

Office of Professional Responsibility

Monroe County Detention - Dorm Compliance Inspection 2025-001-113

March 11-13, 2025



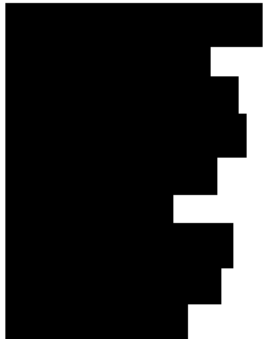
U.S. Immigration
and Customs
Enforcement

COMPLIANCE INSPECTION
of the
MONROE COUNTY DETENTION - DORM
Monroe, Michigan

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COMPLIANCE INSPECTION TEAM MEMBERS

	Team Lead	ODO
	Senior Inspections and Compliance Specialist	ODO
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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 Monroe County Detention - Dorm (MCDD) in Monroe, Michigan, from March 11 to 13, 2025..¹ The facility opened in 2000 and is owned and operated by the Monroe County Sheriff's Office. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at MCDD in 2000 under the oversight of ERO's Field Office Director in Detroit (ERO Detroit). The facility operates under the National Detention Standards (NDS) 2019.

[REDACTED] A jail administrator handles daily facility operations and manages [REDACTED] support personnel. Continental Café, LLC provides food services, VitalCore Health Strategies provides medical care, and Keefe Commissary provides commissary services at the facility. The facility does not hold any accreditations from any outside entities. In August 2023, MCDD was audited for the Department of Homeland Security (DHS) Prison Rape Elimination Act (PREA) and was DHS PREA certified.

Capacity and Population Statistics	Quantity
ICE Bed Capacity ²	[REDACTED]
Average ICE Population ³	[REDACTED]
Adult Male Population (as of March 11, 2025)	[REDACTED]
Adult Female Population (as of March 11, 2025)	[REDACTED]

During its last rated inspection, in Fiscal Year (FY) 2024, ODO found 3 deficiencies in the following areas: Admission and Release (1) and Funds and Personal Property (2).

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

² Data Source: ERO Custody Management Division Authorized Facility List as of March 10, 2025.

³ *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.⁴

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.

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	0
Transportation by Land	0
Sub-Total	0
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
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	1
Significant Self-Harm and Suicide Prevention and Intervention	0
Terminal Illness and Death	0
Disability Identification, Assessment, and Accommodation	0
Sub-Total	1
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

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

⁶ 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 45 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. All detainees reported satisfaction with facility services.

COMPLIANCE INSPECTION FINDINGS

CARE

MEDICAL CARE (MC)

ODO reviewed █ detainee medical records and found in █ out of █ records, no tuberculosis (TB) screening in accordance with the most current Centers for Disease Control and Prevention guidelines prior to placing detainees in general population. A purified protein derivative (PPD) implant may be used to screen detainees for TB, which the detainees did receive. The minimum amount of time for reading a PPD skin test after an implant is 48 hours; however, medical staff completed the reading of the PPD skin tests between 37 to 46 hours after implant of the PPD; 2 to 11 hours before the minimum allotted time (**Deficiency MC-18⁷**). **This is a priority component.**

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 20 standards under NDS 2019 and found the facility in compliance with 19 of those standards. ODO found one deficiency in the remaining standard. Since MCDD's last rated inspection in March 2024, the facility's compliance with NDS 2019 has remained consistent. MCDD went from 2 deficient standards and 3 deficiencies in March 2024 to 1 deficient standard and 1 deficiency during this most recent inspection, which included 1 priority component. MCDD completed its uniform corrective action plan for its last inspection in August 2024, which likely resolved the previous deficiencies ODO cited. ODO recommends ERO Detroit continue working with the facility to resolve the remaining deficiency in accordance with contractual obligations.

Compliance Inspection Results Compared	FY 2024 Full Inspection (NDS 2019)	FY 2025 Full Inspection (NDS 2019)
Standards Reviewed	20	20
Deficient Standards	2	1
Overall Number of Deficiencies	3	1
Priority Component Deficiencies	0	1
Repeat Deficiencies	0	0
Areas Of Concern	0	0
Corrective Actions	0	0
Facility Rating	Superior	Good

⁷ "All new arrivals shall receive tuberculosis screening in accordance with the most current Centers for Disease Control and Prevention (CDC) guidelines, including, but not limited to, CDC Guidelines for Correctional Facilities, prior to being placed in general population." See ICE NDS 2019, Standard, Medical Care, Section (II)(D)(1).



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