



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

**Office of Detention Oversight
Follow-Up Compliance Inspection**

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

**Broward Transitional Center
Pompano Beach, Florida**

July 12-14, 2022

FOLLOW-UP COMPLIANCE INSPECTION
of the
BROWARD TRANSITIONAL CENTER
Pompano Beach, Florida

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FOLLOW-UP COMPLIANCE INSPECTION TEAM MEMBERS



Acting Team Lead	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 follow-up compliance inspection of the Broward Transitional Center (BTC) in Pompano Beach, Florida, from July 12 to 14, 2022.¹ This inspection focused on the standards found deficient during ODO’s last inspection of BTC from December 13 to 17, 2021. The facility opened in 1998 and is owned and operated by The GEO Group, Inc. (GEO). The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at BTC in 2002 under the oversight of ERO’s Field Office Director in Miami (ERO Miami). The facility operates under the Performance-Based National Detention Standards (PBNDS) 2011 (Revised 2016).

ERO has assigned deportation officers (DO) and a deportation services manager to the facility. A facility administrator handles daily facility operations and manages █████ support personnel. GEO provides food services and medical care, and Keefe Commissary provides commissary services at the facility. The facility was accredited by the American Correctional Association and DHS PREA in December 2020 and the National Commission on Correctional Health Care in March 2021. In March 2021, BTC 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	█████
Average ICE Population ³	█████
Adult Male Population (as of July 12, 2022)	█████
Adult Female Population (as of July 12, 2022)	█████

During its last inspection, in Fiscal Year (FY) 2022, ODO found four deficiencies in the following areas: Correspondence and Other Mail (1); Post Orders (1); and Searches of Detainees (2).

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

² Data Source: ERO Facility List as of July 12, 2022.

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 uniform corrective action plan (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.

**FINDINGS BY PERFORMANCE-BASED NATIONAL
DETENTION STANDARDS 2011 (REVISED 2016)
MAJOR CATEGORIES**

PBNS 2011 (Revised 2016) Standards Inspected^{4,5}	Deficiencies
Part 1 – Safety	
Emergency Plans	0
Environmental Health and Safety	0
Sub-Total	0
Part 2 – Security	
Admission and Release	0
Custody Classification System	0
Facility Security and Control	0
Funds and Personal Property	0
Hold Rooms in Detention Facilities	0
Post Orders	1
Searches of Detainees	2
Staff-Detainee Communication	1
Use of Force and Restraints	0
Sub-Total	4
Part 4 - Care	
Food Service	0
Hunger Strikes	0
Medical Care	0
Medical Care (Women)	0
Significant Self-harm and Suicide Prevention and Intervention	0
Sub-Total	0
Part 5 - Activities	
Correspondence and Other Mail	0
Sub-Total	0
Part 6 - Justice	
Grievance System	2
Sub-Total	2
Total Deficiencies	6

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

⁵ 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 25 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or physical abuse; however, one detainee did indicate a facility staff member was verbally abusive, which is detailed below. Most detainees reported satisfaction with facility services except for the concerns listed below.

Medical Care: One detainee stated she was experiencing extreme pain in her mouth.

- Action Taken: ODO immediately concluded the interview and referred the detainee to the medical staff for evaluation due to pain in her mouth. On July 13, 2022, medical staff evaluated and scheduled the detainee for an off-site dental appointment for July 15, 2022. On July 15, 2022, the off-site dentist evaluated the detainee and extracted two of her teeth, resolving her discomfort.

Medical Care: One detainee stated he required medication for his previously diagnosed diabetes; however, the medical provider found no indications of diabetes after the detainee's initial medical evaluation.

- Action Taken: ODO reviewed the detainee's medical file, confirmed his arrival to BTC on May 5, 2022, and found the medical staff continued the detainee's previously prescribed medication for his weight of 237 pounds and monitored his blood sugar levels after his initial intake screening. During a follow-up visit on May 31, 2022, the medical staff tested his hemoglobin A1C level and found it was 5.3 and within the normal limit. The provider reviewed the test result, discontinued the detainee's medication, but ordered the medical staff to check the detainee's blood sugar level daily for the next 5 days. The detainee's blood sugar level test results were normal during that time. The provider informed ODO of the suspension of the detainee's medication due to his weight loss, normal blood sugar levels, and the detainee's refusal to continue blood sugar monitoring. The provider also informed ODO of the detainee's follow-up appointment on August 2, 2022, for additional lab work. On August 3, 2022, ODO contacted the provider and confirmed the medical staff examined the detainee on August 2, 2022, and his A1C level was at 5.5, still within the normal limit, and advised the detainee of his continued, normal blood sugar level.

Sexual Abuse and Assault Prevention and Intervention: One detainee stated he did not know how to report an instance of sexual assault or abuse.

- Action Taken: ODO observed bilingual PREA postings in each housing unit and within the common areas of the facility. These posters explained methods for reporting sexual abuse or assault, including to one or more staff members other than an immediate point-of-contact line officer. On July 14, 2022, ODO requested and witnessed ERO Miami staff meeting with the detainee to review reporting PREA incidences. The detainee denied any sexual abuse or assault victimization.

Staff-Detainee Communication: Six detainees stated they had no contact at the facility with the assigned ERO Miami DOs.

- Action Taken: ODO reviewed staff-detainee communication logs and confirmed ERO Miami DOs entered the BTC to visit the detainees every week on Tuesday, Wednesday, and Thursday. ODO also verified no issues with the BTC Talton communication system, the line of communication between detainees and ERO Miami, and confirmed detainees could also submit paper requests to ERO Miami. On July 14, 2022, ODO witnessed ERO Miami staff meeting with five out of the six detainees to discuss their issues. Each detainee acknowledged satisfaction in meeting with ERO Miami.

Staff-Detainee Communication: One detainee stated a facility officer was verbally abusive towards himself and two fellow detainees while they were playing cards.

- Action Taken: ODO informed BTC leadership of the incident, and the leadership initiated an inquiry into the detainee’s allegation. The officer, as identified by BTC, provided a written statement. According to the officer, he found the detainees playing cards outside their room in the common area during a security welfare check of the south area. He asked the detainees not assigned to that room to leave, but none of the detainees responded and just stared at each other, smirking or laughing. The officer stated used a sterner voice to say he would collect and verify identification and begin write-ups. Detainees began to exit the room after the officer collected two out of nine detainee identification documents. The officer stated that two of the detainees spoke profanely to him while he escorted detainees back to their housing units. On July 17, 2022, BTC leadership issued a memo to all staff in response to the allegation to maintain respect and professional bearing toward the detainee population. ODO found no evidence to confirm the detainee’s allegation.

FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

SECURITY

POST ORDERS (PO)

ODO reviewed the BTC PO program and found the facility POs did not state the duty hours for each facility post (**Deficiency PO-10⁶**). **This is a repeat deficiency.**

⁶ “The chief security officer shall supervise the preparation of all post orders, which shall: ...

2. Specifically state the duty hours for each post.”

See ICE PBNDS 2011 (Revised 2016), Standard, Post Orders, Section (V)(C)(2).

SEARCHES OF DETAINEES (SD)

ODO reviewed BTC SD policy and found the facility did not have written policy and procedures for strip and X-ray searches (**Deficiency SD-2⁷**). **This is a repeat deficiency.**

ODO reviewed BTC SD policy and found the facility did not have a written policy and procedure for close observation in “dry cells” to detect contraband (**Deficiency SD-3⁸**).

STAFF-DETAINEE COMMUNICATION (SDC)

ODO reviewed BTC SDC procedures and found the facility did not have a written procedure to promptly route and deliver requests to the proper ERO Miami official by authorized personnel (not detainees) without reading, altering, nor delaying such requests (**Deficiency SDC-10⁹**).

JUSTICE

GRIEVANCE SYSTEM (GS)

ODO reviewed the BTC GS program and found the facility site-specific handbook did not inform detainees of the procedure on how to file a complaint by calling the DHS Office of Inspector General (OIG) Hotline, 800-323-8603, or by writing to the DHS Inspector OIG (Department of Homeland Security, Attn: Office of the Inspector General, Washington, DC 20528). Specifically, the BCT site-specific handbook informed detainees to file a complaint by writing directly to or calling the Department of Justice (**Deficiency GS-18¹⁰**).

ODO reviewed 95 detainee grievances and found in 7 out of 95 grievances, no BTC response to a grievance within 5 working days of receipt (**Deficiency GS-57¹¹**).

⁷ “All facilities shall have written policy and procedures consistent with this standard for the following: ...

2. Body searches, including pat searches (“patdowns”), strip searches, body cavity searches and X-rays”
See ICE PBNDS 2011 (Revised 2016), Standard, Searches of Detainees, Section (V)(A)(2).

⁸ “All facilities shall have written policy and procedures consistent with this standard for the following: ...

3. Close observation in “dry cells” to detect contraband.”
See ICE PBNDS 2011 (Revised 2016), Standard, Searches of Detainees, Section (V)(A)(3).

⁹ “Each facility administrator shall: ...

Have written procedures to promptly route and deliver detainee requests to the appropriate ICE/ERO officials by authorized personnel (not detainees) without reading, altering, or delaying such request.”
See ICE PBNDS 2011 (Revised 2016), Standard, Staff-Detainee Communication, Section (V)(B).

¹⁰ “The facility shall provide each detainee: ...

8. The opportunity at any point to file a complaint directly to the Department of Homeland Security (DHS) OIG about staff misconduct, physical or sexual abuse or civil rights violations; complaints may be filed by calling the DHS OIG Hotline at 800-323-8603 or by writing to: Department of Homeland Security Attn: Office of the Inspector General Washington, DC 20528.”

See ICE PBNDS 2011 (Revised 2016), Standard, Grievance System, Section (V)(B)(8).

¹¹ “Grievance Process: ...

b) Detainee shall be provided with a written or oral response within five days of receipt of the grievance.”
See ICE PBNDS 2011 (Revised 2016), Standard, Grievance System, Section (V)(C)(3)(b)(1)(b).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 18 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 14 of those standards. ODO found six deficiencies in the remaining four standards. ODO commends facility staff members for their responsiveness during this inspection. ODO recommends ERO Miami work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligation. ERO provided ODO with the UCAP for ODO's last inspection of BTC on December 13, 2021.

Compliance Inspection Results Compared	First FY 2022 (PBNDS 2011) (Revised 2016)	Second FY 2022 (PBNDS 2011) (Revised 2016)
Standards Reviewed	23	18
Deficient Standards	3	4
Overall Number of Deficiencies	4	6
Repeat Deficiencies	0	2
Areas Of Concern	0	0
Corrective Actions	0	0
Facility Rating	Superior	N/A