

U.S. Department of Homeland Security U.S. Immigration and Customs Enforcement Office of Professional Responsibility ICE Inspections Washington, DC 20536-5501

Office of Detention Oversight Special Review 2023-003-120

Enforcement and Removal Operations ERO Philadelphia Field Office

South Central Regional Jail Charleston, West Virginia

March 21-23, 2023

SPECIAL REVIEW of the SOUTH CENTRAL REGIONAL JAIL Charleston, West Virginia

TABLE OF CONTENTS

FACILITY OVERVIEW	4		
SPECIAL REVIEW PROCESS			
FINDINGS BY NATIONAL DETENTION STANDARDS 2019 MAJOR CATEGORIES			
DETAINEE RELATIONS	7		
SPECIAL REVIEW FINDINGS	7		
SAFETY	7		
ENVIRONMENTAL HEALTH AND SAFETY			
CARE	7		
FOOD SERVICE	7		
HUNGER STRIKES			
MEDICAL CARE	8		
SIGNIFICANT SELF-HARM AND SUICIDE PREVENTION			
AND INTERVENTION	8		
CONCLUSION	8		

SPECIAL REVIEW TEAM MEMBERS



Team Lead Senior Inspections and Compliance Specialist Inspections and Compliance Specialist Contractor Contractor ODO ODO ODO Creative Corrections Creative Corrections

FACILITY OVERVIEW

The U.S. Immigration and Customs Enforcement (ICE) Office of Professional Responsibility (OPR) Office of Detention Oversight (ODO) conducted a special review of the South Central Regional Jail (SCRJ) in Charleston, West Virginia, from March 21 to 23, 2023.¹ The facility opened in June 1994 and is owned by the State of West Virginia and operated by the West Virginia Division of Corrections and Rehabilitation. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at SCRJ in June 2004 under the oversight of ERO's Field Office Director in Philadelphia (ERO Philadelphia). ICE is an authorized user of SCRJ under a United States Marshals Service intergovernmental agreement contract, which does not specify an ICE NDS, and ODO inspected to the NDS listed on the ERO Facility List as of March 20, 2023. LCDC was inspected against the NDS 2000, and ODO's assigned rating is for ERO's informational purposes only.

ERO has assigned no staff to the facility; however, ERO Philadelphia staff conduct scheduled and unscheduled visits to the facility. A superintendent handles daily facility operations and manages support personnel. Aramark provides food services, Wexford Health Sources provides medical care, and Union Supply provides commissary services at the facility. The facility was accredited by the National Commission on Correctional Health Care in October 2022.

Capacity and Population Statistics	Quantity	
ICE Bed Capacity ²		
Average ICE Population ³		
Adult Male Population (as of March 21, 2023)		
Adult Female Population (as of March 21, 2023)		

During its last special review, in Fiscal Year (FY) 2022, ODO found 37 deficiencies in the following areas: Detainee Handbook (1); Detention Files (1); Environmental Health and Safety (17); Food Service (6); Hunger Strikes (1); Medical Care (3); Personal Hygiene (1); Recreation (1); Sexual Abuse and Assault Prevention and Intervention (4); Significant Self-harm and Suicide Prevention and Intervention (1); and Use of Force and Restraints (1).

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

² Data Source: ERO Facility List as of March 20, 2023.

³ Ibid.

SPECIAL REVIEW PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population of 10 or more, 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.

In fiscal year (FY) 2022, ODO began conducting special reviews of under 72-hour ICE detention facilities with an ADP of 1 or more detainees and over 72-hour ICE detention facilities with an ADP of 1 to 9 detainees. Additionally, ODO began conducting unannounced inspections of ICE detention facilities, regardless of ADP of detainees, as well as reviews of ICE special/emerging detention facilities/programs. As such, these facility inspections will result in an ODO Inspection Compliance Rating; however, for facilities that are not contractually obligated to an ICE NDS, those ratings will be for ERO's informational purposes. ODO will conduct a complete review of several core standards, in accordance with the facility's contractually required ICE NDS or in accordance with the ICE NDS listed in the current ERO Facility List Report for facilities that are not contractually obligated to an ICE NDS, which include but are not limited to Medical Care/Health Care, Medical Care (Women)/Health Care (Females), Suicide Prevention and Intervention, Hunger Strikes, Food Service, Environmental Health and Safety, Special Management Units (SMU) or Hold Rooms if the facility does not have an SMU, Use of Force and Restraints/Use of Physical Control Measures and Restraints, and Sexual Abuse and Assault Prevention and Intervention.

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.

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	
Use of Force and Restraints	0
Special Management Units	0
Staff-Detainee Communication	0
Sexual Abuse and Assault Prevention and Intervention	0
Sub-Total	0
Part 4 - Care	
Food Service	1
Hunger Strikes	1
Medical Care	1
Significant Self-Harm and Suicide Prevention and Intervention	1
Sub-Total	4
Part 5 - Activities	
Recreation	0
Sub-Total	0
Part 6 - Justice	
Detainee Handbook	0
Sub-Total	0
Total Deficiencies	5

⁵ For greater detail on ODO's findings, see the *Special Review 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 standards.

DETAINEE RELATIONS

ODO interviewed one detainee, who voluntarily agreed to participate. ODO attempted to interview the remaining four detainees; however, all four detainees declined ODO's request for an interview. The interviewed detainee made no allegations of discrimination, mistreatment, or abuse, and reported satisfaction with facility services.

SPECIAL REVIEW FINDINGS

SAFETY

ENVIRONMENTAL HEALTH AND SAFETY (EHS)

ODO interviewed the facility's training officer, reviewed staff training records, and found in out of records, no documented training for classification code and safe handling procedures of the hazardous materials facility staff worked with (Deficiency EHS-23⁷). This is a repeat deficiency.

CARE

FOOD SERVICE (FS)

ODO interviewed the FS director, reviewed five FS personnel employee records, and found no documented preemployment medical examinations (Deficiency FS-86⁸). This is a repeat deficiency.

HUNGER STRIKES (HS)

ODO reviewed correctional officer training records and found in court of records, the staff members did not have documented annual training for recognizing the signs of a hunger strike, implementing medical assessments, and managing a detainee on a hunger strike (Deficiency HS-1⁹). This is a repeat deficiency.

⁷ "b. Staff and detainees who work with hazardous materials will have appropriate training, including the classification code and safe handling procedures for each material." *See* ICE NDS 2019, Standard, Environmental Health and Safety, Section (II)(A)(6)(b).

⁸ "All food service personnel (both staff and detainee) shall receive a documented preemployment medical examination." *See* ICE NDS 2019, Standard, Food Service, Section (II)(I)(3)(a).

⁹ "All staff shall be trained initially and annually thereafter to recognize the signs of a hunger strike, and to implement the procedures for referral for medical assessment and for management of a detainee on a hunger strike." *See* ICE NDS 2019, Standard, Hunger Strikes, Section (II)(A).

MEDICAL CARE (MC)

ODO reviewed detainee medical records and found in out of records, no documented comprehensive health assessment, including a physical examination and mental health screening within 14 days of the detainee's arrival. Specifically, SCRJ released a detainee 20 days after arrival without conducting nor documenting a comprehensive health assessment (Deficiency MC-27¹⁰). This is a repeat deficiency and a priority component.

SIGNIFICANT SELF-HARM AND SUICIDE PREVENTION AND INTERVENTION (SSHSPI)

ODO reviewed correctional officer training records and found in court of records, the staff members did not have documented annual suicide prevention and intervention training (Deficiency SSHSPI-2¹¹). This is a repeat deficiency and a priority component.

CONCLUSION

During this special review, ODO assessed the facility's compliance with 11 standards under NDS 2019 and found the facility in compliance with 6 of those standards. ODO found five deficiencies in the remaining five standards. Since SCRJ's last special review in September 2022, the facility's overall compliance with ICE NDS 2019 has significantly improved. SCRJ went from 11 deficient standards and 37 deficiencies in September 2022 to 5 deficient standards and 5 deficiencies during this most recent special review inspection, although all 5 deficiencies are repeat deficiencies for no hazardous materials training, no preemployment medical exams for FS personnel, no initial and annual training for HS, not completing a comprehensive health exam of a detainee within 14 days of arrival, and no annual training for suicide prevention and intervention. ODO has not received a completed uniform corrective action plan for the special review inspection in September 2022 which likely contributed to the repeat deficiencies identified in the EHS, FS, HS, MC, and SSHSPI standards. ODO recommends ERO Philadelphia work with the facility to resolve the deficiencies that remain outstanding in accordance with contractual obligations.

¹⁰ "The facility will conduct and document a comprehensive health assessment, including a physical examination and mental health screening, on each detainee within 14 days of the detainee's arrival at the facility." *See* ICE NDS 2019, Standard, Medical Care, Section (II)(E).

¹¹ "All facility staff members who interact with and/or are responsible for detainees shall receive comprehensive suicide prevention training during orientation and refresher training at least annually thereafter." *See* ICE NDS 2019, Standard, Significant Self-Harm and Suicide Prevention and Intervention, Section (II)(B).

Compliance Inspection Results Compared	FY2022 Special Review Inspection (NDS 2019)	FY 2023 Special Review Inspection (NDS 2019)
Standards Reviewed	12	11
Deficient Standards	11	5
Overall Number of Deficiencies	37	5
Priority Component Deficiencies	N/A	2
Repeat Deficiencies	0	5
Areas Of Concern	0	0
Corrective Actions	0	0
Facility Rating	Acceptable	Acceptable