



**U.S. Department of Homeland Security**  
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Office of Professional Responsibility  
ICE Inspections  
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**Office of Detention Oversight  
Compliance Inspection**

**Enforcement and Removal Operations  
ERO Miami Field Office**

**Baker County Sheriff's Office  
Macclenny, Florida**

**October 18-20, 2022**

**COMPLIANCE INSPECTION**  
**of the**  
**BAKER COUNTY SHERIFF’S OFFICE**  
Macclenny, Florida

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## COMPLIANCE INSPECTION TEAM MEMBERS



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

## FACILITY OVERVIEW

The U.S. Immigration and Customs Enforcement (ICE) Office of Professional Responsibility (OPR) Office of Detention Oversight (ODO) conducted a compliance inspection of the Baker County Sheriff's Office (BCSO) in Macclenny, Florida, from October 18 to 20, 2022.<sup>1</sup> The facility opened in 2009 and is owned by Baker County Correctional Management Corporation 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 does not have any staff assigned to the facility. A BCSO captain handles daily facility operations and manages [REDACTED] support personnel. Trinity Services provides food services, Armor Medical Group 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	Quantity
ICE Bed Capacity <sup>2</sup>	[REDACTED]
Average ICE Population <sup>3</sup>	[REDACTED]
Adult Male Population (as of October 18, 2022)	[REDACTED]
Adult Female Population (as of October 18, 2022)	[REDACTED]

During its last inspection, in Fiscal Year (FY) 2022, ODO found two deficiencies in the following areas: Environmental Health and Safety (1) and Use of Force and Restraints (1).

<sup>1</sup> 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.

<sup>2</sup> Data Source: ERO Facility List as of October 17, 2022.

<sup>3</sup> *Ibid.*

## COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population greater than 10, and where detainees are housed for over 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 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.

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<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
<b>Part 1 - Safety</b>	
Environmental Health and Safety	0
Transportation by Land	2
<b>Sub-Total</b>	<b>2</b>
<b>Part 2 - Security</b>	
Admission and Release	0
Custody Classification System	0
Funds and Personal Property	0
Hold Rooms in Detention Facilities	0
Use of Force and Restraints	1
Special Management Units	0
Sexual Abuse and Assault Prevention and Intervention	0
<b>Sub-Total</b>	<b>1</b>
<b>Part 3 - Order</b>	
Disciplinary System	0
<b>Sub-Total</b>	<b>0</b>
<b>Part 4 - Care</b>	
Food Service	0
Medical Care	1
Significant Self-Harm and Suicide Prevention and Intervention	1
Terminal Illness and Death	0
Disability Identification, Assessment, and Accommodation	0
<b>Sub-Total</b>	<b>2</b>
<b>Part 5 - Activities</b>	
Correspondence and Other Mail	0
Recreation	0
Visitation	0
<b>Sub-Total</b>	<b>0</b>
<b>Part 6 - Justice</b>	
Detainee Handbook	0
<b>Sub-Total</b>	<b>0</b>
<b>Total Deficiencies</b>	<b>5</b>

<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 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 29 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.

*Correspondence and Other Mail:* One detainee stated officers read his legal mail during a cell search on October 9, 2022.

- Action Taken: ODO interviewed a facility lieutenant, reviewed detainee grievances, and found BCSO staff conducted random cell searches on October 9, 2022. Two BCSO officers entered the detainee's cell during the cell search, and one officer observed a crumbled paper with handwritten notes of BCSO officers' names, badge numbers, and shifts worked. The officer reviewed the paper to ensure officer safety and left the notes in the detainee's cell. On October 10, 2022, the detainee filed a grievance stating BCSO officers had read his legal mail. On October 11, 2022, the detainee filed another grievance stating the officer read his legal mail. On October 13, 2022, the detainee submitted an additional grievance stating the officer read his legal mail during the cell search. On October 28, 2022, the facility addressed all three grievances when they notified the detainee and informed him the formal investigation of the incident found the officer did not intentionally read his legal mail, stating he reviewed the handwritten notes only for safety and security purposes.

*Medical Care:* One detainee stated she had not received treatment for her brain tumor

- Action Taken: ODO reviewed the detainee's medical file, interviewed the health services administrator (HSA), and found the detainee did not state a previous history of a brain tumor during intake. On July 27, 2022, the detainee informed an ERO Miami staff member, she had not received treatment for her brain tumor, and the auditor referred the detainee to medical staff for evaluation. Medical staff evaluated the detainee and prescribed Topamax for headache pain (50 mg for a week as needed, followed by 90 mg, once daily for 90 days), and submitted a referral for a magnetic resonance imaging (MRI) appointment. Medical staff scheduled an MRI with a neurologist for August 16, 2022, but the detainee refused. On August 29, 2022, medical staff scheduled a subsequent MRI and confirmed a pituitary benign neoplasm. The neurologist recommended the detainee continue her current treatment regimen, and the detainee acknowledged she understood the neurologist's recommendation.

*Medical Care:* One detainee stated she has not received treatment for multiple cysts on her thyroid and nodules on her lungs.

- Action Taken: ODO reviewed the detainee's medical file, interviewed medical staff, and found the detainee submitted sick call requests for throat pain on May 14 and May 29, 2022. On May 29, 2022, medical staff prescribed Claritin (10 mg) as needed for seasonal allergies and ordered a complete blood count and comprehensive metabolic and thyroid panels. On June 1, 2022, medical staff performed an ultrasound of the

thyroid gland, diagnosed cysts on the thyroid and voice changes, and referred the detainee for a computerized tomography (CT) scan on June 16, 2022. On July 6, 2022, the medical staff reviewed the CT scan findings of nodules on both sides of the thyroid, as well as pulmonary nodules, and swollen lymph nodes, and submitted a referral to a pulmonologist. On July 15, 2022, medical staff reviewed the results of the CT scan with the detainee. On September 23, 2022, the pulmonologist evaluated the detainee, ordered another CT scan, and wrote a referral for an ear, nose, and throat (ENT) specialist. Additionally, the pulmonologist prescribed Prilosec (20 mg), twice daily, a budesonide-formoterol, 80-4.5 inhaler and scheduled a follow-up appointment for November 1, 2022. On September 26, 2022, medical staff reviewed the pulmonologist's evaluation of the results with the detainee and ordered a review of the CT scan results with an outside doctor. On September 29, 2022, ERO Miami approved the CT scan review, but discovered a backlog of local appointments due to a nationwide shortage of contract radiologists and scheduled no appointment. On October 7, 2022, ERO Miami approved the ENT referral. On October 19, 2022, the ICE Health Service Corps field office medical coordinator located an ENT in southern Florida and ERO Miami transferred the detainee on November 3, 2022, to a facility closer to the location of the ENT specialist.

*Medical Care:* One detainee stated she has not received treatment for herpes contracted from facility clothing after requesting medical care three times.

- Action Taken: ODO interviewed the HSA, reviewed the detainee's medical file, and found no record of the detainee's medical requests related to treating herpes. On October 20, 2022, at ODO's request, medical staff evaluated the detainee for herpes and diagnosed the detainee with a fungal infection in her right armpit. Medical staff prescribed Triamcinolone cream (0.5%) for 30 days and Topiramate (50 mg), once a day. Medical staff educated the detainee on herpes, means of transmission, and proper personal hygiene. Medical staff scheduled a follow up appointment upon completion of treatment regimen. The detainee verbalized understanding and returned to her housing unit.

*Sexual Abuse and Assault Prevention and Intervention:* One detainee stated an officer photographed her while she was asleep.

- Action Taken: ODO interviewed the facility PREA coordinator, reviewed the grievance log, and found the detainee contacted the Detention Reporting and Information Line (DRIL) on September 29, 2022, and reported a BCSO staff member took photos of her while sleeping. On October 3, 2022, the DRIL notified ERO Miami of the incident. On October 5, 2022, ERO Miami interviewed the detainee who stated she did not know if the BCSO staff member took photos of her or just photos of her cell. ERO Miami notified the BCSO PREA investigator the same day. On October 6, 2022, the BCSO PREA investigator interviewed the detainee, completed a SAAPI worksheet, escorted the detainee to medical, provided the detainee with Sexual Assault and Abuse Awareness flyers, and offered a call to the Women Center of Jacksonville. The detainee refused the call, stating she already spoke to the center on September 27,



2022, and October 3, 2022. On October 7, 2022, ERO Miami submitted the SAAPI worksheet to ERO’s sexual assault group mailbox. On October 17, 2022, the Custody Programs Division returned the SAAPI worksheet to ERO Miami with instructions to complete the second section of the worksheet. On October 18, 2022, the BCSO PREA investigator completed the SAAPI worksheet, and ERO Miami instructed the BCSO PREA investigator to initiate SAAPI protocols and report the incident to the Joint Intake Center (Joint Integrity Case Management System number 2023SIR0000757).

## COMPLIANCE INSPECTION FINDINGS

### SAFETY

#### TRANSPORTATION BY LAND (TL)

ODO interviewed the BCSO transportation sergeant, reviewed the facility detainee transport policy, and found the facility did not develop nor post written guidelines for locating an overdue vehicle (**Deficiency TL-29<sup>7</sup>**).

Additionally, since the facility did not develop nor post written guidelines for locating an overdue vehicle, they did not have written guidelines directing the contact point to initiate tracing procedures when a vehicle does not arrive within a specified time (**Deficiency TL-30<sup>8</sup>**).

### SECURITY

#### USE OF FORCE AND RESTRAINTS (UOFR)

ODO reviewed BCSO’s response-to-resistance policy and 12 immediate use-of-force (UOF) files and found facility staff did not immediately obtain a video camera to record UOF incidents. Specifically, ODO found in 11 out of 12 files, staff did not obtain a video camera even though the delay to do so would not endanger staff nor detainee, nor result in a major disturbance, nor serious property damage (**Deficiency UOFR-84<sup>9</sup>**). **This is a repeat deficiency.**

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<sup>7</sup> “Each office will develop and post written guidelines for locating an overdue vehicle.” *See* ICE NDS 2019, Standard, Transportation by Land, Section (II)(K).

<sup>8</sup> “Each office will develop and post written guidelines for locating an overdue vehicle. If the vehicle does not arrive within a specified time period of the ETA, the contact point will set the tracing procedures in motion.” *See* ICE NDS 2019, Standard, Transportation by Land, Section (II)(K).

<sup>9</sup> “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).

## CARE

### MEDICAL CARE (MC)

ODO reviewed the facility site-specific detainee handbook and found no facility policy for detainees and their representatives to request and receive medical records (**Deficiency MC-102**<sup>10</sup>).

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

ODO reviewed the observation security check logs for three detainees placed on constant monitoring and found in two out of three logs, documented monitoring did not occur at least every 15 minutes or more frequently. Specifically, medical staff logged 23 observations between 16 and 107 minutes from September 1 to 4, 2022, and 5 observations between 16 and 86 minutes from October 14 to 16, 2022 (**Deficiency SSHSPI-21**<sup>11</sup>). **This is a priority component.**

## CONCLUSION

During this inspection, ODO assessed the facility's compliance with 19 standards under NDS 2019 and found the facility in compliance with 15 of those standards. ODO found five deficiencies in the remaining four standards. ODO recommends ERO Miami work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations. ODO has not received the uniform corrective action plan for ODO's last inspection of BCSO in June 2022.

<b>Compliance Inspection Results Compared</b>	<b>FY 2022 (NDS 2019)</b>	<b>FY 2023 (NDS 2019)</b>
Standards Reviewed	16	19
Deficient Standards	2	4
Overall Number of Deficiencies	2	5
Priority Component Deficiencies	0	1
Repeat Deficiencies	1	1
Areas Of Concern	0	0
Corrective Actions	0	0
Facility Rating	Superior	Superior

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<sup>10</sup> "Detainees and their representatives shall be allowed to request and receive medical records pursuant to facility policy, which shall be communicated to the detainee in the facility handbook." See ICE NDS 2019, Standard, Medical Care, Section (II)(P).

<sup>11</sup> "The monitoring must be documented every 15 minutes or more frequently if necessary." See ICE NDS 2019, Standard, Significant Self-Harm and Suicide Prevention and Intervention, Section (II)(F).