



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
Follow-Up Compliance Inspection**

**Enforcement and Removal Operations
ERO New York City Field Office**

**Orange County Jail
Goshen, New York**

May 17-20, 2021

FOLLOW-UP COMPLIANCE INSPECTION
of the
ORANGE COUNTY JAIL
Goshen, New York

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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 follow-up compliance inspection of the Orange County Jail (OCJ) in Goshen, New York, from May 17 to 20, 2021.¹ This inspection focused on the standards found deficient during ODO’s last inspection of OCJ from November 16 to 19, 2020. The facility opened in 2001 and is owned and operated by the Orange County Sheriff’s Office (OCSO). The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at OCJ in 2008 under the oversight of ERO’s Field Office Director (FOD) in New York (ERO New York). The facility operates under the National Detention Standards (NDS) 2019.

ERO has assigned deportation officers at the facility. An OCSO colonel handles daily facility operations and manages █████ personnel. Trinity Food Service provides food services, WellPath provides medical care, and Keefe Supply Company provides commissary services at the facility. The facility was accredited by the American Correctional Association in 2019.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity ²	97
Average ICE Detainee Population ³	████
Male Detainee Population (as of May 17, 2021)	████
Female Detainee Population (as of May 17, 2021)	████

During its last inspection, in Fiscal Year (FY) 2020, ODO found nine deficiencies in the following areas: Custody Classification System (1); Funds and Personal Property (2); Staff-Detainee Communication (1); Sexual Abuse and Assault Prevention and Intervention (3); Grievance System (1); and Law Libraries and Legal Material (1).

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

² Data Source: ERO Facility List Report as of May 10, 2021.

³ *Ibid.*

FOLLOW-UP COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population of 10 or more detainees, 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. In FY 2021, to meet congressional requirements, ODO began conducting follow-up inspections at all ICE ERO detention facilities, which ODO inspected earlier in the FY.

While follow-up inspections are intended to focus on previously identified deficiencies, ODO will conduct a complete review of several core standards, which include but are not limited to Medical Care, Hunger Strikes, Suicide Prevention, Food Service, Environmental Health and Safety, Emergency Plans, Use of Force and Restraints/Use of Physical Control Measures and Restraints, Admission and Release, Classification, and Funds and Personal Property. ODO may decide to conduct a second full inspection of a facility in the same FY based on additional information obtained prior to ODO's arrival on-site. Factors ODO will consider when deciding to conduct a second full inspection will include the total number of deficiencies cited during the first inspection, the number of deficient standards found during the first inspection, the completion status of the first inspection's UCAP, and other information ODO obtains from internal and external sources ahead of the follow-up compliance inspection. Conditions found during the inspection may also lead ODO to assess new areas and identify new deficiencies or areas of concern should facility practices run contrary to ICE standards. Any areas found non-compliant during both inspections are annotated as "Repeat Deficiencies" in this report.

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.

FINDINGS BY NATIONAL DETENTION STANDARDS 2019 MAJOR CATEGORIES

NDS 2019 Standards Inspected ^{4,5}	Deficiencies
Part 1 – Safety	
Environmental Health and Safety	0
Sub-Total	0
Part 2 – Security	
Admission and Release	0
Custody Classification System	1
Funds and Personal Property	1
Use of Force and Restraints	0
Special Management Units	1
Staff-Detainee Communication	0
Sexual Abuse and Assault Prevention and Intervention	0
Sub-Total	3
Part 4 – Care	
Food Service	0
Hunger Strikes	0
Medical Care	1
Significant Self-Harm and Suicide Prevention and Intervention	0
Sub-Total	1
Part 6 – Justice	
Grievance System	0
Law Libraries and Legal Materials	1
Sub-Total	0
Total Deficiencies	5

⁴ For greater detail on ODO’s findings, see the *Follow-Up Compliance Inspection Findings* section of this report.

⁵ 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 voluntarily agreed to participate. None of the detainees made allegations of discrimination; however, several detainees reported a facility officer, whose identity could not be verified, mistreated and verbally abused them. Additionally, two detainees indicated thoughts of self-harm to ODO, and ODO immediately referred both detainees to the facility's medical staff for evaluation. Most detainees reported satisfaction with facility services except for the concerns listed below. ODO conducted the detainee interviews via video teleconference.

Admission and Release: Multiple detainees stated they received neither an ICE National Detainee Handbook nor a facility handbook.

- Action Taken: ODO reviewed each detainee's intake documentation and confirmed that each detainee signed for the receipt of a copy of the ICE National Detainee Handbook and the facility handbook.

Correspondence and Other Mail: A detainee stated the facility staff does not open his mail in front of him, but he receives mail from his attorney already opened.

- Action Taken: ODO interviewed the colonel, reviewed the facility handbook, and found facility staff opens all legal mail in the presence of the detainee without reading it. ODO notes no other detainees stated their mail was not opened in front of them.

Disability Identification, Assessment, and Accommodation: A detainee stated she could not read, and no one from the facility staff asked about her ability to read.

- Action Taken: ODO interviewed the colonel, reviewed the intake documentation, and found no record indicating the detainee's illiteracy. On May 19, 2021, an OCJ officer read the entire facility handbook to the detainee and answered the detainee's questions.

Disability Identification, Assessment, and Accommodation: A detainee stated he could not read the ICE National Detainee Handbook and facility handbook because it was not in Mandarin Chinese.

- Action Taken: ODO interviewed the colonel, reviewed the intake documentation, and found no record indicating the detainee requested a Mandarin Chinese translation of the handbooks. ODO found OCJ only provides handbooks in either English or Spanish. On May 19, 2021, the facility called the language line to translate the ICE National Detainee Handbook and the facility handbook to the detainee.

Food Service: Multiple detainees stated the food is not good, the portions are small, and the meals lack fruit.

- Action Taken: ODO interviewed the food service manager and reviewed photos of prepared meal trays. ODO found the dietitian approved the menu after confirming the meals were diverse, well proportioned, and nutritionally adequate. The food service manager stated the main menu does not contain much fruit because the dietitian created the menu to limit the possible microbrewing of prohibited alcoholic beverages at the

facility. He stated religious and medical diets contain fruit, and the facility has changed the menu due to the negative feedback received from detainees and officers.

Law Libraries and Legal Materials: Two detainees stated the computers in the law library have not worked for some time.

- Action Taken: ODO interviewed the ERO supervisory detention deportation officer (SDDO), who confirmed the LexisNexis had not been working due to the facility's expired subscription. He stated LexisNexis placed a hold on the subscription due to COVID-19 and he was working to remove the hold. On May 20, 2021, the SDDO provided ODO with an email confirmation from LexisNexis for the removal of the COVID-19 hold followed by a software update for the computers. ODO found the detainees have access to physical law books in the law library. ODO notes ERO New York did not provide the detainees with an electronic version of reference materials in the law library, and this is a deficiency under the *Law Libraries and Legal Materials* standard of this report.

Medical Care: A detainee who received the COVID-19 vaccine asked why he still must go into quarantine after leaving the facility for medical appointments.

- Action Taken: ODO interviewed the colonel and confirmed that facility staff continue to follow quarantine guidelines from the Center for Disease Control and Prevention and from New York State, which both require a [REDACTED] quarantine for detainees.

Medical Care: A detainee stated the facility does not provide him his medication on a schedule. He stated the facility provides his medication at any time and not when he needs it.

- Action Taken: ODO reviewed OCJ orientation and confirmed the facility physician has the authority to designate medical staff to administer prescribed medication with a cup of water during pill pass in the morning, afternoon, and evening. ODO verified the medical and dental services form, signed by the detainee during his intake on March 3, 2021, as a record of his understanding of medical care policy. ODO reviewed the detainee's medical record and found medical staff provided the detainee his prescribed medication daily and noticed no indication of the medical staff providing him medications as needed.

Medical Care: A detainee stated he submitted a request for the COVID-19 vaccine a week prior to the inspection and has received no follow-up notification.

- Action Taken: ODO interviewed the colonel and confirmed the Orange County Department of Health (OCHD) provided vaccines to the medical provider on the following dates: March 29, 2021; April 14, 2021; and May 20, 2021. The colonel stated the housing area supervisors announced the availability and vaccine type to each housing unit two weeks in advance. Interested detainees could sign up for the vaccine. The facility compiled a list of detainees and sent it to OCHD. ODO interviewed the director of nurses and confirmed the detainee had not signed up to receive the vaccine. The colonel also stated the facility will offer the vaccine to the detainees again once the next supply becomes available.

Personal Hygiene: A detainee stated the facility has not refilled the hand soap in his cell.

- Action Taken: ODO interviewed the colonel and confirmed OCJ keeps bars of soap in stock and each detainee must request a bar of soap for his/her cell. He stated the officers check the housing unit supplies once per shift. ODO found the facility handbook states soap and other personal hygiene items are available to all detainees at no cost and can be requested from the housing unit officer.

Significant Self-Harm and Suicide Prevention and Intervention: A detainee stated she heard voices telling her to commit suicide during her first few days at the facility.

- Action Taken: At the request of ODO, an OCJ officer escorted the detainee to the mental health unit for evaluation. ODO reviewed the detainee's medical record and found the detainee did not disclose any mental health illnesses or suicidal thoughts during admission into OCJ on April 25, 2021. On May 11, 2021, the detainee reported to a facility officer she was having suicidal thoughts. An OCJ officer immediately took the detainee to see a mental health clinician for an assessment. According to the detainee's medical record, the detainee stated she had suicidal thoughts, but had no plan to act on the thoughts because of her religious beliefs and family support. The detainee had a follow-up visit with the mental health clinician on May 12, 2021. During the follow-up evaluation, the detainee denied having suicidal thoughts, stating she spoke with her boyfriend and felt better. The OCJ mental health clinician provided the detainee with encouragement and support through reflective listening.

Significant Self-Harm and Suicide Prevention and Intervention: A detainee stated in the past he had thoughts of harming himself due to the stress of not being able to go outside.

- Action Taken: At the request of ODO, an OCJ officer escorted the detainee to the mental health unit for evaluation. ODO reviewed the detainee's medical record and found the detainee did not disclose a history of serious mental illnesses or suicidal thoughts during admission into OCJ on March 3, 2021. However, the detainee did disclose a history of depression, insomnia, hallucinations, and taking prescribed medication. OCJ's mental health doctor prescribed the detainee medication for depression, insomnia, and hallucinations. The detainee had multiple follow-up visits with the mental health clinicians at OCJ. The detainee and the mental health clinician discussed coping skills for depression and sleep hygiene routines. The mental health clinician found the detainee was compliant and consistent with his psychiatric medication. The detainee agreed to seek mental health help if needed in the future.

Staff-Detainee Communication: Multiple detainees stated there was an officer that yelled, mistreated, and made derogatory comments at them, but they did not know his name, nor could they describe the officer.

- Action Taken: ODO interviewed the colonel, who stated it is difficult to verify accusations without the name of the officer. ODO did not find any staff complaints or grievances on the facility's grievance log pertaining to staff yelling, mistreating, or making derogatory comments.

Staff-Detainee Communication: Multiple detainees stated ICE officers do not interact with them on a regular basis.

- Action Taken: ODO interviewed the SDDO and confirmed that an ICE officer has been visiting OCJ virtually once a week due to the COVID-19 pandemic. Additionally, an ICE officer physically visits the housing units once a week. The SDDO stated a detainee may submit a request at any time to speak to an ICE officer during business hours.

Sexual Abuse and Assault Prevention and Intervention: A detainee stated the female officers do not announce themselves when they enter the male housing unit.

- Action Taken: ODO interviewed the colonel, reviewed OCJ policy and procedure on sexual abuse and assault and found all officers of the opposite gender must announce themselves when entering the male housing units. ODO cannot confirm the detainee's statement without physically being at the facility.

FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

SECURITY

CUSTODY CLASSIFICATION SYSTEM (CCS)

ODO reviewed the facility handbook and found it does not include an explanation of the classification levels with the conditions and restrictions applicable to each level (**Deficiency CCS-30⁶**). **This is a repeat deficiency.**

FUNDS AND PERSONAL PROPERTY (FPP)

ODO reviewed the facility handbook and found it does not notify detainees:

- Which items they may retain in their possession; nor
- The procedures for claiming property upon release, transfer, or removal (**Deficiency FPP-34⁷**). **This is a repeat deficiency.**

SPECIAL MANAGEMENT UNIT (SMU)

ODO reviewed the facility handbook, interviewed the sergeant, and found the facility requires detainees to use a facility appeal form to request an appeal. Detainees are not afforded the opportunity to use any standard form of written communication, which would include a detainee request, to exercise their right to appeal the conclusions and recommendations of any review

⁶ “The facility shall include a classification section in its detainee handbook which will include the following:

1. An explanation of the classification levels, with the conditions and restrictions applicable to each.” See ICE NDS 2019, Standard, Custody Classification System, Section (II)(H)(1).

⁷ “The facility handbook shall notify detainees of facility policies and procedures concerning personal property, including:

1. Which items they may retain in their possession; ...

4. The procedures for claiming property upon release, transfer, or removal.” See ICE NDS 2019, Standard, Funds and Personal Property, Section (II)(H)(1) and (4).

conducted by the facility administrator (**Deficiency SMU-30⁸**).

CARE

MEDICAL CARE (MC)

ODO reviewed [REDACTED] detainee medical records and found the facility did not conduct [REDACTED] comprehensive health assessments, including physical examinations, within [REDACTED] days of the detainee's arrival at the facility. Specifically, ODO found medical staff completed physical examinations within [REDACTED] days after the detainee's arrival (**Deficiency MC-27⁹**).

ODO identified a **Best Practice** in the OCJ discharge planning and release medication policy and procedures, which provide a viable transition link between correctional medical care and community transitional continuity of care. The InMedRX system used by OCJ enhances the re-entry program for detainees by providing low-cost or free, medically necessary medications after release from the facility for detainees.

JUSTICE

LAW LIBRARIES AND LEGAL MATERIALS (LLM)

ODO found ERO New York did not provide the facility with an electronic version of the required ICE/ERO reference materials (**Deficiency LLM-5¹⁰**).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 14 standards under NDS 2019 and found the facility in compliance with 9 of those standards. ODO found five deficiencies in the remaining five standards. ODO commends the facility's staff for its responsiveness during this inspection. ODO recommends ERO New York work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations.

Compliance Inspection Results Compared	First FY 2021 (NDS 2019)	Second FY 2021 (NDS 2019)
Standards Reviewed	18	14
Deficient Standards	6	5
Overall Number of Deficiencies	9	5
Repeat Deficiencies	0	2
Areas of Concern	0	0
Corrective Actions	0	0

⁸ "The detainee may use any standard form of written communication, to include a detainee request, to file the appeal." See ICE NDS 2019, Standard, Special Management Unit, Section (II)(A)(3)(d).

⁹ "The facility will conduct and document a comprehensive health assessment, including a physical examination and mental health screening, on each detainee within [REDACTED] of the detainee's arrival at the facility." See ICE NDS 2019, Standard, Medical Care, Section (II)(E).

¹⁰ "ICE/ERO shall provide each facility an electronic version of required ICE/ERO law library reference materials." See ICE NDS 2019, Standard, Law Libraries and Legal Materials, Section (II)(C).