



U.S. Department of Homeland Security

Immigration and Customs Enforcement

Office of Professional Responsibility

Inspections and Detention Oversight Division

Washington, DC 20536-5501

**Office of Detention Oversight
Compliance Inspection**

Enforcement and Removal Operations

ERO Baltimore Field Office

Frederick County Detention Center

Frederick, Maryland

August 22–25, 2016

**COMPLIANCE INSPECTION
for the
FREDERICK COUNTY DETENTION CENTER
FREDERICK, MARYLAND**

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INSPECTION TEAM MEMBERS

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EXECUTIVE SUMMARY

The Office of Detention Oversight (ODO) conducted a compliance inspection of the Frederick County Detention Center (FCDC) in Frederick, Maryland, from August 22 to 25, 2016.¹ FCDC opened in October 1984 and is owned by the Frederick County Government and operated by the Office of the Frederick County Sheriff. The Office of Enforcement and Removal Operations (ERO) began housing detainees at FCDC in June 2006, pursuant to an Intergovernmental Service Agreement (IGSA), under the oversight of ERO’s Field Office Director (FOD) in Baltimore.

ERO staff members are assigned to the facility. A Detention Services Manager is not assigned to the facility. A FCDC Warden is responsible for oversight of daily facility operations and is supported by ██████ personnel. Correct Care Solutions provides detainee medical services, and FCDC county employees provide food services. The facility is accredited by both the National Commission on Correctional Health Care and the Maryland Commission on Correctional Standards. The FCDC is contractually obligated to comply with the ICE Performance-Based National Detention Standards (PBNDS) 2011, Sexual Abuse and Assault Prevention and Intervention (SAAPI) standard.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity ²	62
Average ICE Detainee Population ³	████
Male Detainee Population (as of 8/22/2016)	████
Female Detainee Population	N/A

OVERALL FINDINGS

In June 2012, ODO conducted an inspection of the facility under the National Detention Standards (NDS) 2000, reviewing the facility’s compliance with 21 standards. At that time, the facility was found compliant with 8 standards and had 20 deficiencies in remaining standards.

Inspection Results Compared	FY 2013 (NDS 2000)	FY 2016 (NDS 2000)
Standards Reviewed	21	16
Deficient Standards	8	3
Overall Number of Deficiencies	20	3
Corrective Action	0	2

In FY2016, ODO conducted an inspection of FCDC under the NDS 2000. ODO reviewed the facility’s compliance with 16 standards and found the facility compliant with 13 standards. ODO found three deficiencies in the remaining three standards. Finally, ODO identified two opportunities where the facility initiated corrective action during the course of the inspection.⁴

¹ Male and female detainees of security classification levels low and medium low classification levels are detained at the facility for longer than 72 hours.

² Data Source: ERO Facility List Report as of June 20, 2016.

³ *Ibid.*

⁴ Corrective actions, where immediately implemented, have been identified in the *Inspection Findings* section and annotated with a “C.”.

FINDINGS BY NDS 2000 MAJOR CATEGORIES

NDS 2000 STANDARDS INSPECTED ⁵	DEFICIENCIES
Part 1 – Detainee Services	
Access to Legal Material	0
Admission and Release	1
Detainee Classification System	0
Detainee Grievance Procedures	0
Detainee Handbook	0
Food Service	0
Funds and Personal Property	0
Staff-Detainee Communication	0
Telephone Access	0
Sub-Total	1
Part 2 – Security and Control	
Environmental Health and Safety	0
Special Management Unit (Administrative Segregation)	0
Special Management Unit (Disciplinary Segregation)	0
Use of Force	0
Sub-Total	0
Part 3 – Health Services	
Medical Care	1
Suicide Prevention and Intervention	1
Sub-Total	2
Total Deficiencies	3

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

INSPECTION PROCESS

Every fiscal year, ODO, a unit within the ICE Office of Professional Responsibility (OPR), conducts compliance inspections at detention facilities in which detainees are accommodated for periods in excess of 72 hours and with an average daily population greater than ten to determine compliance with the ICE National Detention Standards (NDS) 2000, or the PBNDS 2008 or 2011, as applicable.

During the compliance inspection, ODO reviews each facility's compliance with those detention standards that directly affect detainee health, safety, and/or well-being.⁶ Any violation of written policy specifically linked to ICE detention standards, ICE policies, or operational procedures that ODO identifies is noted as a deficiency. ODO also highlights any deficiencies found involving those standards that ICE has designated under either the PBNDS 2008 or 2011, to be "priority components."⁷ Priority components have been selected from across a range of detention standards based on their critical importance to facility security and/or the health and safety, legal rights, and quality of life of detainees in ICE custody.

Immediately following an inspection, ODO hosts a closeout briefing in person with both facility and ERO field office management to discuss their preliminary findings, which are summarized and provided to ERO in a preliminary findings report. Thereafter, ODO provides ERO with a final compliance inspection report to: (i) assist ERO in working with the facility to develop a corrective action plan to resolve identified deficiencies; and (ii) provide senior ICE and ERO leadership with an independent assessment of the overall state of ICE detention facilities. The reports enable senior agency leadership to make decisions on the most appropriate actions for individual detention facilities nationwide.

⁶ ODO reviews the facility's compliance with selected standards in their entirety.

⁷ Priority components have not been identified for the NDS.

DETAINEE RELATIONS

ODO interviewed 16 detainees, each of whom volunteered to participate. None of the detainees made allegations of mistreatment, abuse, or discrimination. The majority of detainees reported being satisfied with facility services, with the exception of the complaints below:

Admission and Release: Sixteen detainees complained they were strip searched at FCDC upon initial entry and after returning from court.

- Action Taken: ODO reviewed the Jail Management System Log and found all 16 detainees were striped searched and properly logged on the Code 209 electronic form. Senior FCDC staff informed ODO that whenever a detainee leaves the facility with access or exposure to public areas (e.g. court appearances), or whenever a reasonable suspicion exists, a strip search is conducted. Detainees are notified they will be strip searched upon returning from court. Further, Senior FCDC staff provided a memorandum from the local ERO Field Office, dated June 6, 2016, granting a waiver for the FCDC to conduct strip searches of detainees.

Environmental Health and Safety: Sixteen detainees complained that the hot water in the shower in housing [REDACTED] is too hot.

- Action Taken: ODO conferred with the maintenance supervisor who checked the water temperature and found it to be 110 degrees. The supervisor stated that the water temperature was within acceptable limits in accordance with the standard. However, the maintenance supervisor lowered the water temperature to 105 degrees in an attempt to satisfy the detainee complaints.

INSPECTION FINDINGS

DETAINEE SERVICES

ADMISSION AND RELEASE (AR)

ODO reviewed facility orientation procedures and found no documentation that procedures were approved by the local ERO office (**Deficiency AR-1**⁸).

Corrective Action: The facility initiated corrective action during the inspection by having the Baltimore Field Office Director issue a memorandum approving all orientation procedures for the FCDC (**C-1**).

HEALTH SERVICES

MEDICAL CARE (MC)

ODO reviewed detainee medical records and found that informed consent is not routinely obtained from all detainees prior to medical treatment (**Deficiency MC-1**⁹).

Corrective Action: The facility initiated corrective action during the inspection modifying the Intake Screening form (**C-2**) to add a statement of consent, which is then signed by the detainee.

SUICIDE PREVENTION AND INTERVENTION (SP&I)

ODO reviewed [REDACTED] medical staff training files and found no documentation of suicide prevention orientation training for [REDACTED] of the [REDACTED] personnel. Also, the facility does not have any documentation of periodic suicide prevention training being conducted for any medical staff (**Deficiency SP&I-1**¹⁰). FCDC's medical vendor, Correct Care Solutions' policy, *Suicide Risk Reduction Program*, G-05, dated June 27, 2014, states all staff will receive suicide prevention training during their orientation program and annually thereafter.

⁸ "All facilities shall have a medium to provide INS detainees an orientation to the facility. In IGSA's, the INS office of jurisdiction shall approve all orientation procedures." See ICE NDS 2000, Standard, Admission and Release, Section (III)(J).

⁹ "As a rule, medical treatment will not be administered against the detainee's will. The facility health care provider will obtain signed and dated consent forms from all detainees before any medical examination or treatment, except in emergency circumstances.

¹⁰ "All staff will receive training, during orientation and periodically, in the following: recognizing signs of suicidal thinking, including suspect behavior; facility referral procedures; suicide-prevention techniques; and responding to an in-progress suicide attempt."