



U.S. Department of Homeland Security
U.S. Immigration and Customs Enforcement
Office of Professional Responsibility
Inspections and Detention Oversight Division
Washington, DC 20536-5501

Office of Detention Oversight
Follow-Up Compliance Inspection

Enforcement and Removal Operations
ERO New York City Field Office

Bergen County Jail
Hackensack, New Jersey

August 23-26, 2021

FOLLOW-UP COMPLIANCE INSPECTION
of the
BERGEN COUNTY JAIL
Hackensack, New Jersey

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FOLLOW-UP COMPLIANCE INSPECTION TEAM MEMBERS

[REDACTED]	Team Lead	ODO
[REDACTED]	Inspections and Compliance Specialist	ODO
[REDACTED]	Contractor	Creative Corrections
[REDACTED]	Contractor	Creative Corrections
[REDACTED]	Contractor	Creative Corrections
[REDACTED]	Contractor	Creative Corrections
[REDACTED]	Observer	Creative Corrections

FACILITY OVERVIEW

The U.S. Immigration and Customs Enforcement (ICE) Office of Professional Responsibility (OPR) Office of Detention Oversight (ODO) conducted a follow-up compliance inspection of the Bergen County Jail (BCJ) in Hackensack, New Jersey, from August 23 to 26, 2021.¹ This inspection focused on the standards found deficient during ODO’s last inspection of BCJ from March 29 to April 1, 2021. The facility opened in 2000 and is owned and operated by Bergen County. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at BCJ in 2000 under the oversight of ERO’s Field Office Director in New York (ERO New York). The facility operates under the National Detention Standards (NDS) 2019.

ERO has assigned deportation officers to BCJ. A warden handles daily facility operations and manages █████ support personnel. Aramark Corporation provides food services, Bergen County provides medical care, and Keefe Group provides commissary services at the facility. The facility was accredited by the American Correctional Association in February 2018. In November 2017, BCJ was audited by the Department of Justice (DOJ) Prison Rape Elimination Act (PREA) and was DOJ PREA certified.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity ²	████
Average ICE Detainee Population ³	████
Male Detainee Population (as of August 23, 2021)	████
Female Detainee Population (as of August 23, 2021)	████

During its last inspection, in March 2021, ODO found six deficiencies in the following areas: Admission and Release (1); Funds and Personal Property (1); Special Management Units (2); Food Service (1); and Medical Care (1).

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

² Data Source: ERO Facility List Report as of August 16, 2021.

³ *Ibid.*

FOLLOW-UP COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population of 10 or more detainees, 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. In FY 2021, to meet congressional requirements, ODO began conducting follow-up inspections at all ICE ERO detention facilities, which ODO inspected earlier in the FY.

While follow-up inspections are intended to focus on previously identified deficiencies, ODO will conduct a complete review of several core standards, which include but are not limited to Medical Care, Hunger Strikes, Suicide Prevention, Food Service, Environmental Health and Safety, Emergency Plans, Use of Force and Restraints/Use of Physical Control Measures and Restraints, Admission and Release, Classification, and Funds and Personal Property. ODO may decide to conduct a second full inspection of a facility in the same FY based on additional information obtained prior to ODO's arrival on-site. Factors ODO will consider when deciding to conduct a second full inspection will include the total number of deficiencies cited during the first inspection, the number of deficient standards found during the first inspection, the completion status of the first inspection's UCAP, and other information ODO obtains from internal and external sources ahead of the follow-up compliance inspection. Conditions found during the inspection may also lead ODO to assess new areas and identify new deficiencies or areas of concern should facility practices run contrary to ICE standards. Any areas found non-compliant during both inspections are annotated as "Repeat Deficiencies" in this report.

ODO was unable to conduct an on-site inspection of this facility, as a result of the COVID-19 pandemic and instead, conducted a remote inspection of the facility. During this remote inspection, ODO interviewed facility staff, ERO field office staff, and detainees, reviewed files and detention records, and was able to assess compliance for at least 90 percent or more of the ICE national detention standards reviewed during the inspection.

FINDINGS BY NATIONAL DETENTION STANDARDS 2019 MAJOR CATEGORIES

NDS 2019 Standards Inspected ^{4,5}	Deficiencies
Part 1 – Safety	
Environmental Health and Safety	0
Sub-Total	0
Part 2 – Security	
Admission and Release	0
Custody Classification System	0
Funds and Personal Property	0
Use of Force and Restraints	0
Special Management Units	0
Sub-Total	0
Part 4 – Care	
Food Service	0
Hunger Strikes	1
Medical Care	5
Significant Self-Harm and Suicide Prevention and Intervention	1
Sub-Total	7
Total Deficiencies	7

⁴ For greater detail on ODO’s findings, see the *Follow-Up Compliance Inspection Findings* section of this report.

⁵ Beginning in FY 2021, ODO added Emergency Plans, Facility Security and Control, Population Counts, Hunger Strikes, and Staff Training as core standards. NDS 2019 does not include Emergency Plans, Population Counts, nor Staff Training as individual standards; however, those specific requirements are resident in other core standards.

DETAINEE RELATIONS

ODO interviewed 13 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. ODO conducted the detainee interviews via video teleconference.

Disability Identification, Assessment, and Accommodation: Two detainees stated they were not able to read and understand the facility specific handbook nor the ICE National Detainee Handbook. One detainee stated he speaks Spanish, but he is illiterate. The second detainee stated her native language was Moniga, a west African language, and she can speak but not read English.

- Action Taken: ODO interviewed the ICE supervisory detention deportation officer and the BCJ ICE liaison and reviewed both detainees' detention files. ODO did not find any documentation that either detainee was not able to read and understand the language in the handbooks. On August 26, 2021, BCJ staff read both handbooks to the detainees and answered their questions in their native languages.

Medical Care: One detainee stated a BCJ doctor examined him for a cyst located on his right hand, but the doctor did not take an x-ray of his cyst.

- Action Taken: ODO interviewed the health service administrator (HSA), reviewed the detainee's medical file, and confirmed a BCJ doctor evaluated the detainee on June 29, 2021. The doctor confirmed to the detainee that he had a cyst and saw no need for an x-ray. The doctor also stated the cyst does not compromise nor impact the detainee's daily life and does not have any neurological implications. ODO requested on August 26, 2021, BCJ medical staff met with the detainee and provided him with an overview of his cyst condition.

Medical Care: One detainee stated he has a tumor located on his right wrist. He submitted a medical request to have it removed and has received no update in over a month.

- Action Taken: ODO interviewed the HSA, reviewed the detainee's medical file, and confirmed a BCJ doctor evaluated the detainee on July 27, 2021. The doctor informed the detainee that he has a lipoma, a benign tumor that does not compromise nor impact the detainee's daily life nor have any neurological implications. ODO requested on August 26, 2021, BCJ medical staff with the detainee and provided him with an update on the status of his benign tumor.

FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

CARE

HUNGER STRIKES (HS)

ODO reviewed [REDACTED] detention files of detainees on hunger strike and found [REDACTED] of the files contained a notation indicating when the detainees ended their hunger strike (**Deficiency HS-34⁶**).

MEDICAL CARE (MC)

ODO reviewed [REDACTED] detainee medical files and found the BCJ medical staff did not conduct comprehensive health assessments, including physical examinations and mental health screenings, within 14 days of arrival for [REDACTED] detainees. Specifically, the BCJ medical staff completed the 14-day comprehensive health assessments between 15 and 28 days after the detainees arrived at BCJ (**Deficiency MC-27⁷**). **This is a repeat deficiency.**

ODO reviewed [REDACTED] detainee medical files and found the BCJ medical staff did not conduct initial dental screening exams within 14 days of arrival for [REDACTED] detainees. Specifically, the BCJ medical staff completed the initial dental screening between 15 and 21 days after the detainees arrived at BCJ (**Deficiency MC-43⁸**).

ODO reviewed [REDACTED] BCJ medical staff training files and found [REDACTED] BCJ medical staff did not receive first aid and cardiopulmonary resuscitation (CPR) training (**Deficiency MC-59⁹**).

ODO reviewed [REDACTED] medical files of detainees on prescribed psychotropic medication and found the BCJ medical staff did not obtain a documented informed consent form that includes a description of the medication's side effects for any of the detainees (**Deficiency MC-93¹⁰**).

Corrective Action: Prior to the conclusion of ODO's inspection, BCJ implemented a policy which included procedures for obtaining the psychotropic medication consent form prior to the administration of psychotropic medication. As verified by ODO, the facility additionally obtained informed consent forms from detainees currently housed at BCJ. ODO confirmed the HSA briefed BCJ's medical staff on the new policy (**C-1**).

⁶ "A notation shall be made in the detention file or retrievable electronic record when the detainee has ended the hunger strike." See ICE NDS 2019, Standard, Hunger Strikes, Section (II)(F).

⁷ "The facility will conduct and document a comprehensive health assessment, including a physical examination and mental health screening, on each detainee within 14 days of the detainee's arrival at the facility." See ICE NDS 2019, Standard, Medical Care, Section (II)(E).

⁸ "An initial dental screening exam shall be performed within 14 days of the detainee's arrival." See ICE NDS 2019, Standard, Medical Care, Section (II)(H).

⁹ "This training will be provided by a responsible medical authority in cooperation with the facility and will include the following:

b. The administration of first aid and cardiopulmonary resuscitation (CPR)." See ICE NDS 2019, Standard, Medical Care, Section (II)(K)(b).

¹⁰ "Prior to the administration of psychotropic medications, a separate documented informed consent, that includes a description of the medications side effects, shall be obtained." See ICE NDS 2019, Standard, Medical Care, Section (II)(O).

ODO reviewed BCJ’s facility specific handbook and found the handbook does not contain procedures for the detainees to request their medical files (**Deficiency MC-102¹¹**).

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

ODO reviewed [REDACTED] BCJ custody staff training files and found [REDACTED] BCJ custody staff did not receive first aid and CPR training (**Deficiency SSHSPI-3¹²**).

CONCLUSION

During this inspection, 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 seven deficiencies in the remaining three standards. ODO commends facility staff members for their responsiveness during this inspection and notes there was one instance where staff initiated immediate corrective action during the inspection. ODO recommends ERO New York 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 BCJ in April 2021.

Compliance Inspection Results Compared	First FY 2021 (NDS 2019)	Second FY 2021 (NDS 2019)
Standards Reviewed	18	10
Deficient Standards	5	3
Overall Number of Deficiencies	6	7
Repeat Deficiencies	0	1
Areas of Concern	1	0
Corrective Actions	1	1

¹¹ “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).

¹² “All of the following topics shall be covered:

2. Standard first aid training, cardiopulmonary resuscitation (CPR) training, and training in the use of emergency equipment (that may be located in each housing area of the detention facility).” *See* ICE NDS 2019, Standard, Significant Self-Harm and Suicide Prevention and Intervention, Section (II)(B)(2).