

Office of Detention Oversight Compliance Inspection

Enforcement and Removal Operations ERO Miami Field Office

Broward Transitional Center Pompano Beach, Florida

February 8-11, 2021

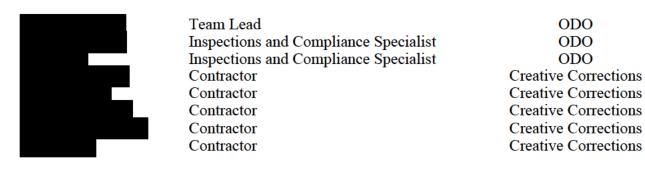
COMPLIANCE INSPECTION of the Broward Transitional Center

Pompano Beach, 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 Broward Transitional Center (BTC) in Pompano Beach, Florida, from February 8-11, 2021. The facility opened in February 1998 and is owned and operated by the GEO Group, Inc. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at BTC in August 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 has assigned deportation officers (DO) and a detention services manager to the facility. A 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 American Correctional Association in August 2017 and the National Commission on Correctional Health Care in April 2018. In January 2018, BTC was audited for the Department of Homeland Security (DHS) Prison Rape Elimination Act (PREA) and was DHS PREA certified.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity ²	700
Average ICE Detainee Population ³	
Male Detainee Population (as of 2/8/2021)	
Female Detainee Population (as of 2/8/2021)	

During its last inspection, in Fiscal Year (FY) 2020, ODO found 7 deficiencies in the following areas: Food Service (1), Admissions and Release (2), Staff-Detainee Communication (1), Funds and Personal Property (2), and Use of Force and Restraints (1).

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

² Data Source: ERO Facility List Report as of February 8, 2021.

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.

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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⁴ 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 ⁵	Deficiencies
Part 1 – Safety	•
Emergency Plans	0
Environmental Health and Safety	0
Sub-Total	0
Part 2 – Security	
Admission and Release	0
Custody Classification System	0
Facility Security and Control	1
Funds and Personal Property	1
Hold Rooms ⁶	0
Population Counts	0
Sexual Abuse and Assault Prevention and Intervention	0
Staff-Detainee Communication	0
Use of Force and Restraints	0
Sub-Total	2
Part 4 – Care	
Food Service	0
Hunger Strikes	0
Medical Care	0
Medical Care (Women)	0
Significant Self-harm and Suicide Prevention and Intervention	0
Disability Identification, Assessment, and Accommodation	0
Sub-Total	0
Part 5 – Activities	
Religious Practices	0
Telephone Access	1
Sub-Total	1
Part 6 – Justice	
Grievance Systems	0
Law Libraries and Legal Material	0
Sub-Total	0
Total Deficiencies	3

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

⁶ The Hold Rooms standard was inspected since BTC did not maintain a Special Management Unit

DETAINEE RELATIONS

ODO interviewed 12 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. ODO conducted detainee interviews via video teleconference.

Food Service: Seven out of twelve detainees interviewed claimed the food was bad, of poor quality, and small portions were served. One detainee claimed the facility only provided a snack for lunch and not a full meal on the weekends. Another detainee stated he received moldy bread with a meal.

 Action Taken: ODO interviewed the food service administrator (FSA) and discussed detainees' complaints stating the food was bad, of poor quality, and the portions were small. Additionally, ODO discussed a detainee's complaint, relating to him receiving moldy bread with a meal. ODO found bread was being delivered to the facility every Friday; however, the FSA was unaware of any issues with mold. ODO reviewed the 35day cycle menu and the nutritional analysis and adequacy statement signed by the facility's registered dietician, which confirmed the portion sizes met both State and National Regulatory Guidelines. The weekend meal changes on cycle one of the 35-day cycle menu was served the weekend of February 6-7, 2021. On Saturday, February 6, 2021, the lunch menu changed from 4 ounces (oz.) of sliced turkey and four slices of bread to 2 turkey hot dogs and 2 slices of bread, 2 teaspoons (tsps.) of mustard, and also included chips, cookies, fruit, and fortified tea. On Sunday, February 7, 2021, the lunch menu changed from 4 oz. of chicken salad to a 4 oz. hamburger patty, 2 slices of bread and 1 tsp. of mustard and mayo salad dressing, and also included chips, cookies, fruit, and fortified tea. ODO determined the meals served at the facility met standard requirements. Additionally, ODO was informed detainees may address any food issues with the facility staff at any time and the issues would be addressed immediately.

Staff-Detainee Communication: One detainee alleged he submitted multiple requests to ERO Miami to check on his immigration case status and had never received a response back from ERO Miami.

• Action Taken: ODO reviewed the facility's detainee request log and found the detainee placed multiple requests to ERO Miami, and each request was responded to within the three-day requirement. On January 22, 2021, an ERO Miami DO met with the detainee to review details of his case and answer any pertinent questions. On February 9, 2021, the detainee was again visited by a DO and given a case update and answered any additional questions the detainee wanted to discuss with ERO Miami.

Telephone Access/Tablet Connectivity: One detainee alleged the telephones disconnect between the hours of 5-9 p.m. daily for 3-4 days, and no one could use the telephones during the time period.

• Action Taken: ODO contacted a facility program manager to investigate the telephone connectivity complaint. On February 10, 2021, the facility staff interviewed the detainee concerning the telephone connectivity issue. The detainee stated he was referring to the

facility's tablets having connectivity issues around the hours of 5-9 p.m. daily for 3-4 days and not the actual telephones. The facility staff notified the Global Tel's technical support on February 9, 2021, and a technician did a facility walkthrough with an interpreter to check for issues in all the facility's housing areas on the same day. Each room in the housing area contained a charging station with six tablets for each of the six detainees. The technician noted the Wi-Fi was working and did not receive any complaints about tablet connectivity from the detainees during the walkthrough; however, the technician did replace three faulty tablets. In addition, the detainee was advised to notify the facility staff if the issue persisted. On February 11, 2021, the facility's program manager conducted a follow-up interview with the detainee, and he stated the detainee was no longer having connectivity issues with the tablet.

COMPLIANCE INSPECTION FINDINGS

SECURITY

FACILITY SECURITY AND CONTROL (FS&C)

The facility's visitors' logbooks located at the front entrance of the facility did not contain printed or cursive signatures of all visitors (**Deficiency FS&C-26**⁷).

FUNDS AND PERSONAL PROPERTY (F&PP)

ODO reviewed the facility's Detainee Property Log and found 5 out of 80 entries did not list a security tie-strap number (**Deficiency F&PP-98**8).

ACTIVITIES

TELEPHONE ACCESS (TA)

ODO observed photographs revealing the facility's pro bono legal service provider's lists posted throughout the facility did not contain current information (Deficiency TA-12⁹).

Corrective Action: On February 10, 2021, the facility provided ODO with photographs indicating the facility's pro bono legal service provider's lists posted throughout the facility, which were updated to contain the most current information.

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 21 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 18 of those standards. ODO found three deficiencies in the remaining three standards. ODO commends facility staff for their responsiveness during this inspection and notes there was one instance where the facility's 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.

⁷ "The post officer shall require the visitor to print and sign his/her name in the visitor logbook." See ICE PBNDS 2011, Standard, Facility Security and Control, Section (V)(C)(1)(b)(3).

⁸ "A logbook shall be maintained listing detainee name, A-number or facility detainee number, I-77 number, security tie-strap number, property description, date issued, and date returned." *See* ICE PBNDS 2011, Standard, Funds and Personal Property, Section (V)(I).

⁹ "All Field Offices are responsible for ensuring facilities which house ICE detainees under their jurisdiction are provided with current pro bono legal service information." *See* ICE PBNDS 2011, Standard, Telephone Access, Section (V)(A)(3).

Compliance Inspection Results Compared	FY 2020 (PBNDS 2011) (Revised 2016)	FY 2021 (PBNDS 2011) (Revised 2016)
Standards Reviewed	19	21
Deficient Standards	5	3
Overall Number of Deficiencies	7	3
Repeat Deficiencies	0	0
Areas of Concern	0	0
Corrective Actions	0	1