detainees, the facility does not replenish toothpaste and toothbrushes (**Deficiency A&R-3<sup>11</sup>**).

ODO reviewed 25 detention files for current detainees and found that four files did not contain an order to detain or release (Form I-203) signed by the appropriate ICE ERO authorizing official (**Deficiency A&R-4<sup>12</sup>**).

### **DETAINEE CLASSIFICATION SYSTEM (DCS)**

ODO found that the facility assigns all detainees a level two classification unless information provided by ERO requires a higher classification level; this may result in detainees not being assigned to the least restrictive housing unit (**Deficiency DCS-1<sup>13</sup>**).

### **DETAINEE GRIEVANCE PROCEDURES (DGP)**

ODO found that eight grievances were filed in the 12 months preceding the inspection; however, the facility does not maintain a detainee grievance log (**Deficiency DGP-1<sup>14</sup>**).

ODO found that the BCJ detainee handbook does not include procedures for contacting ERO to appeal the decision of the facility warden (**Deficiency DGP-2<sup>15</sup>**).

### **FOOD SERVICE (FS)**

ODO inspected the facility kitchen and found that surfaces throughout the food service areas were not routinely cleaned, including the hood over the steam pot, stainless steel surfaces, handwashing

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<sup>10</sup> “INS will approve [*sic*] the IGSA release procedures.” See ICE NDS 2000, Standard, Admission and Release, Section (III)(J).

<sup>11</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>12</sup> “An order to detain or release (Form I-203 or I-203a) bearing the appropriate official signature shall accompany the newly arriving detainee.” See ICE NDS 2000, Standard, Admission and Release, Section (III)(H).

<sup>13</sup> “The classification system shall assign detainees to the least restrictive housing unit consistent with the facility safety and security. By grouping detainees with comparable records together and isolating those at one classification level from all others, the system reduces noncriminal and nonviolent detainees’ exposure to physical and psychological danger. [REDACTED]

[REDACTED] See ICE NDS 2000, Standard,

Detainee Classification System, Section (III)(F)(1). **This is a Repeat Deficiency.**

<sup>14</sup> “Each facility will devise a method for documenting detainee grievances. At a minimum, the facility will maintain a Detainee Grievance Log.” See ICE NDS 2000, Standard, Detainee Grievance Procedures, Section (III)(E).

<sup>15</sup> “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 NDS 2000, Standard, Detainee Grievance Procedures, Section (III)(G)(4).

sink, ice machine, warming ovens, dish machine, and floors. Additionally, the ventilation hood had grease build-up and trash containers throughout the kitchen did not have lids (**Deficiency FS-1<sup>16</sup>**).

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

ODO found that the detainee handbook does not contain rules for storing or mailing non-allowable property, nor procedures for filing a claim for lost or damaged property (**Deficiency F&PP-2<sup>17</sup>**). Per BCJ policy, all abandoned property is returned to ERO for processing.

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

ODO reviewed detainee requests, maintained in an electronic database, submitted over the course of six months and found that the log did not record each detainee's A-number and nationality (**Deficiency SDC-2<sup>18</sup>**).

## **TELEPHONE ACCESS (TA)**

ODO inspected all detainee housing units and found that telephone access rules were not posted in the F and J housing units (**Deficiency TA-1<sup>19</sup>**). ODO also found that the B housing unit did not have a notice at each telephone stating that calls are subject to monitoring, nor the procedure for obtaining an unmonitored call to a court or legal representative, or for the purposes of obtaining legal representation (**Deficiency TA-3<sup>20</sup>**).

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<sup>16</sup> "All facilities shall meet the following environmental standards:

- c. Routinely cleaned walls, floors, and ceilings in all areas....
- d. Ventilation hoods, to prevent grease buildup and wall/ceiling condensation that can drip into food or onto food-contact surfaces. Filters or other grease-extracting equipment shall be readily removable for cleaning and replacement....
- j. 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).

<sup>17</sup> "The detainee handbook or equivalent shall notify the detainees of facility policies and procedures concerning personal property, including:

- 3. The rules for storing or mailing property not allowed in their possession; ...
- 5. The procedures for filing a claim for lost or damaged property."

See ICE NDS 2000, Standard, Funds and Personal Property, Section (III)(J)(3)(5).

<sup>18</sup> "All requests shall be recorded in a logbook specifically designed for that purpose. The log, at a minimum, shall contain:

- c. A-number;
- d. Nationality...."

See ICE NDS 2000, Standard, Staff-Detainee Communication, Section (III)(B)(2).

<sup>19</sup> "As described in the 'General Provisions' standard, the facility shall provide telephone access rules in writing to each detainee upon admittance, and also shall post these rules where detainees may easily see them." See ICE NDS 2000, Standard, Telephone Access, Section (III)(B).

<sup>20</sup> "The facility shall have a written policy on the monitoring of detainee telephone calls. 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:

- 1. that detainee calls are subject to monitoring; and

ODO found that the telephone configuration in each housing unit neither affords detainees privacy for telephone calls regarding legal matters nor provides detainees access to an office telephone to make confidential calls regarding legal matters (**Deficiency TA-4<sup>21</sup>**).

ODO found that the facility's telephone system informs detainees that all calls have a 15-minute time limit, rather than 20 minutes as required by the standard (**Deficiency TA-5<sup>22</sup>**).

## **VISITATION (V)**

The facility has no written procedure to provide for the exchange of documents between detainees and their legal representatives or assistants (**Deficiency V-1<sup>23</sup>**).

ODO found that while BCJ permits service pets into the facility, there is no written policy or procedure pertaining to animals being allowed in the facility (**Deficiency V-2<sup>24</sup>**).

## **SECURITY AND CONTROL**

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

Barber operations are conducted in each detainee housing unit. ODO inspected the hair care tools in each housing unit and found that the clippers and clipper attachments in the C and D housing units were not properly disinfected between haircuts; additionally, there was no bactericidal

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2. 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) and (2).

<sup>21</sup> “The facility shall ensure privacy for detainees’ telephone calls regarding legal matters. For this purpose, the facility shall provide a reasonable number of telephones on which detainees can make such calls without being overheard by officers, other staff or other detainees. Privacy may be provided in a number of ways, including:

1. telephones with privacy panels (side partitions) that extend at least 18 inches to prevent conversations from being overheard;
2. placing telephones where conversations may not be readily overheard by other detainees or facility staff; or
3. allowing detainees to use an office telephone to make confidential calls regarding their legal proceedings.”

See ICE NDS 2000, Standard, Telephone Access, Section (III)(J)(1-3). **This is a Repeat Deficiency.**

<sup>22</sup> “The facility shall not restrict the number of calls a detainee places to his/her legal representatives, nor limit the duration of such calls by rule or automatic cut-off, unless necessary for security purposes or to maintain orderly and fair access to telephones. If time limits are necessary for such calls, they shall be no shorter than 20 minutes, and the detainee shall be allowed to continue the call if desired, at the first available opportunity.” See ICE NDS 2000, Standard, Telephone Access, Section (V)(F).

<sup>23</sup> “The facility’s written legal visitation procedures must provide for the exchange of documents between detainee and legal representative (or legal assistant) even when contact visitation rooms are unavailable. Documents or other written material provided to a detainee during a visit a legal representative shall be inspected, but not read.” See ICE NDS 2000, Standard, Visitation, Section (III)(I)(10).

<sup>24</sup> “Each facility shall establish and disseminate a policy and implementing procedures governing whether and, if so, under what circumstances animals may accompany human visitors onto or into facility property.” See ICE NDS 2000, Standard, Visitation, Section (III)(O)(4).

solvent to sterilize the clippers (**Deficiency EH&S-1<sup>25</sup>**).

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

ODO inspected the SMU, which houses female detainees placed on AS and found cells on the lower tier were not equipped with securely fastened beds; instead, the facility provides boat beds in this unit (**Deficiency SMU AS-1<sup>26</sup>**).

ODO found that the facility does not maintain a permanent SMU log to record pertinent activities concerning detainees placed on AS (**Deficiency SMU AS-2<sup>27</sup>**).

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

BCJ's UOF policy does not contain written procedures for after-action reviews, nor is this information contained elsewhere (**Deficiency UOF-1<sup>28</sup>**).

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<sup>25</sup> "Between detainees, all hair care tools coming in contact with the detainees will be cleaned and effectively disinfected. Hair care tools come into contact with the detainees' scalp and skin and when reused without disinfection, provide excellent means for transfer of ringworm or other skin and scalp diseases. Clippers may be treated for pathogenic organisms and fungi by an approved bactericidal and fungicidal process. Ultra-violet light may only be used for maintaining tools after sterilization." *See* ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(P)(3).

<sup>26</sup> "The quarters used for segregation shall be well ventilated, adequately lit, appropriately heated and maintained in a sanitary condition at all times. All cells must be equipped with beds. The beds shall be securely fastened to the cell floor or wall." *See* ICE NDS 2000, Standard, Special Management Unit (Administrative Segregation), Section (III)(D)(2).

<sup>27</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, Special Management Unit (Administrative Segregation), Section (III)(E)(1). **This is a Repeat Deficiency.**

<sup>28</sup> "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 [*sic*] 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). **This is a Repeat Deficiency.**

## **HEALTH SERVICES**

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

ODO interviewed the Health Service Administrator (HSA) and reviewed training and credential files and found not all healthcare staff had a verifiable license and/or certification on file (Deficiency MC-1<sup>29</sup>).

*Corrective Action:* Prior to completion of the inspection, the HSA obtained the missing certifications from the contracted service provider and ODO verified the documentation (C-2).

Arriving detainees are screened for medical and mental health issues at the front counter in the booking area and in the vicinity of other detainees and BCJ staff, rather than in a private setting (Deficiency MC-2<sup>30</sup>).

ODO reviewed 25 detainee medical records and found three records did not have signed consent forms for medical treatment completed during the initial screening process (Deficiency MC-3<sup>31</sup>). ODO also found that, while detainees are normally tested for tuberculosis (TB) by a purified protein derivative test or chest x-ray, none of the records contained symptom screening for TB (Deficiency MC-4<sup>32</sup>).

ODO found that dental screenings are conducted by the Registered Nurse (RN) (Deficiency MC-5<sup>33</sup>). ODO learned that BCJ submitted a waiver requesting the RN be authorized to perform the initial dental screenings; however, according to the HSA, the waiver has not been approved by the local ERO office.

## **PBNDS 2011 STANDARD INSPECTED**

### **DISABILITY IDENTIFICATION, ASSESSMENT, AND ACCOMMODATION (DIA&A)**

BCJ does not have a procedure to train or notify medical employees and contractors about the facility's disability policy (Deficiency DIA&A-1<sup>34</sup>).

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<sup>29</sup> "The health care staff will have a valid professional licensure and or certification." See ICE NDS 2000, Standard, Medical Care, Section (III)(C).

<sup>30</sup> "Adequate space and equipment will be furnished in all facilities so that all detainees may be provided basic health examinations and treatment in private." See ICE NDS, Standard, Medical Care, Section (III)(B).

<sup>31</sup> "As a rule, medical treatment will not be administered against the detainee's will. 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. If a detainee refuses treatment, the INS will be consulted in determining whether forced treatment will be administered, unless the situation is an emergency. In emergency situations, the INS shall be notified as soon as possible." See ICE NDS 2000, Standard, Medical Care, Section (III)(L).

<sup>32</sup> "Detainees with symptoms suggestive of TB will be placed in an isolation room and promptly evaluated for TB disease." See ICE NDS 2000, Standard, Medical Care, Section (III)(D).

<sup>33</sup> "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). **This is a Repeat Deficiency.**

<sup>34</sup> "Training on the facility's Disability and Reasonable Accommodations procedures shall be provided to employees,

BCJ's orientation program and detainee handbook do not notify or inform detainees about the facility's disability accommodation policy, including their right to request reasonable accommodation and how to make such a request. Additionally, ODO did not observe disability accommodation postings in the housing or medical units (**Deficiency DIA&A-2<sup>35</sup>**).

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volunteers, and contract personnel, and shall also be included in annual refresher training thereafter. New facility staff, including contractors and volunteers, shall receive this training as part of the Initial Orientation training required by Standard 7.3. The level and type of training for volunteers and contractors will be based on the services they provide and their level of contact with detainees; however, all volunteers and contractors who have any contact with detainees must be notified of the facility's disability accommodations policy." *See* ICE PBNDS 2011, Standard, Disability Identification, Assessment, and Accommodation, Section (V)(I).

<sup>35</sup> "The facility orientation program required by standard 2.1, 'Admission and Release,' and the detainee handbook required by standard 6.1, 'Detainee Handbook,' shall notify and inform detainees about the facility's disability accommodations policy, including their right to request reasonable accommodations and how to make such a request. The facility will post other documents for detainee awareness in detainee living areas and in the medical unit, as requested by the local ICE/ERO Field Office." *See* ICE PBNDS 2011, Standard, Disability Identification, Assessment, and Accommodation, Section (V)(J).

## CONCLUSION

ODO reviewed the facility's compliance with 17 standards under NDS 2000 and 2 standards under PBNDS 2011 and found the facility in compliance with 5 of those standards. ODO found 33 deficiencies in the remaining 14 standards. ODO commends facility staff for their responsiveness during this inspection and notes there were two instances where staff initiated immediate corrective action during the inspection. ODO also notes that the facility decreased its' overall number of repeat deficiencies from 13 in FY 2018 to five in FY 2019.

ODO noted five deficiencies in the medical care standard. Of particular concern, ODO found no evidence that the facility conducts symptom screening for TB, which can lead to TB transmission and potential outbreaks, and places communities at risk for TB exposure. ODO recommends ERO work with the facility to remedy any outstanding deficiencies, as applicable and in accordance with contractual obligations.

<b>Compliance Inspection Results Compared</b>	<b>FY 2018 (NDS 2000)</b>	<b>FY 2019 (NDS 2000 and PBNDS 2011)</b>
Standards Reviewed	16	19
Deficient Standards	10	14
Overall Number of Deficiencies	31	33
Deficient Priority Components	0	0
Repeat Deficiencies	13	5
Corrective Actions	1	2