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# Office of Professional Responsibility

## Strafford County Corrections Compliance Inspection 2025-001-066

March 25-27, 2025



U.S. Immigration and Customs Enforcement

Unclassified

#### COMPLIANCE INSPECTION of the STRAFFORD COUNTY CORRECTIONS Dover, New Hampshire

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#### **COMPLIANCE INSPECTION TEAM MEMBERS**



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

#### FACILITY OVERVIEW

The U.S. Immigration and Customs Enforcement (ICE) Office of Professional Responsibility Office of Detention Oversight (ODO) conducted a compliance inspection of Strafford County Corrections (SCC) in Dover, New Hampshire, from March 25 to 27, 2025.<sup>1</sup> The facility opened in 2004 and is owned by Strafford County New Hampshire and operated by the Strafford County Board of County Commissioners. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at SCC in 2004 under the oversight of ERO's Field Office Director in Boston (ERO Boston). The facility operates under the National Detention Standards (NDS) 2019.

A superintendent handles daily facility operations and manages support personnel. SCC provides food services and medical care, and Keefe Commissary provides commissary services at the facility. The facility does not hold any accreditations from any outside entities.

Capacity and Population Statistics	Quantity
ICE Bed Capacity. <sup>2</sup>	
Average ICE Population <sup>3</sup>	
Adult Male Population (as of March 25, 2025)	
Adult Female Population (as of March 25, 2025)	

During its last rated inspection, in Fiscal Year (FY) 2024, ODO found 8 deficiencies in the following areas: Admission and Release (3); Detention Files (1); Environmental Health and Safety (1); Medical Care (2); and Significant Self-Harm and Suicide Prevention and Intervention (1).

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

<sup>&</sup>lt;sup>2</sup> Data Source: ERO Custody Management Division Authorized Facility List as of March 24, 2025.

<sup>&</sup>lt;sup>3</sup> Ibid.

#### **COMPLIANCE INSPECTION PROCESS**

ODO conducts oversight inspections of ICE detention facilities with an average daily population of 10 or more, and where detainees are housed for over 72 hours, to assess compliance with ICE national detention standards. While these inspections focus on facility compliance with detention standards that directly affect detainee life, health, safety, and/or well-being, in FY 2024 ODO added additional standards to the scope of each full inspection to ensure ODO inspects every standard at each facility at least once every other year.<sup>4</sup>

ODO identifies violations of ICE detention standards, ICE policies, or operational procedures, as "deficiencies." ODO highlights instances when 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.

<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>5,6</sup>	Deficiencies
Part 1 - Safety	
Environmental Health and Safety	1
Transportation by Land	0
Sub-Total	1
Part 2 - Security	
Admission and Release	0
Custody Classification System	0
Funds and Personal Property	0
Hold Rooms in Detention Facilities	0
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 3 - Order	
Disciplinary System	0
Sub-Total	0
Part 4 - Care	
Food Service	0
Medical Care	0
Significant Self-Harm and Suicide Prevention and Intervention	0
Terminal Illness and Death	0
Disability Identification, Assessment, and Accommodation	0
Sub-Total	0
Part 5 - Activities	
Recreation	0
Visitation	0
Sub-Total	0
Part 6 - Justice	
Detainee Handbook	0
Grievance System	0
Legal Rights Group Presentations	0
Sub-Total	0
Total Deficiencies	1

<sup>&</sup>lt;sup>5</sup> For greater detail on ODO's findings, see the *Compliance Inspection Findings* section of this report.
<sup>6</sup> Beginning in FY 2024, ODO instituted a process of rotating all standards every other year. As a result, some standards may not be present in all inspections.

#### **DETAINEE RELATIONS**

ODO interviewed 30 detainees, who each voluntarily agreed to participate. ODO requested interviews with 20 additional detainees; however, all 20 detainees declined ODO's request for interviews. None of the detainees made allegations of discrimination, mistreatment, or abuse. All detainees reported satisfaction with facility services.

#### **COMPLIANCE INSPECTION FINDINGS**

#### SAFETY

#### ENVIRONMENTAL HEALTH AND SAFETY (EHS)

ODO conducted an on-site inspection of the facility and observed the following deficiency:

- Peeling paint on door frames and tables in the common areas of housing units B and F;
- Wastepaper and other materials attached to the overhead light covers in multiple cells of housing units B and F;
- Green fungus-like substance on the shower ceilings of housing units B and F; and
- Peeling paint on the floors of the indoor recreation court (Deficiency EHS-58<sup>7</sup>). This is a repeat deficiency.

#### CONCLUSION

During this inspection, ODO assessed the facility's compliance with 21 standards under NDS 2019 and found the facility in compliance with 20 of those standards. ODO found one deficiency in the remaining standard. Since SCC's last rated inspection in March 2024, the facility's compliance with NDS 2019 has trended upward. SCC went from 5 deficient standards and 8 deficiencies in March 2024, to 1 deficient standard and 1 repeat deficiency during this most recent inspection. SCC completed its uniform corrective action plan for its last inspection in March 2024, which likely resolved most of ODO's previously cited deficiencies. ODO recommends ERO Boston continue to work with the facility to resolve the remaining deficiency in accordance with contractual obligations.

<sup>&</sup>lt;sup>7</sup> "Environmental health conditions will be maintained at a level that meets recognized standards of hygiene." *See* ICE NDS 2019, Standard, Environmental Health and Safety, Section (II)(I).

Compliance Inspection Results Compared	FY 2024 Full Inspection (NDS 2019)	FY 2025 Full Inspection (NDS 2019)
Standards Reviewed	25	21
Deficient Standards	5	1
Overall Number of Deficiencies	8	1
Priority Component Deficiencies	1	0
Repeat Deficiencies	4	1
Areas Of Concern	0	0
Corrective Actions	0	0
Facility Rating	Acceptable/Adequate	Good



### **Office of Professional**

Responsibility

