

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 Miami Field Office

Baker County Sheriff's Office Macclenny, Florida

November 29-December 2, 2021

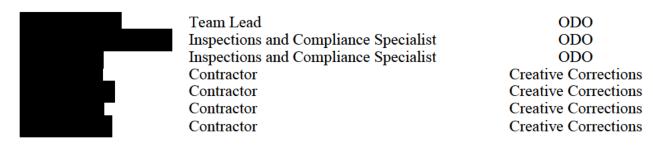
COMPLIANCE INSPECTION of the BAKER COUNTY SHERIFF'S OFFICE

Macclenny, Florida

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COMPLIANCE INSPECTION TEAM MEMBERS



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 Baker County Sheriff's Office (BCSO) in Macclenny, Florida, from November 29 to December 2, 2021.¹ The facility opened in June 2009, is owned by Baker County Correctional Management Corporation, and is operated by the Baker County Sheriff's Office. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at BCSO in November 2009 under the oversight of ERO's Field Office Director in Miami (ERO Miami). The facility operates under the National Detention Standards (NDS) 2019.

ERO has assigned deportation officers to the facility. A BCSO facility administrator handles daily facility operations and manages support personnel. Trinity Food Service provides food services, Armor Correctional provides medical care, and Keefe Commissary provides commissary services at the facility. In October 2021, BCSO was audited for the Department of Justice (DOJ) Prison Rape Elimination Act (PREA) and was DOJ PREA certified.

Capacity and Population Statistics	Quantity	
ICE Detainee Bed Capacity ²		
Average ICE Detainee Population ³		
Male Detainee Population (as of November 29, 2021)		
Female Detainee Population (as of November 29, 2021)		

During its last inspection, in Fiscal Year (FY) 2021, ODO found three deficiencies in the following areas: Environmental Health and Safety (1); Recreation (1); and Use of Force and Restraints (1).

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

² Data Source: ERO Facility List Report as of October 12, 2021.

COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population greater than 10, 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 its decision-making to better allocate resources across the agency's entire detention inventory.

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

FINDINGS BY NATIONAL DETENTION STANDARDS 2019 MAJOR CATEGORIES

NDS 2019 Standards Inspected ^{5&6}	Deficiencies			
Part 1 – Safety				
Environmental Health and Safety	1			
Sub-Total	1			
Part 2 – Security				
Admission and Release	0			
Custody Classification System	0			
Funds and Personal Property	0			
Post Orders	2			
Searches of Detainees	2			
Special Management Units	0			
Sexual Abuse and Assault Prevention and Intervention	0			
Use of Force and Restraints	0			
Sub-Total	4			
Part 4 – Care	•			
Food Service	0			
Hunger Strikes	0			
Medical Care	0			
Personal Hygiene	2			
Significant Self-Harm and Suicide Prevention and Intervention	2			
Sub-Total	4			
Part 5 – Activities	•			
Correspondence and Other Mail	1			
Recreation ⁷	1			
Voluntary Work Program	0			
Sub-Total	2			
Part 6 – Justice	•			
Legal Rights Group Presentations	0			
Sub-Total	0			
Part 7 – Administration and Management				
Detention Files	0			
Detainee Transfers	0			
Sub-Total	0			
Total Deficiencies	11			

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

⁶ Beginning in FY 2022, ODO instituted a process of rotating all standards on a 3-year basis. As a result, some standard components may not be present in all inspections.

⁷ ODO identified and cited the deficiency under the Recreation standard while performing detainee interviews; ODO did not review the Recreation standard in its entirety.

DETAINEE RELATIONS

ODO interviewed 22 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.

Food Service: Seventeen detainees stated meals served at the facility were not prepared well and the menu was not diverse.

• Action Taken: ODO interviewed the BCSO food service director, observed meal service, and reviewed the 5-week master cycle menu and a certified statement of nutritional adequacy, dated April 16, 2021. ODO visually inspected the facility's food preparation and meal service and found meals were well prepared and diverse. ODO reviewed food service temperature logs and noted staff documented appropriate temperatures with a minimum serving temperature of 140 degrees Fahrenheit. ODO observed two meal service periods and noted meal temperatures of 158 degrees Fahrenheit on December 1, 2021, and 140 degrees Fahrenheit on December 2, 2021. Additionally, ODO verified a registered dietician approved the facility's cycle menus in providing an average of 2500 calories per day and meeting recommended nutritional and caloric requirements.

Recreation: Four female detainees stated the facility did not provide them 1 hour of outdoor recreation, 5 days per week.

• Action Taken: ODO reviewed the BCSO recreation schedule and detainee recreation logs and interviewed a BCSO lieutenant. ODO verified the BCSO recreation schedule included 1 hour of daily outdoor recreation time for each housing pod, Monday through Friday; however, for the month of November 2021, detainee recreation logs reflected only 2 days of outdoor recreation offered to the four detainees. ODO cited this as a deficiency in the *Recreation* section of this report.

COMPLIANCE INSPECTION FINDINGS

SAFETY

ENVIRONMENTAL HEALTH AND SAFETY (EHS)

ODO interviewed facility staff, inspected the barbering location, and found the facility did not provide detainees with all equipment necessary for maintaining sanitary procedures of hair care. Specifically, the facility did not provide detainees laundered towels nor haircloths for barber operations (**Deficiency EHS-47**8).

⁸ "Barber operations will be provided with all equipment and facilities necessary for maintaining sanitary procedures of hair care, including containers for waste, disinfectants, disposable headrest covers, laundered towels, and haircloths." See ICE NDS 2019, Standard, Environmental Health and Safety, Section (II)(H)(1)(c).

SECURITY

POST ORDERS (PO)

ODO reviewed 17 POs and found officers did not sign and date POs to indicate they read and understood their provisions prior to assuming a post (**Deficiency PO-7**⁹).

ODO reviewed 17 facility POs and found in 3 out of 17 POs, the facility did not review nor update the POs annually. Specifically, the facility did not review nor update POs for Laundry Deputy (January 2019), Booking Supervisor (December 2019), nor Kitchen Deputy (April 2020) (**Deficiency PO-8**¹⁰).

SEARCHES OF DETAINEES (SD)

ODO reviewed facility policy, interviewed facility staff, and found the facility did not require detainees to provide a urine sample within 2 hours of their placement under close observation (**Deficiency SD-39** ¹¹).

ODO reviewed facility policy, interviewed facility staff, and found the facility did not require detainees to provide a second urine sample prior to their release from close observation (Deficiency SD-40 12).

CARE

PERSONAL HYGIENE (PH)

ODO reviewed facility policy and found the facility did not exchange detainee socks and undergarments daily. Specifically, the facility provided detainees two pairs of socks that were exchanged two times per week (**Deficiency PH-11** ¹³).

ODO observed facility staff members of the opposite gender did not consistently announce their presence when entering an area where detainees were likely to be showering, performing bodily functions, or changing clothing (Deficiency PH-20¹⁴).

⁹ "Prior to assuming a post, officers will sign and date the post order to indicate having read and understood its provisions." See ICE NDS 2019, Standard, Post Orders, Section (II)(B).

¹⁰ "Post orders will be kept current at all times. Post orders will be reviewed and updated at least annually." See ICE NDS 2019, Standard, Post Orders, Section (II)(C).

¹¹ "For the detainee's safety, he or she shall be required to provide a urine sample within two hours of placement under close observation." See ICE NDS 2019, Standard, Searches of Detainees, Section (II)(D)(4)(a).

¹² "A second urine sample shall be required prior to releasing the detainee from close observation." See ICE NDS 2019, Standard, Searches of Detainees, Section (II)(D)(4)(a).

¹³ "Socks and undergarments will be exchanged daily, outer garments at least twice weekly and sheets, towels, and pillowcases at least weekly." See ICE NDS 2019, Standard, Personal Hygiene, Section (II)(E).

¹⁴ "Staff of the opposite gender shall announce their presence when entering an area where detainees are likely to be

showering, performing bodily functions, or changing clothing." See ICE NDS 2019, Standard, Personal Hygiene, Section (II)(G).

SIGNIFICANT	SELF-HARM	AND SUICIDE	PREVENTION	AND INTER	VENTION
(SSHSPI)					

ODO reviewed facility policy and medical records of detainees the facility placed on constant monitoring and found in files, mental health providers did not perform welfare checks every 8 hours. Specifically, mental health providers performed welfare checks every 24 hours (Deficiency SSHSPI-22 15).

ODO reviewed facility policy and medical records of the detainees the facility placed on close observation and found in the files, mental health providers did not perform welfare checks every 8 hours. Specifically, mental health providers performed welfare checks every 24 hours (Deficiency SSHSPI-28¹⁶).

ACTIVITIES

CORRESPONDENCE AND OTHER MAIL (COM)

ODO reviewed facility policy, interviewed facility staff, and found staff did not refrain from copying incoming special correspondence. Specifically, ODO found facility staff opened incoming special correspondence in front of detainees and made a photocopy of the special correspondence. Facility staff provided the photocopy to the detainee and placed the original correspondence in the detainee's personal property (**Deficiency COM-22** ¹⁷).

RECREATION (R)

ODO interviewed female detainees and a BCSO captain, reviewed detainee recreation logs, and found out of female detainees were not provided outdoor recreation for at least 1 hour per day, 5 days per week. Specifically, detainee recreation logs reflect female detainees were only provided access to two outdoor recreation sessions in the month of November 2021 (Deficiency R-3 18). This is a repeat deficiency.

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 20 standards under NDS 2019 and found the facility in compliance with 13 of those standards. ODO found 11 deficiencies in the remaining 7 standards. ODO recommends ERO Miami work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations. ERO provided ODO with the uniform corrective action plan for ODO's last inspection of BCSO on June 7, 2021.

¹⁵ "A mental health provider will perform welfare checks every 8 hours." See ICE NDS 2019, Standard, Significant Self-harm and Suicide Prevention and Intervention, Section (II)(F).

¹⁶ "A mental health provider will perform welfare checks every 8 hours." See ICE NDS 2019, Standard, Significant Self-harm and Suicide Prevention and Intervention, Section (II)(F).

¹⁷ "Staff shall neither read nor copy incoming or outgoing special correspondence." See ICE NDS 2019, Standard, Correspondence and Other Mail, Section (II)(E)(2).

¹⁸ "Weather permitting, each detainee shall have access for at least one hour per day, five days per week; or, six or more hours per week, at least four days per week." See ICE NDS 2019, Standard, Recreation, Section (II)(A)(1).

Compliance Inspection Results Compared	FY 2021 (NDS 2019)	FY 2022 (NDS 2019)
Standards Reviewed	12	20
Deficient Standards	3	7
Overall Number of Deficiencies	3	11
Repeat Deficiencies	1	1
Areas of Concern	2	0
Corrective Actions	0	0
Facility Rating	N/A	Good