

U.S. Department of Homeland Security

Immigration and Customs Enforcement Office of Professional Responsibility ICE Inspections Washington, DC 20536-5501

Office of Detention Oversight Follow-Up Compliance Inspection

Enforcement and Removal Operations ERO Miami Field Office

Baker County Sheriff's Office MacClenny, Florida

June 14-16, 2022

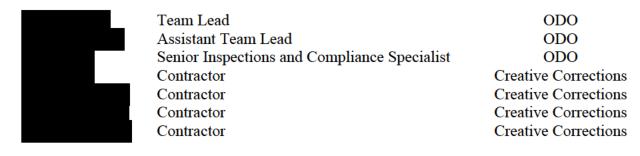
FOLLOW-UP COMPLIANCE INSPECTION of the BAKER COUNTY SHERIFF'S OFFICE

MacClenny, Florida

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FOLLOW-UP 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 follow-up compliance inspection of the Baker County Sheriff's Office (BCSO) in MacClenny, Florida, from June 14 to 16, 2022. This inspection focused on the standards found deficient during ODO's last inspection of BCSO from November 29 to December 2, 2021. The facility opened in 2009 and is owned and operated by the Baker County Sheriff's Office. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at BCSO in 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 this facility. A BCSO captain handles daily facility support personnel. Trinity Services provides food services, Armor operations and manages 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	Qu	antity
ICE Bed Capacity ²		
Average ICE Population ³	'	
Adult Male Population (as of June 13, 2022)		
Adult Female Population (as of June 13, 2022)		

During its last inspection, in Fiscal Year (FY) 2022, ODO found 11 deficiencies in the following areas: Correspondence and Other Mail (1); Environmental Health and Safety (1); Personal Hygiene (2); Post Orders (2); Recreation (1); Searches of Detainees (2); and Significant Self-Harm and Suicide Prevention and Intervention (2).

¹ This facility holds both 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 as of June 13, 2022.

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 this 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 Uniform Corrective Action Plan (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.

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

NDS 2019 Standards Inspected ^{4,5}	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	0
Searches of Detainees	0
Sexual Abuse and Assault Prevention and Intervention	0
Special Management Unit	0
Use of Force and Restraints	1
Sub-Total	1
Part 4 - Care	
Food Service	0
Hunger Strikes	0
Medical Care	0
Personal Hygiene	0
Significant Self-Harm and Suicide Prevention and Intervention	0
Sub-Total	0
Part 5 - Activities	
Correspondence and Other Mail	0
Recreation	0
Total Deficiencies	2

 ⁴ For greater detail on ODO's findings, see the *Follow-up Inspection Findings* section of this report.
⁵ 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 standards.

DETAINEE RELATIONS

ODO interviewed 25 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.

Admission and Release: One detainee stated he never received the ICE National Detainee Handbook nor site-specific detainee handbook in his native language of Gujarati.

• Action Taken: ODO reviewed the detainee's detention file and confirmed the issuance and receipt of English versions of the ICE National Detainee Handbook and site-specific detainee handbook. On June 16, 2022, and at the request of ODO, the facility staff trained the detainee on how to access the digital site-specific detainee handbook and using the kiosk and obtaining translation services for assistance. ODO observed the detainee has in his possession, a guardian translation device which he has maintained since his arrival at the facility January 1, 2022.

Food Service: Three female detainees stated the facility did not provide hot meals 7 days a week as all three are on a special diet (Kosher/Religious) and are not served hot meals on the weekends.

• Action Taken: ODO spoke with the food service director (FSD) and confirmed the facility provides special diets to the detainees and serves them two hot meals per day, Monday through Friday, which met the NDS 2019 Food Service standard requirements to offer hot entrees at least 5 days per week. BCSO does not serve hot meals on Saturdays and Sundays to detainees on special diets due to budgetary constraints. The FSD stated the facility served hot meals to special-diet detainees on the weekends prior to the COVID-19 pandemic but he intends to restore hot meal servings to special-diet detainees as his budget allows. On June 15, 2022, ODO informed the detainees of the facility's special-diet policy and the FSD's intention to offer hot meals to them on the weekends when financially possible.

Medical Care: One detainee stated he submitted four medical requests regarding pain in his ears before receiving medical care. The detainee also stated the facility responds to printed sick call forms but not to online sick call requests.

• Action Taken: ODO reviewed the detainee's medical records, interviewed the BCSO health service administrator (HSA), and confirmed a registered nurse (RN) examined the detainee on May 9, 2022, the same day the detainee submitted his sick call request. The RN noted no signs of infection but did find a slight amount of fluid in the detainee's ear and prescribed Chlorpheniramine Maleate (4 mg) as treatment. On June 8, 2022, the detainee submitted a sick call request regarding pain in the shoulder, and medical staff examined him on that same day, prescribing Motrin (600 mg) for his pain. On June 15, 2022, and at the request of ODO, the facility medical staff informed the detainee of the procedure on how to submit online sick call requests.

Medical Care: One detainee stated he submitted a sick call request for tooth pain and headaches and never received any medical care.

Action Taken: ODO reviewed the detainee's medical records, interviewed the HSA, and confirmed the detainee submitted a sick call request for tooth pain and the medical staff examined him on June 3, 2022. Medical staff prescribed him Motrin (400 mg) for the pain and scheduled a follow-up appointment for June 7, 2022. The detainee refused his June 7, 2022, follow-up appointment, but medical staff did evaluate him and prescribe antibiotics on June 15, 2022. The HSA advised ODO of their attempt to schedule the detainee an appointment with the orthodontist; however, there were no dates available at that time. The provider advised ODO the detainee was informed of the pending appointment.

Medical Care: One detainee stated it took 3 weeks after submitting a sick call request for medical to examine an infected tooth. The detainee also stated his concern with the medical staff's diagnosis of his purported kidney stones as a muscular problem.

• Action Taken: ODO reviewed the detainee's medical record, interviewed the HSA, and confirmed the detainee's sick call request submission on April 6, 2022, the medical staff's evaluation of his tooth, which occurred on the same day, and his subsequent prescription of antibiotics and Motrin (800 mg). The medical staff also instructed the detainee to rinse with Colgate for the next 10 days. ODO also found and reviewed the medical staff's follow-up exam of the detainee on April 18, 2022, and a referral for an outside dentist. The dentist extracted two of the detainee's teeth, "3 and 4," on April 28, 2022.

On May 28, 022, the detainee submitted a sick call request for kidney pain and the medical staff performed a urine dipstick test the following day. A medical provider performed a urinalysis on the detainee during the follow-up appointment on June 6, 2022 and noted no evidence of infection. The provider informed the detainee on the importance of hydration and scheduled a follow-up appointment for June 15, 2022. The provider evaluated the detainee on June 15, 2022, requested additional lab tests, and scheduled another follow-up visit for June 20, 2022, to review lab results. On July 12, 2022, ODO confirmed with HSA that detainee refused his follow-up appointment review and signed the medical refusal document, which facility medical staff placed in the detainee's medical file.

Medical Care: One detainee stated the medical staff's prescriptions of ibuprofen and Tylenol are ineffective in treating her migraine headaches. She also expressed her frustration with the medical staff's lack of more powerful medication to treat migraines.

Action Taken: ODO reviewed the detainee's medical record, interviewed the HSA, and confirmed the detainee submitted a sick call request for headaches on April 30, 2022. Medical staff examined her on the following day and prescribed Tylenol (325 mg). On May 30, 2022, the detainee submitted another sick call request for headaches,

and the medical staff examined her on the following day, changing her prescription to Motrin (400 mg). On June 15, 2022, and at the request of ODO, a health care provider evaluated the detainee and prescribed Topamax (25 mg) to treat the detainee's migraine headaches. The HSA informed ODO that medical staff will follow up with the detainee in 2 weeks. On July 12, 2022, ODO was informed by the HSA that detainee was scheduled for a medical follow up/review on June 29, 2022; however, the detainee refused to participate in review. On June 29, 2022, the detainee signed a medical refusal form, which facility medical staff placed in the detainee's medical file.

FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

SAFETY

ENVIRONMENTAL HEALTH AND SAFETY (EHS)

ODO interviewed the facility staff, inspected the barbershop location for the items required for maintaining health and sanitation standards, and ODO observed detainees using paper towels vice laundered towels on detainees receiving haircuts (Deficiency EHS-47⁶). This is a repeat deficiency.

SECURITY

USE OF FORCE AND RESTRAINTS (UOFR)

ODO reviewed BCSO Policy MC 126, Response to Resistance, and 10 immediate use-of-force (UOF) files and found facility staff did not immediately obtain a video camera to record any UOF incidents. Specifically, ODO found in 2 out of 10 files, staff did not obtain a video camera even though the delay would not have endangered staff nor detainee nor result in serious property damage (**Deficiency UOFR-84**⁷).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 16 standards under NDS 2019 and found the facility in compliance with 14 of those standards. ODO found two deficiencies in the remaining two standard. ODO recommends ERO Miami work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations. ODO has not

⁶ "Sanitation of barber operations is of the utmost concern due to the possible transfer of diseases through direct contact or by the tools, implements, and supplies including the towels, combs, and clippers. Towels must not be reused after use on one person: ...

c. 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).

⁷ "Staff shall immediately obtain and record with a video camera any use-of-force incident, unless such a delay in bringing the situation under control would constitute a serious hazard to the detainee, staff, or others, or would result in a major disturbance or serious property damage." *See* ICE NDS 2019, Standard, Use of Force and Restraints, Section (II)(J)(3).

received the UCAP for ODO's last inspection of BCSO in December 2021.

Compliance Inspection Results Compared	First FY 2022 (NDS 2019)	Second FY 2022 (NDS 2019)
Standards Reviewed	20	16
Deficient Standards	7	2
Overall Number of Deficiencies	11	2
Repeat Deficiencies	1	1
Areas Of Concern	0	0
Corrective Actions	0	0
Facility Rating	Superior	N/A