



U.S. Department of Homeland Security
U.S. 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 Baltimore Field Office**

**Frederick County Detention Center
Frederick, MD**

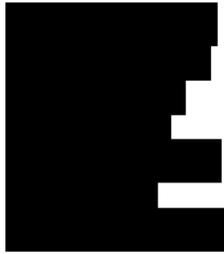
September 17-19, 2019

**COMPLIANCE INSPECTION
of the
Frederick County Detention Center
Frederick, MD**

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COMPLIANCE INSPECTION TEAM MEMBERS



Acting Team Lead
Senior MPA / Inspector
MPA / Inspector
Contractor
Contractor
Contractor
Contractor

ODO
ODO
ODO
Creative Corrections
Creative Corrections
Creative Corrections
Creative Corrections

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 Frederick County Detention Center (FCDC) in Frederick, MD from September 17-19, 2019.¹ The facility opened in 1984 and is owned by the County of Frederick and operated by the Frederick County Sheriff. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at FCDC in June 2007 under the oversight of ERO's Field Office Director (FOD) in Baltimore (ERO Baltimore). The facility operates under the National Detention Standards (NDS) 2000 and is contractually obligated to comply with the ICE Performance-Based Detention Standards (PBND) 2011 (Revised 2016), SAAPI standard.

ERO has assigned Deportation Officers to the facility. A FCDC warden handles daily facility operations and is supported by ██████ personnel. FCDC county employees provide food services, Wellpath LLC provides medical care, and Keefe provides commissary services at the facility. The facility is accredited by the American Correctional Association and the National Commission on Correctional Health Care.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity ²	56
Average ICE Detainee Population ³	████
Male Detainee Population (as of 9/17/2019)	████
Female Detainee Population (as of 9/17/2019)	N/A

During its last inspection, in FY 2016, ODO found three deficiencies in the following areas: Admission and Release (1); Medical Care (1); and Suicide Prevention and Intervention (1).

¹ This facility holds male detainees with low and medium-low security classification levels for periods greater than 72 hours.

² Data Source: ERO Facility List Report as of August 19, 2019.

³ *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.⁴

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.

⁴ ODO reviews the facility’s compliance with selected standards in their entirety.

FINDINGS BY NATIONAL DETENTION STANDARDS 2000 MAJOR CATEGORIES

NDS 2000 Standards Inspected ⁵	Deficiencies
Part 1 – Detainee Services	
Access to Legal Material	0
Admission and Release	2
Detainee Classification System	0
Detainee Grievance System	0
Food Service	3
Funds and Personal Property	2
Recreation	0
Religious Practices	0
Staff-Detainee Communication	1
Telephone Access	0
Visitation	0
Sub-Total	8
Part 2 – Security and Control	
Environmental Health and Safety	4
Special Management Unit (Administrative Segregation)	0
Special Management Unit (Disciplinary Segregation)	0
Use of Force	1
Sub-Total	5
Part 3 – Health Services	
Medical Care	2
Suicide Prevention and Intervention	0
Sub-Total	2
PBNS 2011 Standard Inspected	
Sexual Abuse and Assault Prevention and Intervention	1
Sub-Total	1
Total Deficiencies	16

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

DETAINEE RELATIONS

ODO interviewed 16 detainees, who each 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.

Intake Process: Seven detainees stated the facility issued them detainee handbooks in English even though they all speak and read Punjabi only. Additionally, they stated the facility did not use translation services to cover the handbook contents or to explain how to report sexual assaults or abuse.

- Action Taken: ODO informed ERO Baltimore staff and the administrative services director that the detainees stated they received handbooks in a language they could not understand, and the contents were not translated to them in Punjabi. The administrative services director contacted the facility's interpretation service to request they translate the facility handbook in Punjabi. The facility had not used the translation line to have the handbook read to the detainees in Punjabi and was awaiting a response from the printer to have the handbooks printed in Punjabi at the conclusion of the inspection. ODO observed SAAPI posters and contact information posted throughout the facility; however, all posters were in English and Spanish.

Medical Care: One detainee stated medical staff denied him pain medication after he had dental surgery, which was necessary following an assault on him.

- Action Taken: ODO reviewed the detainee's medical and dental records and spoke with facility medical staff. A registered nurse (RN) evaluated him for dental pain on September 8, 2019, and prescribed saltwater rinses and acetaminophen for pain. A facility dentist extracted a decayed tooth on September 11, 2019. ODO learned that following the tooth extraction, and on the same day, the detainee made an allegation another detainee assaulted him, which the facility investigated and determined to be unfounded. ODO reviewed the detainee's medical administrative record and found the detainee stopped taking pain medication two days prior the pain medication order expiring on September 16, 2019. The detainee needed to sign up for sick call in order to be re-evaluated and have a new pain medication order and ODO found no record the detainee submitted a sick call request. ODO requested the HAS explain the sick call and medication processes to the detainee in a language he understood.

COMPLIANCE INSPECTION FINDINGS

DETAINEE SERVICES

ADMISSION AND RELEASE (A&R)

ODO observed the intake process and found detainees were not afforded privacy during clothing exchange. A same-gender officer was present, in the room, when detainees changed into facility issued clothing (**Deficiency A&R-1⁶**).

ODO reviewed FCDC's release procedures and found no documentation that ERO Baltimore reviewed and approved procedures (**Deficiency A&R-2⁷**).

Corrective Action: Prior to the completion of the inspection, the facility initiated corrective action by the ERO Baltimore Deputy Field Office Director (DFOD) reviewing the release procedures and issuing a memorandum, which approved the release procedures (**C-1**).

ODO observed the area where the facility would strip-search detainees, if needed. This location had a window with no privacy screen, which permitted staff and other detainees to openly view strip searches when conducted. ODO noted this as an **Area of Concern**.

FOOD SERVICE (FS)

ODO inspected the food service area and observed six knives, which were not constructed with steel shanks through which a metal cable can be mounted (**Deficiency FS-1⁸**).

The food transportation carts the facility used to conduct satellite feeding did not have locking devices (**Deficiency FS-2⁹**).

ODO found the facility served common fare meals on the same trays used for therapeutic meals (**Deficiency FS-3¹⁰**).

⁶ "Effective immediately, all facilities housing Immigration and Customs Enforcement (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 Change Notice Admission and Release – National Detention Standard Strip Search Policy, dated October 15, 2007.

⁷ "Staff must complete certain procedures before any detainee's release, removal, or transfer from facility. Necessary steps include completing and processing forms, closing files, fingerprinting; returning of personal property; and reclaiming facility-issued clothing and bedding, etc. INS will approved [*sic*] the IGSA release procedures." See ICE NDS 2000, Standard, Admission and Release, Section (III)(J). *Note:* The NDS outline is erroneous; the cited section should be (III)(L).

⁸ "To be authorized for use in the food service department, a knife must have a steel shank through which a metal cable can be mounted. The facility's tool control officer is responsible for mounting the cable to the knife through the steel shank." See ICE NDS 2000, Standard, Food Service, Section (III)(B)(2).

⁹ "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).

¹⁰ "Common-fare meals shall be served with disposable plates and utensils, except when a supply of reusable plates and utensils has been set aside for common-fare service only. Separate cutting boards, knives, food scoops, food inserts, and other such tools, appliances and utensils shall be used to prepare common-fare foods, and shall be identified accordingly." See ICE NDS 2000, Standard, Food Service, Section (III)(E)(8).

FUNDS AND PERSONAL PROPERTY (F&PP)

ODO reviewed FCDC's F&PP policy and found the policy addressed most standard requirements; however, the policy did not address: promptly reimbursing detainees for all validated property losses caused by facility negligence; not arbitrarily imposing a ceiling on reimbursement amounts for valid claims; nor immediately notifying the designated ICE officer of all claims and outcomes (**Deficiency F&PP-1¹¹**).

ODO's review of the facility's detainee handbook found it did not notify detainees of the rules for storing or mailing property not allowed in their possession or the procedure for claiming property upon release, transfer, or removal (**Deficiency F&PP-2¹²**).

STAFF DETAINEE COMMUNICATION (SDC)

ODO reviewed the ICE request log and determined it did not contain the name of the officer logging the request, the date the request was forwarded to ICE, and the date the request was returned to the detainee (**Deficiency SDC-1¹³**).

SECURITY AND CONTROL

ENVIRONMENTAL HEALTH AND SAFETY (EH&S)

ODO inspected the contents of the maintenance department and found FCDC did not maintain a running inventory of all hazardous chemicals (**Deficiency EH&S-1¹⁴**) and a cabinet contained an unlabeled plastic container, which had an unknown liquid inside (**Deficiency EH&S-2¹⁵**).

Corrective Action: Prior to the completion of the inspection, the facility initiated corrective

¹¹"All CDFs and IGSA facilities will have and follow a policy for the loss or damage to properly receipted detainee property, as follows: ...

5. The [sic] will promptly reimburse detainees for all validated property losses caused by facility negligence;
6. The [sic] will not arbitrarily impose a ceiling on the amount to be reimbursed for a validated claim;
7. The senior contract officer will immediately notify the designated INS officer of all claims and outcomes."

See ICE NDS 2000, Standard, Funds and Personal Property, Section (III)(H)(5-7).

¹² "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;"
4. The procedure for claiming property upon release, transfer, or removal."

See ICE NDS 2000, Standard, Funds and Personal Property, Section (III)(J)(3-4).

¹³ "All requests shall be recorded in a logbook specifically designed for that purpose. The log, at a minimum, shall contain: a. The date the detainee request was received; b. Detainee's name; c. A-number; d. Nationality; e. Officer logging the request; f. The date that the request, with staff response and action, is returned to the detainee; and g. Any other site-pertinent information." See ICE NDS 2000, Standard, Staff-Detainee Communication, Section (III) (B)(2).

¹⁴ "Every area will maintain a running inventory of the hazardous (flammable, toxic, or caustic) substances used and stored in that area." See ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(A).

¹⁵ "The OIC will individually assign the following responsibilities associated with the labeling procedure:

2. Requiring use of properly labeled containers for hazardous materials, including any and all miscellaneous containers into which employees might transfer the material;" See ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(J)(2).

action by establishing an inventory system, inventorying all chemicals in the maintenance department, and identifying the unknown liquid and properly discarding it (C-2).

ODO reviewed facility fire drill documentation and found that although fire drills included [REDACTED], the drills were [REDACTED] (Deficiency EH&S-3¹⁶).

ODO inspected housing [REDACTED] and found the showers were dirty with excessive soap residue, two drain covers were missing; the handicap shower did not maintain a steady flow of water, and the wall behind the trash can in the dining area was dirty with food residue (Deficiency EH&S-4¹⁷).

USE OF FORCE (UOF)

ODO reviewed FCDC's restraint chair procedures and found no documentation that ERO Baltimore approved the restraint chair for use on ICE detainees at FCDC (Deficiency UOF-1¹⁸).

Corrective Action: Prior to the completion of the inspection, the facility initiated corrective action by the ERO Baltimore DFOD issuing a memorandum, approving the optional use of the restraint chair at FCDC (C-3).

HEALTH SERVICES

Medical Care (MC)

ODO reviewed 21 detainee medical files and found two detainees did not receive a physical examination within the 14-day arrival timeframe (Deficiency MC-1¹⁹).

ODO found 3 out of 21 detainee medical files did not contain signed consent forms for medical examinations and treatment (Deficiency MC-2²⁰).

¹⁶ "Monthly fire drills will be conducted and documented separately in each department.

c. [REDACTED] will be included in each fire drill. [REDACTED]

See ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(L)(4)(c).

¹⁷ "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).

¹⁸ "Approved Restraint Equipment

Deviations from the following list of restraint equipment are prohibited: ...

9. Any other INS-approved restraint device." See ICE NDS 2000, Standard, Use of Force, Section (III)(C)(9).

¹⁹ "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. If there is documented evidence of a health appraisal within the previous 90 days, the facility health care provider may determine that a new appraisal is not required." See ICE NDS 2000, Standard, Medical Care, Section (III)(D).

²⁰ "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). **This is a repeat deficiency.**

Corrective Action: Prior to the completion of the inspection, the facility initiated corrective action by having the detainees sign the consent forms and included the forms in their respective detainee medial files (C-4).

ODO observed three different types of insulin (Regular, Isophane and 70/30) stored in the same bin in the medication refrigerator, instead of separate bins. ODO noted this as an **Area of Concern**.

PBNDS 2011 STANDARD INSPECTED

Sexual Abuse and Assault Prevention and Intervention (SAAPI)

ODO reviewed FCDC’s SAAPI policy and procedures and found no documentation that the ERO Baltimore Office reviewed and approved the facility’s SAAPI policy and procedures. (**Deficiency SAAPI-1²¹**).

Corrective Action: Prior to the completion of the inspection, the facility initiated corrective action by the ERO Baltimore DFOD reviewing the facility’s SAAPI policy and procedures and issuing a memorandum, which approved the SAAPI policy and procedures (C-5).

CONCLUSION

During this inspection, ODO assessed the facility’s compliance with 18 standards under NDS 2000 and found the facility in compliance with 10 of those standards. ODO found 16 deficiencies in the remaining eight standards. ODO commends facility staff for their responsiveness during this inspection and noted five instances where staff initiated immediate corrective action during the inspection. ODO recommends ERO work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations.

Compliance Inspection Results Compared	FY 2016 (NDS 2000)	FY 2019 (NDS 2000)
Standards Reviewed	16	18
Deficient Standards	3	8
Overall Number of Deficiencies	3	16
Deficient Priority Components	0	0
Repeat Deficiencies	0	1
Corrective Actions	2	5

²¹ “The facility’s written policy and procedures require the review and approval of the Field Office Director.” See ICE PBNDS 2011, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (V)(A).