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Office of Professional Responsibility  
ICE Inspections  
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**Office of Detention Oversight  
Special Review  
2023-003-175**

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

**Alamance County Detention Facility  
Graham, North Carolina**

**September 26-28, 2023**

**SPECIAL REVIEW  
of the  
ALAMANCE COUNTY DETENTION FACILITY  
Graham, North Carolina**

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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 special review of the Alamance County Detention Facility (ACDF) in Graham, North Carolina, from September 26 to 28, 2023.<sup>1</sup> The facility opened in 2007 and is owned and operated by the Alamance County Sheriff’s Department. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at ACDF in 2019 under the oversight of ERO’s Field Office Director in Atlanta (ERO Atlanta). The facility operates under the National Detention Standards (NDS) 2019.<sup>2</sup>

[REDACTED] An ACDF major handles daily facility operations and manages [REDACTED] support personnel. Skillet provides food services, Southern Health Partners provides medical care, and Kimbles 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>3</sup>	[REDACTED]
Average ICE Population <sup>4</sup>	[REDACTED]
Adult Male Population (as of September 26, 2023)	[REDACTED]
Adult Female Population (as of September 26, 2023)	[REDACTED]

During its last full inspection, in Fiscal Year (FY) 2022, ODO found seven deficiencies in the following areas: Detention Files (2); Suicide Prevention and Intervention (1); and Use of Force (4).

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

<sup>2</sup> The facility changed its contractually required NDS in January 2022 from NDS 2000 to NDS 2019; however, this change was not provided to ODO prior to the May 2022 special review, which is why ODO assessed the facility’s compliance against the NDS 2000 in May 2022.

<sup>3</sup> Data Source: ERO Facility List as of September 26, 2023.

<sup>4</sup> *Ibid.*

## SPECIAL REVIEW PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population (ADP) greater than 10, 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.<sup>5</sup>

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 *Special Review Findings* section of this report.

Beginning 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 will conduct 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. ODO will conduct a complete review of several core standards, which may include but are not limited to Medical Care/Health Care, Medical Care (Women)/Health Care (Females), Hunger Strikes, Suicide Prevention, Food Service, Environmental Health and Safety, Emergency Plans, Use of Force and Restraints/Use of Physical Control Measures and Restraints, Special Management Units, Educational Policy (Family Residential Standard (FRS) only), Behavior Management (FRS only), Admission and Release, Classification, and Funds and Personal Property.

Upon completion of each review, 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.

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<sup>5</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>6,7</sup>	Deficiencies
<b>Part 1 - Safety</b>	
Environmental Health and Safety	0
<b>Sub-Total</b>	<b>0</b>
<b>Part 2 - Security</b>	
Hold Rooms in Detention Facilities	0
Use of Force and Restraints	0
Sexual Abuse and Assault Prevention and Intervention	0
<b>Sub-Total</b>	<b>0</b>
<b>Part 4 - Care</b>	
Food Service	0
Medical Care	2
Significant Self-Harm and Suicide Prevention and Intervention	1
Terminal Illness and Death	0
<b>Sub-Total</b>	<b>3</b>
<b>Part 5 - Activities</b>	
Recreation	1
<b>Sub-Total</b>	<b>1</b>
<b>Part 6 - Justice</b>	
Detainee Handbook	0
<b>Sub-Total</b>	<b>0</b>
<b>Total Deficiencies</b>	<b>4</b>

<sup>6</sup> For greater detail on ODO's findings, see the *Special Review Findings* section of this report.

<sup>7</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 attempted to interview the 14 detainees the facility housed during the inspection; however, all 14 detainees declined ODO's request for an interview.

## SPECIAL REVIEW FINDINGS

### CARE

#### MEDICAL CARE (MC)

ODO reviewed [REDACTED] clinical staff training records and found in [REDACTED] out of [REDACTED] records, no annual training from a dentist on how to conduct a dental exam (**Deficiency MC-45<sup>8</sup>**).

ODO reviewed the medical files of two detainees referred for a mental health evaluation and found a qualified mental health provider did not evaluate either detainee within 7 days after the referral (**Deficiency MC-127<sup>9</sup>**). **This is a priority component.**

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

ODO reviewed three detainee medical files for detainees on suicide watch and found in three out of three files, facility staff did not complete welfare checks every 8 hours (**Deficiency SSHPI-22<sup>10</sup>**).

### ACTIVITIES

#### RECREATION (R)

ODO interviewed a facility lieutenant, reviewed the facility recreation policy, observed the facility's housing units, and found the facility did not offer a variety of fixed and movable exercise equipment (**Deficiency R-8<sup>11</sup>**).

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<sup>8</sup> "Such non-dental clinicians shall be trained annually on how to conduct the exam by a dentist." *See* ICE NDS 2019, Standard, Medical Care, Section (II)(H).

<sup>9</sup> "Any detainee referred for mental health treatment shall be triaged for any emergency needs and receive an evaluation by a qualified mental health provider no later than seven days after the referral." *See* ICE NDS 2019, Standard, Medical Care, Section (II)(S)(2).

<sup>10</sup> "A mental health provider will perform welfare checks every 8 hours." *See* ICE NDS 2019, Standard, Significant Self-harm and Suicide Prevention and Intervention, Section (II)(F).

<sup>11</sup> "Exercise areas shall offer a variety of fixed and movable equipment." *See* ICE NDS 2019, Standard, Recreation, Section (II)(C)(1).

## CONCLUSION

During this special review, ODO assessed the facility's compliance with 10 standards under NDS 2019 and found the facility in compliance with 7 of those standards. ODO found four deficiencies in the remaining three standards, one of which was a priority component deficiency. Since ACDF's last special review in May 2022, the facility has shown improvement. ACDF went from three deficient standards and seven deficiencies in May 2022 to three deficient standards and five deficiencies during this most recent special review, which includes one priority component for not completing a mental health evaluation of detainees within 7 days after the referral. The facility's improved performance was likely a result of implementing the NDS 2019 and ERO Atlanta oversight. ODO recommends ERO Atlanta continue to work with the facility to resolve the remaining deficiencies in accordance with contractual obligations.

<b>Compliance Inspection Results Compared</b>	<b>FY 2022 Special Review (NDS 2000)</b>	<b>FY 2023 Special Review (NDS 2019)</b>
Standards Reviewed	11	10
Deficient Standards	3	3
Overall Number of Deficiencies	7	4
Priority Component Deficiencies	0	1
Repeat Deficiencies	4	0
Areas Of Concern	0	0
Corrective Actions	1	0
Facility Rating	Good	Good