



**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

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**Office of Detention Oversight  
Compliance Inspection**

**Enforcement and Removal Operations  
ERO Miami**

**Broward Transitional Center  
Pompano Beach, Florida**

**September 14 – September 17, 2020**

**COMPLIANCE INSPECTION**  
**of the**  
**BROWARD TRANSITIONAL CENTER**  
Pompano Beach, Florida

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## COMPLIANCE INSPECTION TEAM MEMBERS



Section Chief, Team Lead

Inspections and Compliance Specialist

Inspections and Compliance Specialist

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 Broward Transitional Center (BTC) in Pompano Beach, Florida, from September 14 to 17, 2020.<sup>1</sup> The facility opened in February 1998, which is owned and operated by The Geo Group. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at BTC in 2002 under the oversight of ERO’s Field Office Director in Miami (ERO Miami). The facility operates under the Performance-Based National Detention Standards (PBNDS) 2011 (Revised 2016).

ERO personnel, including a detention service manager are assigned to the facility on a full-time basis. The BTC facility administrator handles daily facility operations and is supported by ██████ personnel. The GEO Group provides food services and medical care, and Keefe provides commissary services at the facility. The facility was accredited by The National Commission on Correctional Health Care in April 2018 and Department of Justice Prison Rape Elimination Act (PREA) in January 2018.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity <sup>2</sup>	700
Average ICE Detainee Population <sup>3</sup>	██████
Male Detainee Population (as of 9/14/2020)	██████
Female Detainee Population (as of 9/14/2020)	██████

During its last inspection, in Fiscal Year (FY) 2019, ODO found 5 deficiencies in the following areas: Custody Classification System (2); Staff-Detainee Communication (1); Use of Force and Restraints (2).

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

<sup>2</sup> Data Source: ERO Facility List Report as of September 4, 2020.

<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.

ODO was unable to conduct an on-site inspection of this facility, as a result of the COVID-19 pandemic, and instead, conducted a remote inspection of the facility. During this remote inspection, ODO interviewed facility staff, ERO field office staff, and detainees, reviewed files and detention records, and was able to assess compliance for at least 90 percent or more of the ICE national detention standards reviewed during the inspection.

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

## FINDINGS BY PERFORMANCE-BASED NATIONAL DETENTION STANDARDS 2011 (REVISED 2016) MAJOR CATEGORIES

PBNDs 2011 (Revised 2016) Standards Inspected <sup>5</sup>	Deficiencies
<b>Part 1 – Safety</b>	
Environmental Health and Safety	0
<b>Sub-Total</b>	<b>0</b>
<b>Part 2 – Security</b>	
Admission and Release	2
Custody Classification System	0
Funds and Personal Property	2
Sexual Abuse and Assault Prevention and Intervention	0
Special Management Unit	0
Staff-Detainee Communication	1
Use of Force and Restraints	1
<b>Sub-Total</b>	<b>6</b>
<b>Part 4 – Care</b>	
Food Service	1
Medical Care	0
Medical Care Women	0
Significant Self-harm and Suicide Prevention and Intervention	0
Disability Identification, Assessment, and Accommodation	0
<b>Sub-Total</b>	<b>1</b>
<b>Part 5 – Activities</b>	
Recreation	0
Religious Practices	0
Telephone Access	0
Visitation	0
<b>Sub-Total</b>	<b>0</b>
<b>Part 6 – Justice</b>	
Grievance System	0
Law Libraries and Legal Material	0
<b>Sub-Total</b>	<b>0</b>
<b>Total Deficiencies</b>	<b>7</b>

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

## DETAINEE RELATIONS

ODO interviewed 12 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination or mistreatment; however, one out of the 12 detainees made an allegation involving abuse. Most detainees reported satisfaction with facility services except for the concerns listed below. ODO conducted the interviews via video teleconference.

*Religious Practices:* One detainee stated he was unable to practice his religion as a Seven-Day Adventist.

- Action Taken: ODO spoke with the facility program manager who oversees religious practices and acknowledged the chaplain stated that due to the COVID-19 pandemic, community religious members who provided outside religious services were not being permitted into the facility. In the interim, the program manager would inform the chaplain to provide Seven-Day Adventist religious material to the detainee.

*Medical Care:* One detainee stated he requested the medical department provide him with medication to assist him with sleeping; however, the medication was not working.

- Action Taken: ODO reviewed the detainee's medical file that showed he had lab work done on August 26, 2020. The detainee was seen in the chronic care clinic on September 4, 2020, and his labs were discussed with him. The detainee did not show up to take his dose of Vistaril, which is used to treat anxiety and tension, and he also missed several doses of a 30-day medication ordered by the facility registered nurse. On September 4, 2020, the detainee informed the medical doctor he did not want to take his medication anymore; however, he was scheduled for a follow-up with telehealth in a few weeks.

*Law Library:* One detainee stated the time for accessing the law library and legal material was insufficient since it was during his lunch period.

- Action Taken: ODO reviewed the law library hours, which were 10:00 am to 1:00 pm. These hours allowed detainees to use the law library and legal material services before and after the lunch period, which is 11:30 am to 12:30pm.

*Grievance System:* One detainee stated the grievance system did not work because the complaints submitted by detainees were being reviewed by other staff members within the facility.

- Action Taken: ODO reviewed the detainee's file and identified there was no grievance filed on behalf of the detainee. ODO also reviewed the facility's grievance system which was in compliance with PBNDS 2011 (Revised 2016).

*Food Services:* One detainee stated the food provided on the weekend was inadequate (only a sandwich and chips were served).

- Action Taken: ODO interviewed the food service administrator and reviewed the weekend menu for three consecutive weeks, which was provided in the advanced documentation sent by the facility. The meals consisted of cereal and oatmeal for

breakfast, sliced turkey and chicken salad for lunch, and chicken and rice and chicken patties for dinner.

*Sexual Assault and Prevention and Intervention (SAAPI)*: One detainee stated random detainees made sexual verbal comments and gestures of an offensive sexual nature towards him while in custody at the facility. Specifically, another detainee attempted to flirt with him by blowing him a kiss.

- Action Taken: ODO immediately requested ICE/ERO Miami and the facility compliance administrator initiate the PREA protocols in response to this incident. ODO also requested the names of the detainees in the incident during the interview; however, the detainee was unable to provide this information.

The facility compliance administrator interviewed the detainee on September 14, 2020, regarding his allegation. During the interview, the detainee stated he was asked the SAAPI question on the detainee interview form and felt he had to answer with something but never thought his response would be told to anyone else. The detainee stated the PREA incident was not anything he ever wanted to report, and the incident was “no big deal.” He stated while in the lunch line a detainee identifying as LGBTQI was staring at him and he asked the detainee what his problem was, and the detainee identifying as LGBTQI blew a kiss at him. The detainee reporting the allegation said he did not feel the detainee identifying as LGBTQI was trying to coerce or intimidate him or make an attempt to engage in sexual activity. This incident was not repeated; he never saw or heard from the detainee identifying as LGBTQI again nor did he know his name. The detainee also stated he felt comfortable in the facility and did not have any fears or concerns.

Based on the statement provided to the SAAPI investigator by the detainee, the allegation did not meet the PREA threshold; however, ODO confirmed the incident was reported to the ICE Joint Intake Center on September 15, 2020.



# COMPLIANCE INSPECTION FINDINGS

## SECURITY

### ADMISSION AND RELEASE (A&R)

ODO reviewed 12 detainee detention files and found no evidence in 2 out of 12 files that detainees were provided an orientation to the facility or attended a question-and-answer session (**Deficiency AR-1<sup>6</sup>**).

ODO reviewed five detainee release files and found two out of five files did not document the return of institution-issued clothing at the time of release from the facility (**Deficiency AR-2<sup>7</sup>**).

### STAFF-DETAINEE COMMUNICATION (SDC)

ODO reviewed the facility's detainee request forms and found ICE/ERO Miami does not always respond within 3 business days of receipt (**Deficiency SDC-1<sup>8</sup>**).

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

ODO interviewed the F&PP captain and found small and large valuable lockers were accessible to the shift supervisor, but the property officer had unauthorized access (**Deficiency F&PP-1<sup>9</sup>**).

ODO reviewed 12 detainee detention files and found 2 out of 12 files did not document the deposit of detainee funds during the intake process (**Deficiency F&PP-2<sup>10</sup>**).

### USE OF FORCE AND RESTRAINTS (UOF&R)

ODO reviewed audio-visual recordings and documentation (UOF & After-Action Report, dated May 26, 2020) for the only calculated UOF incident during the inspection period. ODO found no evidence correctional staff consulted with medical staff to determine if the detainee had medical/mental health issues requiring specific precautions prior to the calculated UOF

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<sup>6</sup> "F. Orientation: All facilities shall have a method to provide ICE/ERO detainees an orientation to the facility as soon as practicable, in a language or manner that detainees can understand...Following the orientation, staff shall conduct a question-and-answer session..." See ICE PBNDS 2011, Standard, Admission and Release, Section (V)(F).

<sup>7</sup> "H. Releases: Facility staff assigned to processing must complete certain procedures before any detainee's release, removal, or transfer from the facility. Necessary steps include, but are not limited to: completing out-processing forms; closing files and fingerprinting; returning personal property, reclaiming facility-issued clothing, identification cards, handbooks, and bedding; and checking wants and warrants..." See ICE PBNDS 2011, Standard, Admission and Release, Section (V)(H).

<sup>8</sup> "In Facilities with ICE/ERO Onsite Presence The ICE/ERO staff member receiving the request shall normally respond in person or in writing as soon as possible and practicable, but no later than within three (3) business days of receipt." See ICE PBNDS 2011, Standard, Staff-Detainee Communication, Section (V)(B)(1)(a).

<sup>9</sup> "...Both the safe and large-valuable locker shall either be kept in the shift supervisor's office or otherwise secured in an area accessible only to the shift supervisor." See ICE PBNDS 2011, Standard, Funds and Personal Property, Section (V)(A).

<sup>10</sup> "1. Funds For recordkeeping and accounting purposes, use of the G-589 Property Receipt form or its equivalent is mandatory to inventory any funds removed from a detainee's possession, and a separate G-589 for or its equivalent is required for each kind of currency and negotiable instrument..." See ICE PBNDS 2011, Standard, Funds and Personal Property, Section (V)(G)(1).

commencing (**Deficiency UOF&R-1<sup>11</sup>**). On September 18, 2020, after the conclusion of the inspection, ODO received a document from ERO Miami entitled “Progress Notes,” dated May 23, 2020, which was authored by the facility medical staff and indicated the facility’s medical review found there were no medical issues preventing the calculated UOF.

## **CARE**

### **FOOD SERVICES (FS)**

ODO interviewed the food service administrator and reviewed the 35-day cycle menu and found during the 40 days of Lent, the food service department did not offer a meatless meal during lunch and dinner every Friday and on Ash Wednesday (**Deficiency FS-1<sup>12</sup>**).

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

ODO identified a **Best Practice** at the facility in the provision of specialty health care and continuity of care; elements of the 2011 PBNDS Medical Care Standard. Specifically, the facility utilized multiple health care resources in the local community to provide specialized medical, dental, and mental health care to the detainee population. In the past twelve months, September 2019 - August 2020, there were 717 detainee health care encounters with specialists in the local community reported by the facility health services administrator.

## **ACTIVITIES**

### **TELEPHONE ACCESS (TA)**

ODO identified each detainee housed at the facility were given access to a tablet, which can be used for making audio/video calls, submitting request forms, as well as communicating directly with facility staff. The facility staff encouraged detainees to utilize the tablet to submit request forms and to communicate directly with the facility. Since there were [REDACTED] detainees housed at the facility with only 114 telephones, the addition of the tablets assisted detainees with easier access to family, friends, lawyers, ERO and facility services. ODO identified this as a **Best Practice**.

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<sup>11</sup> “...Calculated use of force requires supervisor pre-authorization and consultation with medical staff to determine if the detainee has medical issues requiring specific precautions.” See ICE PBNDS 2011, Standard, Use of Force and Restraints, Section (V)(B)(15).

AND

“1. Confrontation Avoidance Before authorizing the calculated use of force, the on-site ranking detention official, a designated health professional and others as appropriate shall assess the situation. Taking into account the detainee’s history and the circumstances of the immediate situation, they shall determine the appropriateness of using force.” See ICE PBNDS 2011, Standard, Use of Force and Restraints, Section (V)(I)(1).

AND

“...3) shall seek the advance guidance of qualified health personnel (based on a review of the detainee’s medical record) to identify physical or mental issues and, whenever feasible, arrange for a health services professional to be present to observe and immediately treat any injuries...” See ICE PBNDS 2011, Standard, Use of Force and Restraints, Section (V)(I)(3)(d)(3).

<sup>12</sup> “During the Christian season of Lent, a meatless meal (lunch and dinner) shall be served on the food service line on Fridays and on Ash Wednesday.” See ICE PBNDS 2011, Standard, Food Service, Section (V)(G)(13)(c).

## CONCLUSION

During this inspection, ODO assessed the facility's compliance with 19 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 14 of those standards. ODO found seven deficiencies in the remaining five standards. Additionally, ODO cited Best Practices in Medical Care and Telephone Access. ODO commends facility staff for their responsiveness during this inspection. ODO recommends ERO work with facility personnel to remedy any deficiencies that remain outstanding, as applicable and in accordance with contractual obligations.

<b>Compliance Inspection Results Compared</b>	<b>FY 2019 (PBNDS 2011) Revised 2016</b>	<b>FY 2020 (PBNDS 2011) Revised 2016</b>
Standards Reviewed	19	19
Deficient Standards	5	5
Overall Number of Deficiencies	6	7
Repeat Deficiencies	N/A	0
Corrective Actions	4	0