

# Office of Detention Oversight Compliance Inspection

# Enforcement and Removal Operations ERO Miami Field Office

Glades County Detention Center Moore Haven, Florida

February 1-5, 2021

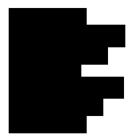
# COMPLIANCE INSPECTION of the GLADES COUNTY DETENTION CENTER

Moore Haven, Florida

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### COMPLIANCE INSPECTION TEAM MEMBERS



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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 Contingency Compliance inspection of the Glades County Detention Center (GCDC) in Moore Haven, Florida from February 1-5, 2021. The facility opened in 2007 and is owned by Glades Correctional Development Corporation and operated by the Glades County Sheriff's Office (GCSO). The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at GCDC in 2007 under the oversight of ERO's Field Office Director (FOD) in Miami (ERO Miami). The facility operates under the National Detention Standards (NDS) 2019.

ERO has assigned deportation officers and a detention services manager to the facility. A GCSO commander handles daily facility operations and is supported by personnel. GCDC staff provides food services, Armor Correctional Health Services provides medical care, and Oasis Management System provides commissary services at the facility. The facility does not hold any accreditations from any outside entities.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity <sup>2</sup>	324
Average ICE Detainee Population <sup>3</sup>	
Male Detainee Population (as of 2/1/2021)	
Female Detainee Population (as of 2/1/2021)	

During its last inspection, in Fiscal Year (FY) 2020, ODO found 17 deficiencies in the following Custody Classification System (1); Disability Identification, Assessment, and Accommodation (1); Environmental Health and Safety (1); Food Service (3); Medical Care (2); Special Management Units (4); Telephone Access (1); Use of Force and Restraints (1); and Visitation (3).

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

<sup>&</sup>lt;sup>2</sup> Data Source: ERO Facility List Report as of February 1, 2021.

#### 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>&</sup>lt;sup>4</sup> ODO reviews the facility's compliance with selected standards in their entirety.

### FINDINGS BY NATIONAL DETENTION STANDARDS 2019 **MAJOR CATEGORIES**

NDS 2019 Standards Inspected <sup>5&amp;6</sup>	Deficiencies
Part 1 – Safety	
Environmental Health and Safety	1
Sub-Total	1
Part 2 – Security	
Admission and Release	0
Custody Classification System	3
Facility Security and Control	0
Funds and Personal Property	0
Use of Force and Restraints	0
Special Management Units	0
Staff-Detainee Communication	2
Sexual Abuse and Assault Prevention and Intervention	0
Sub-Total	5
Part 4 – Care	
Food Service	0
Hunger Strikes	0
Medical Care	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	2
Sub-Total	2
Part 6 – Justice	
Grievance Systems	0
Law Libraries and Legal Materials	0
Sub-Total	0
Total Deficiencies	8

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

<sup>&</sup>lt;sup>6</sup> Beginning in FY 2021, ODO added Emergency Plans, Facility Security and Control, Population Counts, Hunger Strikes, and Staff Training as core standards. NDS 2019 does not include Emergency Plans, Population Counts, nor Staff Training as individual standards; however, those specific requirements are resident in other core standards.

#### **DETAINEE RELATIONS**

ODO interviewed 12 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. One detainee expressed mental health concerns during the interview and ODO immediately referred him to the facility's medical staff for evaluation. Most detainees reported satisfaction with facility services except for the concerns listed below. ODO attempted to conduct detainee interviews via video teleconference; however, the ERO field office and facility were not able to accommodate this request due to technology issues. As such, the detainee interviews were conducted via telephone.

Environmental Health and Safety: Three detainees stated numerous toilets in their housing units were inoperable.

• Action Taken: ODO interviewed the facility's safety manager (SM) and was able to confirm the facility routinely had maintenance requests for the toilets in the detainee housing units. The SM informed ODO, repairs to the toilets were frequently required because detainees flushed contraband and other large items down the toilets, and the detainees kicked the flush handles in lieu of using their hands to flush the toilets. Additionally, the SM stated repair parts were often back-ordered, which caused delays in completing the repairs. The facility was aware of this issue and will continue to monitor the situation. ODO found all toilets were operational during the inspection.

*Telephone Access:* Three detainees stated there were numerous inoperable telephones in their housing units.

 Action Taken: ODO spoke with the facility commander and reviewed the telephone service provider's work orders. ODO found the telephone service provider's repair staff had recently tested all detainee housing unit telephones and determined all telephones were in working order. Additionally, the facility's shift supervisor conducted telephone checks daily during the inspection and all telephones were in working order.

Staff-Detainee Communication: One detainee stated ERO Miami issued a blanket denial for all marriage requests, which prevented him from getting married.

• Action Taken: ODO spoke with an ERO Miami supervisory detention and deportation officer (SDDO), who confirmed the field office issued a directive to deny all detainees' marriage requests "across the board." ODO conferred with ERO Headquarters Custody Management Division (CMD) and found ERO had not suspended marriage requests as part of their temporary suspension of social visitation directive. CMD informed ODO marriage requests remained open for approval or denial by the FOD, who should review each marriage request on a case-by-case basis, taking relevant factors affecting their specific area of responsibility into consideration. ODO cited the field office's blanket denial of marriage requests as a deficiency in the Staff-Detainee Communication standard.

*Medical Care:* One detainee stated he had a broken finger, which had not healed properly, and his finger needed to be rebroken and reset. Additionally, he stated he requested treatment several months ago and the facility had not provided him with his requested treatment.

• Action Taken: ODO reviewed the detainee's medical chart and interviewed the facility's acting health service administrator (HSA). ODO found the detainee reported a deformity of his fifth right finger to the facility's medical staff during his initial health assessment, which occurred on December 28, 2020. A facility medical provider evaluated the detainee's finger on December 30, 2020, and ordered an x-ray of his right hand. They x-ray revealed no evidence of a fracture; however, the medical provider diagnosed the detainee as having degenerative tissue of the fifth right finger. The facility's medical staff submitted a referral for an orthopedist to evaluate the detainee's finger. The orthopedist evaluated the detainee on January 12, 2021, and recommended the detainee receive occupational therapy for his finger in the form of range-of-motion exercises. The facility's medical staff provided instructions to the detainee on how to perform the range-of-motion exercises and instructed him to submit sick call requests for further evaluation, as needed.

Medical Care: One detainee stated he had chest pain and he heard voices, which at times, controlled his actions.

• Action Taken: ODO immediately referred the detainee to the facility's medical and mental health staff, who evaluated the detainee, and determined he did not have suicidal ideations nor to be a threat to himself or others. ODO spoke with the facility's acting HSA and found the facility's mental health staff had provided regular treatment to this detainee; however, he began to refuse his medication prior to the start of ODO's inspection. Prior to their evaluation of the detainee on February 1, 2021, the facility's mental health staff most recently evaluated the detainee on January 30, 2021, and prescribed him an antidepressant. The facility's mental health staff scheduled the detainee for regular mental health treatments with a facility mental health care provider, and counseled the detainee on the importance of taking his medication.

For the detainee's chest pain, ODO reviewed his medical chart and spoke with the facility's acting HSA. ODO found the facility's medical staff evaluated the detainee for chest pain on January 24, 2021, where they administered an electrocardiogram (EKG), and determined the results of the EKG were normal. A facility practical registered nurse prescribed a non-steroidal anti-inflammatory drug (NSAID) for his chest pain and scheduled a follow-up appointment with a medical provider for February 1, 2021. The medical provider met with the detainee on February 1, 2021, provided him with the results of his test, and instructed him to continue with the NSAID a submit a sick call request should his symptoms worsen.

#### COMPLIANCE INSPECTION FINDINGS

#### **SAFETY**

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

ODO interviewed the facility's SM reviewed the facility's emergency plans for fire, hostage, riot, natural disaster, escape, and bomb threats, and found the plans did not contain procedures, which addressed the safety and security of detainees with disabilities during a facility response (**Deficiency EHS-25**<sup>7</sup>).

#### **SECURITY**

#### **CUSTODY CLASSIFICATION SYSTEM (CCS)**

ODO reviewed 12 detainee files and found 11 out of 12 files did not contain documentation of a supervisor's review of each detainees' initial classification (**Deficiency CCS-6**8).

ODO reviewed 12 detainee files and found 11 out of 12 did not contain documentation of a supervisor's review of the intake/processing officer's classification of each detainee, which verified both accuracy and completeness (**Deficiency CCS-10**<sup>9</sup>).

ODO reviewed 12 detainee files and found 11 out of 12 did not contain documentation of a supervisor's review of each detainees' housing unit assignment (**Deficiency CCS-11**<sup>10</sup>).

#### STAFF-DETAINEE COMMUNICATION (SDC)

ODO reviewed the facility's detainee handbook, which contained their written procedures for routing detainees' requests to ERO Miami, and found the procedures had not been updated to incorporate using the facility's electronic tablet system for submission and routing of requests (**Deficiency SDC-11**<sup>11</sup>).

ODO interviewed detainees and an ERO Miami SDDO and found on November 18, 2020, due to the COVID-19 pandemic, the FOD instructed field office staff to deny all marriage requests and ceremonies "across the board," instead of reviewing all marriage requests on a case-by-case basis,

4. A supervisor will review each detainee's classification." *See* ICE NDS 2019, Standard Custody Classification System, Section (II)(A)(4).

<sup>&</sup>lt;sup>7</sup> "Plans will include procedures for detainees with disabilities to ensure their safety and security during the facility response." *See* ICE NDS 2019, Standard Environmental Health and Safety, Section (II)(B).

<sup>&</sup>lt;sup>8</sup> "The classification system shall ensure:

<sup>&</sup>lt;sup>9</sup> "A supervisor will review the intake/processing officer's classification file for each detainee for accuracy and completeness." *See* ICE NDS 2019, Standard Custody Classification System, Section (II)(B).

<sup>&</sup>lt;sup>10</sup> "Among other things, the reviewing officer shall ensure each detainee has been assigned to the appropriate housing unit." *See* ICE NDS 2019, Standard Custody Classification System, Section (II)(B).

<sup>&</sup>lt;sup>11</sup> "The facility shall have written procedures to route detainee requests to the appropriate ICE/ERO official(s)." *See* ICE NDS 2019, Standard Staff-Detainee Communication, Section (II)(C).

as required by the standard (Deficiency SDC-26<sup>12</sup>).

#### **ACTIVITIES**

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

ODO reviewed how the facility communicated their telephone access rules to the detainees and found the facility had not posted their telephone access rules by the detainee telephones (**Deficiency TA-4** <sup>13</sup>).

ODO reviewed the facility's posted pro bono legal services information and found the posted information was out-of-date. Specifically, the facility's posted pro bono legal information was last updated in January 2020 (**Deficiency TA-13** <sup>14</sup>).

#### CONCLUSION

During this inspection, ODO assessed the facility's compliance with 18 standards under NDS 2019 and found the facility in compliance with 14 of those standards. ODO found eight deficiencies in the remaining four standards. ODO commends facility staff for their responsiveness during this 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 2020 (NDS 2019)	FY 2021 (NDS 2019)
Standards Reviewed	18	18
Deficient Standards	9	4
Overall Number of Deficiencies	17	8
Repeat Deficiencies	N/A	0
Areas of Concern	1	0
Corrective Actions	0	0

<sup>&</sup>lt;sup>12</sup> "ICE/ERO will review and approve detainee marriage requests on a case-by-case basis." See ICE NDS 2019, Standard Staff-Detainee Communication, Section (II)(D).

<sup>&</sup>lt;sup>13</sup> "The facility shall provide telephone access rules in the facility handbook and shall post these rules where detainees may easily see them (II)(B)." *See* ICE NDS 2019, Standard Telephone Access, Section (II)(B).

<sup>&</sup>lt;sup>14</sup> "All Field Offices are responsible for ensuring facilities which house ICE detainees under their jurisdiction are provided with current pro bono legal service information (II)(E)." *See* ICE NDS 2019, Standard Telephone Access, Section (II)(E).