



U.S. Department of Homeland Security

Immigration and Customs Enforcement

Office of Professional Responsibility

Inspections and Detention Oversight

Washington, DC 20536-5501

Office of Detention Oversight Compliance Inspection

Enforcement and Removal Operations
Detroit Field Office
Calhoun County Correctional Facility
Battle Creek, Michigan

December 6 - 8, 2011

FOR INTERNAL USE ONLY. This document may contain sensitive commercial, financial, law enforcement, management, and employee information. It has been written for the express use of the Department of Homeland Security to identify and correct management and operational deficiencies. In reference to ICE Policy 17006.1, issued 09/22/05; any disclosure, dissemination, or reproduction of this document, or any segments thereof, is prohibited without the approval of the Assistant Director, Office of Professional Responsibility.

**COMPLIANCE INSPECTION
CALHOUN COUNTY CORRECTIONAL FACILITY
DETROIT FIELD OFFICE**

TABLE OF CONTENTS

EXECUTIVE SUMMARY1

INSPECTION PROCESS

 Report Organization.....4

 Inspection Team Members.....4

OPERATIONAL ENVIRONMENT

 Internal Relations5

 Detainee Relations5

ICE NATIONAL DETENTION STANDARDS

 Detention Standards Reviewed.....6

 Access to Legal Material7

 Admission and Release8

 Detainee Classification System.....10

 Detainee Grievance Procedures11

 Detainee Handbook.....13

 Food Service14

 Funds and Personal Property16

 Staff Detainee Communication17

 Use of Force.....19

EXECUTIVE SUMMARY

The Office of Professional Responsibility (OPR), Office of Detention Oversight (ODO) conducted a Compliance Inspection (CI) of the Calhoun County Correctional Facility (CCCF), Battle Creek, Michigan, from December 6 to 8, 2011. The facility is owned by Calhoun County and operated by the Calhoun County Sheriff's Office, Battle Creek, Michigan. CCCF accommodates ICE detainees of all classification levels for periods in excess of 72 hours via a Detention Services Intergovernmental Agreement with the USMS. The facility opened in 1994, and was awarded a contract in 1999 to house Immigration and Naturalization Service (INS) detainees. The total number of staff (non-ICE) employed at CCCF is 101. The total inmate capacity is 630, and the total capacity for ICE detainees is 275. At the time of the inspection, CCCF housed 150 detainees (140 males and 10 females). All other bed space at CCCF is reserved for the U.S. Marshals Service and county or municipal inmates. Medical care is provided by Corizon and food service is provided by Aramark Correctional Services. In March 2010, CCCF received accreditation from the National Commission on Correctional Health Care.

CCCF compliance with ICE policies and the ICE National Detention Standards (NDS) is the responsibility of the Office of Enforcement and Removal Operations (ERO) Field Office Director, Detroit, MI (FOD/Detroit). An Assistant Field Office Director (AFOD) located at the Detroit Field Office has direct oversight of CCCF. ICE does not have staff permanently assigned to the facility. A Deportation Officer (DO) and an Immigration Enforcement Agent (IEA) from the Detroit Field Office conduct scheduled and unscheduled detainee liaison visits to the facility to address detainee concerns and inquiries. An ERO Detention Service Manager (DSM) conducts two visits per month to monitor facility compliance with policies and standards.

ODO conducted a Quality Assurance Review (QAR) at CCCF in September 2009. ODO found 90 deficiencies in the following standards: Access to Legal Material, Detainee Grievance Procedures, Detainee Handbook, Disciplinary Policy, Emergency Plans, Environmental Health and Safety, Food Service, Funds and Personal Property, Hold Rooms in Detention Facilities, Issuance and Exchange of Clothing, Bedding, and Towels, Key and Lock Control, Medical Care, Post Orders, Security Inspections, Special Management Unit (Administrative and Disciplinary), Staff-Detainee Communication, Terminal Illness, Advance Directives, and Death, Tool Control, and Use of Force. In November 2010, ODO conducted a Follow-up Inspection at CCCF. ODO found the vast majority of the identified deficiencies from the previous QAR were corrected; however, repeat deficiencies were noted in the Food Service and Use of Force areas.

In January 2011, the ERO Detention Standards Compliance Unit (DSCU) contractors, MGT of America, Inc., conducted an annual inspection of the ICE NDS at CCCF. The facility received an overall rating of "Acceptable," and was found to be in compliance with all 38 standards reviewed.

During this CI, ODO reviewed a total of 15 NDS. Five areas were found to be fully compliant: 22 deficiencies were found in the remaining 9 areas: Access to Legal Material (2 deficiencies), Admission and Release (2), Detainee Grievance System (3), Detainee Handbook (1), Detainee Classification System (2), Food Service (3), Funds and Personal Property (1), Staff Detainee Communication (5), and Use of Force (3).

This report includes descriptions of all the deficiencies and refers to the specific, relevant sections of the ICE NDS. The report will be provided to ERO to assist in the development of corrective actions to resolve the 22 identified deficiencies.

Overall, ODO found CCCF in compliance with the areas and standards inspected, including Medical, Special Management Units and Telephone Access. A majority of the 22 deficiencies identified were administrative in nature (paperwork, logs, postings, etc.), rather than shortcomings with respect to practices and procedures. However, ODO identified some deficiencies that are significant to the well-being and rights of ICE detainees. In particular, the lack of daily searches for contraband in the food service area and the lack of a pre-employment medical examination for the department's supervisor are serious concerns. Additionally, CCCF is failing to maintain a log of, or tracking system for, detainee grievances, and its staff is not provided with sufficient guidance with regard to identifying and properly handling emergency grievance instances.

ODO evaluated CCCF's compliance with the Staff-Detainee Communication standard to assess communications between ERO, CCCF, and detainees. Generally, healthy and robust communications among the facility staff, FOD personnel, and the detainee population promotes a well-run detention environment. At CCCF, the absence of posted schedules for ERO staff visits, the lack of a tracking system for detainee requests, and the inconsistency in the required 72-hour response timeframe for detainee requests are all areas in need of immediate resolution.

CCCF does not have a designated area for use as a law library. In lieu of a dedicated law library, the facility has two computers and a printer on a rolling cart available for use upon request. Procedures for requesting access and additional time in the law library (beyond the five hours per week minimum) is not available to detainees.

In the area of Food Service, CCCF is generally in compliance with the NDS; however, ODO found the Aramark Cook Supervisor, employed at CCCF for more than 60 days, did not complete a pre-employment medical examination. Pre-employment medical examinations serve the critical purpose of ensuring food service workers have no communicable medical conditions. ODO observed inmate workers being searched when leaving the food service area at the end of each shift; however, they are not searched when they leave for visits, medical appointments, or other activities.

CCCF does not videotape calculated use of force incidents with a handheld video camera with audio capability, as required by the NDS. Additionally, the use of force team technique is not being used by CCCF when a detainee is forcibly moved and/or restrained during a calculated use of force. Both requirements are important components in the effort to ensure the well-being of facility personnel, as well as the overall detainee population.

While ODO did not review the Environmental Health and Safety standard during this inspection, ODO identified the fact that detainees are being charged for haircuts in the amount of ten dollars each as an area of concern.

ODO found the medical care at CCCF to be well-managed. CCCF has a fully functioning medical unit to address detainee health care and a clinic that is adequately staffed to meet detainee health needs. ODO verified intake screenings, physical examinations, medications, treatments for special and chronic needs, and follow-up care are provided in accordance with the standard. Detainee sick call requests are reviewed and triaged in a timely manner. ODO also verified medical transfer summaries were included in all 14 of the records reviewed for detainees being transferred from CCCF.

ICE detainees have access to television, outdoor recreation, local newspapers, mail, and commissary purchases. CCCF also offers religious services, as well as vocational and educational programs.

This report includes descriptions of all the deficiencies and refers to the specific, relevant NDS. The report will be provided to ERO to develop corrective actions to resolve the 22 deficiencies.

INSPECTION PROCESS

ODO inspections evaluate the welfare, safety, and living conditions of detainees. ODO primarily focuses on areas of noncompliance with the ICE National Detention Standards (NDS) or the ICE Performance Based National Detention Standards (PBNDS), as applicable. The NDS apply to CCCF. In addition, ODO may focus its inspection based on detention management information provided by ERO Headquarters (HQ) and ERO field offices, and on issues of high priority or interest to ICE executive management

ODO reviewed the processes employed at CCCF to determine compliance with current policies and detention standards. Prior to and during the inspection, ODO collected and analyzed relevant allegations and detainee information from multiple ICE databases, including the Joint Integrity Case Management System (JICMS) and the ENFORCE Alien Booking Module (EABM) and Alien Removal Module (EARM). ODO also gathered facility facts and inspection-related information from ERO HQ staff to prepare for the site visit at CCCF.

REPORT ORGANIZATION

This report documents inspection results, serves as an official record, and is intended to provide ICE and detention facility management with a comprehensive evaluation of compliance with policies and detention standards. It summarizes those NDS that ODO found deficient in at least one aspect of the standard. ODO reports convey information to best enable prompt corrective actions and to assist in the on-going process of incorporating best practices in nationwide detention facility operations.

OPR classifies program issues into one of two categories: deficiencies and areas of concern. Specific deficiencies and areas of concern are identified in bold with sequential numbers in this report. OPR defines a deficiency as a violation of written policy that can be specifically linked to the NDS, or to ICE policy or operational procedure. OPR defines an area of concern as something that may lead to or risk a violation of the NDS or ICE policy or operational procedure. When possible, the report includes contextual and quantitative information relevant to the cited standard. Deficiencies are highlighted in bold throughout the report and are encoded sequentially according to a detention standard designator.

Comments and questions regarding the report findings should be forwarded to the Deputy Division Director, OPR, Office of Detention Oversight.

INSPECTION TEAM MEMBERS

(b)(6), (b)(7)c	Management and Program Analyst (Team Leader)	ODO, Headquarters
	Special Agent	ODO, Headquarters
	Detention and Deportation Officer	ODO, Headquarters
	Contract Inspector	Creative Correction
	Contract Inspector	Creative Correction
	Contract Inspector	Creative Correction

OPERATIONAL ENVIRONMENT

INTERNAL RELATIONS

ODO interviewed ICE and CCCF supervisory personnel, including the Jail Administrator and the AFOD. ODO also interviewed a Supervisory Immigration Enforcement Agent (SIEA), an IEA and several CCCF Correctional Officers (CO). During the interviews, all personnel stated the working relationship between CCCF and ERO is professional and mutually beneficial, and morale is good amongst HDC and ERO officers.

ERO personnel stated they have sufficient resources to carry out their duties and responsibilities at CCCF. Scheduled and unscheduled visits to the facility by ERO management personnel occur six to seven times per year. DOs and IEAs visit the CCCF housing units three times each week to address detainee concerns and to respond to detainee written requests.

DETAINEE RELATIONS

ODO randomly-selected and interviewed 10 male and 5 female ICE detainees to assess the overall living and detention conditions at CCCF. ODO received no complaints concerning access to legal materials, issuance and replenishment of hygiene supplies, sending and receiving mail, recreation, visitation, religious service, the grievance process, or medical care. All expressed satisfaction with the quality of the food; however, three detainees stated the food portions were too small. All expressed that the CCCF is professional and detainees are treated with dignity and respect.

Detainees stated they see ICE officers three or four times a week. All stated they are familiar with the procedures for contacting their respective DO, pro bono legal services, and consular offices. All males stated that they are being charged ten dollars per haircut at the barber shop. ODO verified this with CCCF staff. Funds are deducted from detainee accounts. Two detainees stated the facility did not make reasonable accommodations for religious holiday food menus. All stated they received handbooks.

ICE NATIONAL DETENTION STANDARDS

ODO reviewed a total of 15 NDS and found HDC fully compliant with the following 6 standards:

- Detainee Transfers
- Medical Care
- Telephone Access
- Special Management Unit (Administrative Segregation)
- Special Management Unit (Disciplinary Segregation)
- Suicide Prevention and Intervention

As these six standards were compliant at the time of the review, a synopsis for these areas was not prepared for this report.

ODO found deficiencies in the following nine areas:

- Access to Legal Material
- Admission and Release
- Detainee Classification System
- Detainee Grievance Procedures
- Detainee Handbook
- Food Service
- Funds and Personal Property
- Staff-Detainee Communication
- Use of Force

Findings for each of these standards are presented in the remainder of this report.

ACCESS TO LEGAL MATERIAL (ALM)

ODO reviewed the Access to Legal Material standard at CCCF to determine if detainees have access to a law library, legal materials, courts, counsel, and equipment to facilitate the preparation of legal documents, in accordance with the ICE NDS. ODO reviewed policies, interviewed facility staff, and assessed equipment used by detainees to access legal materials.

The facility does not have a designated area for use as a law library (**Deficiency ALM-1**). In lieu of a dedicated law library, the facility has a separate small-sized room with a stationary computer available for use. Additionally, two computers and printers on rolling carts are available for use in the housing areas, upon request. Detainees also have applicable supplies available for use when the carts are present in the housing areas. ODO acknowledges the efforts of CCCF to provide access to legal materials within the housing units; however, the facility does not have a law library located in a designated room within the facility, as per the ICE NDS (**Deficiency ALM-1**). This deficiency was cited during the September 2009 ODO QAR.

Upon admission, CCCF provides detainees with a facility-specific handbook that should inform detainees about the availability of legal materials and the procedures for requesting access. The handbook does not inform detainees of the scheduled hours of access, or the procedures for requesting additional time to access legal materials, requesting legal reference materials not maintained in the library, or notifying a designated employee that legal material or equipment is missing or damaged (**Deficiency ALM-2**), nor is this information posted.

STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS

DEFICIENCY ALM-1

In accordance with the ICE NDS, Access to Legal Material, section (III) (A), the FOD must provide a law library in a designated room with sufficient space to facilitate detainees' legal research and writing. The law library shall be large enough to provide reasonable access to all detainees who request its use. It shall contain a sufficient number of tables and chairs in a well-lit room, reasonably isolated from noisy areas.

DEFICIENCY ALM-2

In accordance with the ICE NDS, Access to Legal Material, section (III)(Q), the FOD must ensure the detainee handbook or equivalent shall provide detainees with the rules and procedures governing access to legal materials, including the following information: 1. that a law library is available for detainee use; 2. the scheduled hours of access to the law library; 3. the procedure for requesting access to the law library; 4. the procedure for requesting additional time in the law library (beyond the 5 hours per week minimum); 5. the procedure for requesting legal reference materials not maintained in the law library; and 6. the procedure for notifying a designated employee that library material is missing or damaged. These policies and procedures shall also be posted in the law library along with a list of the law library's holdings.

ADMISSION AND RELEASE (AR)

ODO reviewed the Admission and Release NDS at CCCF to determine whether procedures are in place to protect the health, safety, security and welfare of each person during the admission and release process. ODO interviewed staff and detainees, and reviewed policies and procedures, the detainee handbook, and detention files.

ODO observed CCCF intake procedures during the admission of ICE detainees to the facility, including the creation of detention files by facility staff. ODO reviewed 20 randomly-selected detention files to determine if required detainee-related documents were present and properly completed. All files were in good order and did contain required documents, including Forms I-203/203a, Order to Detain or Release, authorizing the detention and release of detainees; however, upon arrival, detainees are not accompanied with Form I-213, Record of Deportable/Inadmissible Alien. (**Deficiency AR-1**). The I-213 is an essential ICE document from which facilities are able to properly classify incoming detainees.

During intake processing, all property accompanying the detainee is taken, catalogued, and appropriately placed in detainee property bags. ODO also observed CCCF officers conducting thorough interviews of detainees upon admission. Additionally, facility medical staff conduct detailed medical screenings of all ICE detainees.

CCCF staff stated that visual searches and pat-downs of ICE detainees are conducted by officers of the same gender. During the inspection, ODO determined that the facility does not conduct strip-searches of detainees upon admission. CCCF policy does allow officers to conduct strip-searches with supervisory approval, if reasonable suspicion exists that a detainee may have concealed contraband on their person. Interviews with detainees and facility personnel, in conjunction with detention file reviews, confirm that strip-searches are not being conducted at CCCF.

During the admissions process, CCCF personnel provide detainees with orientation briefings regarding the rules and regulations of the facility. CCCF makes use of a video presentation to supplement the material provided in the facility handbook. The CCCF written orientation policy and procedures have not been approved by ERO personnel, as required (**Deficiency AR-2**). To be certain that ICE detainees are provided with a thorough orientation by each IGSA facility, the respective FOD office must approve all applicable procedures.

STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS

DEFICIENCY AR-1

In accordance with the ICE NDS, Admission and Release, section (III)(B), the FOD must ensure admission staff will use the documentation accompanying each new arrival for identification and classification purposes. If the classification officers are not ICE employees, ICE will provide only the information needed for classification-processing. Under no circumstances shall non-ICE personnel have access to the detainee's A-file.

DEFICIENCY AR-2

In accordance with the ICE NDS, Admission and Release, section (III)(B), the FOD must ensure all facilities shall have a medium to provide ICE detainees an orientation to the facility. In IGSA's the ICE office of jurisdiction shall approve all orientation procedures.

DETAINEE CLASSIFICATION SYSTEM (DCS)

ODO reviewed the Detainee Classification System standard at CCCF to determine if there is a formal classification process for managing and separating detainees based on verifiable and documented data. ODO reviewed policies, the facility handbook, and 15 detainee classification files. ODO also interviewed a classification officer and a supervisor assigned to classify detainees upon arrival.

The facility holds ICE detainees of all classification levels. CCCF staff advised that ERO does not consistently provide sufficient documentation to assist in the detainee classification process. ODO reviewed 15 randomly-selected detention files. Eight files did not contain sufficient data, including Forms I-213 and I-203/203a (**Deficiency DCS-1**). The seven remaining files did contain the appropriate documents from which to properly classify detainees.

During the review of the CCCF handbook, ODO noted the classification section does not include an explanation of the classification levels, including the conditions and restrictions applicable to each. Additionally, the handbook does not state the procedures by which a detainee may appeal his or her classification (**Deficiency DCS-2**). The two above-mentioned requirements have been developed to help ensure proper classification for the overall well-being of detainees, as well as the safety of facility staff and visitors.

STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS

DEFICIENCY DCS-1

In accordance with the ICE NDS, Detainee Classification System, section (III)(A)(1), the FOD must ensure all detainees are classified upon arrival, before being admitted into the general population. ICE will provide CDFs and IGSA facilities with the data they need from each detainee's file to complete the classification process. All officers assigned to classification duties shall be trained in the facility's classification process.

DEFICIENCY DCS-2

In accordance with the ICE NDS, Detainee Classification System, section (III)(I), the FOD must ensure the detainee handbook's section on classification will include the following:

1. An explanation of the classification levels, with the conditions and restrictions applicable to each.
2. The procedures by which a detainee may appeal his/her classification.

DETAINEE GRIEVANCE PROCEDURES (DGP)

ODO reviewed the Detainee Grievance Procedures standard at CCCF to determine whether a process to submit formal or emergency grievances exists, and responses are provided in a timely manner, without fear of reprisal. In addition, ODO reviewed the standard to determine whether detainees have an opportunity to appeal responses and whether accurate records are maintained. ODO interviewed ERO officials, CCCF officials, and detainees; and reviewed facility records, policies, and procedures.

CCCF has written policies and procedures for detainees to submit informal and formal grievances. Assistance with the filing of grievances is available, if needed, through language services and/or facility personnel who are able to translate for detainees. While the facility encourages informal grievance resolution at the lowest possible level, detainees may initiate the formal grievance process by writing their grievance on a request form. Formal grievances are reviewed by the CCCF grievance officer and copies are maintained in the respective detention files, as required; however, the facility is not maintaining a detainee grievance log (**Deficiency DGP-1**). Additionally, resolved informal or oral grievances that are not being documented and placed in detention files, as required (**Deficiency DGP-2**).

ODO apprised CCCF personnel of the importance of maintaining an official grievance log of all formal grievances and documenting and placing the results of all informally resolved grievances in detention files. All formal and informal detainee concerns or complaints must be recorded and properly filed to ensure the information is shared between ICE and detention facility personnel.

The ICE Detainee Grievance Procedure standard requires the implementation of proper procedures to identify and handle emergency grievances. A review of CCCF Policy J160.1 "Inmate Rights" indicates CCCF has not developed detailed written procedures for handling emergency detainee grievances (**Deficiency DGP-3**). In addition to creating specific guidance and procedures, ODO recommends CCCF provide training to its personnel on these procedures to ensure that emergency grievances are properly identified and addressed in an expeditious and thorough manner.

All grievance-related deficiencies were discussed with CCCF and ERO staff during the review and at the closeout briefing.

STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS

DEFICIENCY DGP-1

In accordance with the ICE NDS, Detainee Grievance Procedures, section (III)(E), the FOD must ensure each facility devise a method for documenting detainee grievances. At a minimum, the facility will maintain a detainee grievance log.

DEFICIENCY DGP-2

In accordance with the ICE NDS, Detainee Grievance Procedures, section (III)(A)(1), the FOD must ensure the detainee is free to bypass or terminate the informal grievance process, and proceed directly to the formal grievance stage. If an oral grievance is resolved to the detainee's satisfaction

at any level of review, the staff member need not provide the detainee written confirmation of the outcome; however, the staff member will document the results for the record and place his/her report in the detainee's detention file.

DEFICIENCY DGP-3

In accordance with the ICE NDS, Detainee Grievance Procedures, section (III)(F), the FOD must ensure each facility shall implement procedures for identifying and handling an emergency grievance. An emergency grievance involves an immediate threat to a detainee's safety or welfare. Once the receiving staff member approached by a detainee determines that he/she is in fact raising an issue requiring urgent attention, emergency grievance procedures will apply.

DETAINEE HANDBOOK (DH)

ODO reviewed the Detainee Handbook standard at CCCF to determine if the facility provides each detainee with a handbook, written in English and any other languages spoken by a significant number of detainees housed at the facility. ODO reviewed the detainee handbook to ensure it describes the facility's rules and sanctions, disciplinary system, mail and visiting procedures, grievance system, services, programs, and medical care, in accordance with the ICE NDS. ODO also interviewed staff and reviewed the facility's local detainee handbook.

CCCF detainee handbooks are available in both English and Spanish. A majority of the detainee population at CCCF are from Central and South America; Spanish-speaking countries. ODO confirmed that a sufficient number of handbooks are available in Spanish and are distributed properly. CCCF staff informed ODO that in accordance with local policy, detainees are provided verbal and video orientations that include references to the handbook. Subsequently, detainees are required to sign for the handbook and a receipt is generated. All detainees stated that they were issued a facility detainee handbook. CCCF last revised its handbook in January 2011.

During the review, ODO discovered the CCCF detainee handbook does not provide any information concerning law library use in accordance with the NDS (**Deficiency DH-1**). ODO recommends this missing information be inserted during the annual handbook revision. Other handbook omissions are reported under the relevant standards as **Deficiencies ALM-2, DCS-2, and F&PP-1**.

STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS

DEFICIENCY DH-1

In accordance with the ICE NDS, Detainee Handbook, section (III)(B), the FOD must ensure the handbook will briefly describe individual programs and services and associated rules. Among others, these include recreation, visitation, education, voluntary work, telephone use, correspondence, library use, and the canteen/commissary. The overview will also cover medical policy (sick-cell); facility-issued items, e.g., clothing, bedding, etc.; access to personal property; and meal service.

FOOD SERVICE (FS)

ODO reviewed the Food Service NDS at CCCF to determine if detainees are provided with a nutritious and balanced diet, in a sanitary manner. ODO reviewed policies and documentation, interviewed staff, observed meal service and tray delivery, and inspected food storage and preparation areas.

All work associated with the preparation and service of meals is performed by contractor Aramark Correctional Services, Inc. The facility has a satellite system meal service. No ICE detainees work in the food service department. ODO verified inspections are conducted as required and temperature logs are maintained. The master menu was certified by a licensed dietician. Sanitation in the food service areas was good and equipment was found to be in working order. Documentation was produced verifying the food service operation was last inspected by the Calhoun County Public Health Department on September 2, 2011.

Daily searches of food service work areas are not conducted as standard operating procedure. ODO was informed food service staff does not conduct searches on any regular basis, and security staff performs shakedowns in the area only twice a month (**Deficiency FS-1**). ODO also notes inmate workers are only searched at the end of their shift; they are not searched if they leave the kitchen during their shift for visits, medical appointments, or for other reasons. This deficiency was cited during the ODO 2009 QAR and again in the 2010 Follow-Up Inspection. Regular searches of the food service area and workers ensure contraband is not removed from the kitchen.

ODO verified all inmate workers have received medical clearances to work in the food service department; however, an Aramark Cook Supervisor employed at CCCF for more than 60 days did not undergo a pre-employment medical examination (**Deficiency FS-2**). Pre-employment medical examinations serve the critical purpose of ensuring food service workers have no communicable medical conditions.

In its inspection of storage areas, ODO found food items stored on shelving with the required six-inch clearance from the floor; however, the items were stored against the walls (**Deficiency FS-3**). The standard requires a two-inch clearance from walls to prevent possible contamination by vermin.

STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS

DEFICIENCY FS-1

In accordance with the ICE NDS, Food Service, section (III)(B)(5), the FOD must ensure all facilities establish daily searches (shakedowns) of work areas (trash, etc.) as standard operating procedures, paying particular attention to trash receptacles. Also required are searches of detainees leaving certain work areas (e.g., bakery, vegetable preparation, dining room, warehouse).

DEFICIENCY FS-2

In accordance with the ICE NDS, Food Service, section (III)(H)(3)(a), the FOD must ensure all food service personnel (both staff and detainee) receive a pre-employment medical examination.

DEFICIENCY FS-3

In accordance with the ICE NDS, Food Service, section (III)(J)(3)(d)(e), the FOD must ensure all products are stored at least six inches from the floor and sufficiently far from walls to facilitate pest control measures. Food items are to be stored at least two inches from the walls and at least six inches above the floor.

FUNDS AND PERSONAL PROPERTY (F&PP)

ODO reviewed the Funds and Personal Property NDS at CCCF to determine if controls are in place to inventory, issue receipts for, store, and safeguard detainees' personal property. ODO reviewed policies and procedures, and interviewed staff.

CCCF's funds and personal property policy and procedures provide for the accounting, inventory, and safeguarding of detainee property from the time of admission until the time of release. Funds and valuables are properly inventoried and logged by the facility's supervisory staff. The safe and the large-valuables locker are maintained in the shift supervisor's office, as required by the NDS. Detainees and/or family members are able to deposit funds into individual accounts for commissary privileges. The CCCF detainee handbook has policies and procedures concerning personal property; however, the facility does not have a policy for storing or mailing property not allowed in the detainee's possession (**F&PP-1**). To ensure accountability of all detainee property, the process must be articulated clearly and transparently in the facility handbook.

STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS

DEFICIENCY F&PP-1

In accordance with the ICE NDS, Funds and Personal Property, section (III)(J)(3), the FOD must ensure the facility's detainee handbook or equivalent notifies detainees of facility policies and procedures concerning personal property including:

- 3). The rules for storing or mailing property not allowed in their possession.

STAFF-DETAINEE COMMUNICATION (SDC)

ODO reviewed the Staff-Detainee Communication standard at CCCF to determine if procedures are in place to allow formal and informal contact between detainees and key ICE and facility staff; and if ICE detainees are able to submit written requests to ICE staff and receive timely responses in accordance with the ICE NDS. ODO interviewed staff and detainees, and reviewed policies and procedures, request logs, and detention files.

Detention facilities are required to document unannounced visits by ICE personnel to detainee living areas. ODO conducted interviews of CCCF and ICE staff to assess compliance with the standard. The review confirmed ERO management personnel, including the AFOD, are conducting unannounced and unscheduled visits to the facility; however, the facility is not maintaining a record of those visits (**Deficiency SDC-1**). Additionally, ERO officers are required to perform weekly facility visits, and must document their observations. The ICE Change Notice National Detention Standards, Staff/Detainee Communication Model Protocol, dated June 15, 2007, specifies guidelines for detention facility liaison visits. ODO confirmed ICE officers are conducting visits to the facility and are completing the required facility liaison checklist. As with the unannounced ICE management visits to the facility, a log is not being used at CCCF for recording informal communications between ICE officers and detainees (**Deficiency SDC-2**). The lack of proper documentation is particularly concerning to ODO, especially in light of the previous OPR inspection conducted in 2009 that cited the same deficiencies.

According to ICE and CCCF personnel, Tuesdays and Thursdays are designated days for scheduled contact visits for ERO officers to communicate with detainees. ERO staff visited the facility during the ODO compliance inspection, but the official visitation schedule was not posted in the detainee living areas, as required by the NDS (**Deficiency SDC-3**). It is important that the visitation schedules of ERO officers be conspicuously posted in the facility so detainees are aware of opportunities to ask questions of, or address concerns to, ERO officers.

Detainees are able to write and submit requests to ICE through CCCF officers. Request forms are scanned and transmitted via e-mail to ICE for review and response. ODO reviewed the detainee request process to ensure detainees receive responses from ICE within the required 72-hour window, as per the NDS. ODO found that requests are received from detainees and transmitted to ICE, typically on the same day; however, responses from ERO are not consistently received by CCCF within 72 hours of transmission (**Deficiency SDC-4**). Additionally, CCCF does not maintain a log to track the complete detainee request process, as required (**Deficiency SDC-5**). CCCF relies strictly on the electronic mail system and its sent and received archives for the tracking of detainee requests. ODO recommends that CCCF immediately establish a computer-based or paper log to track the requests in detail, as required by the ICE NDS.

During the review and closeout, ODO discussed the above-cited deficiencies with CCCF and ERO staff to highlight the importance of detailed record-keeping in this area. ODO has repeatedly observed that facilities with well-managed staff-detainee communications are typically less likely to experience serious detention-related issues and events as those with poor communication capabilities and oversight.

STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS

DEFICIENCY SDC-1

In accordance with the ICE NDS, Staff-Detainee Communication, section (III)(A)(1), the FOD must ensure policies and procedures shall be in place to ensure and document that the ICE Officer in Charge, the Assistant Officer in Charge, and designated department heads conduct regular unannounced (not scheduled) visits to the facility's living and activity areas to encourage informal communication between staff and detainees, and informally observe living and working conditions. Each facility shall develop a method to document the unannounced visits, and ICE will document visits to IGSAs.

DEFICIENCY SDC-2

In accordance with the Change Notice Staff/Detainee Communication Model Protocol, dated June 15, 2007, section (F)(2), the FOD must provide the Jail Liaison Officer with a logbook to maintain at the facility to log their visits, names and alien registration numbers of detainees informally interviewed and any unscheduled communications with detainees, along with any concerns or comments.

DEFICIENCY SDC-3

In accordance with the ICE NDS, Staff-Detainee Communication, section (III)(A)(2)(b), the FOD shall devise a written schedule and procedure for weekly detainee visits by District ICE detention and deportation staff. The ICE officer will also visit the facility's Special Management Units (SMU) to interview any ICE detainees housed there, monitor housing conditions, review detainees' classification and basis for placement in the SMU, and review all records in this regard. Written schedules shall be developed and posted in the detainee living areas and other areas with detainee access. The ICE Field Office Director shall have specific procedures for documenting the visit. IGSAs with larger populations should be visited more often if necessary.

DEFICIENCY SDC-4

In accordance with the ICE NDS, Staff-Detainee Communication, section (III)(B)(1)(b), the FOD must ensure, in IGSAs without ICE presence on-site, the detainee requests shall be forwarded to the ICE office of jurisdiction within 72 hours and answered as soon as possible and practicable, but not later than within 72 hours from receiving the request. If it is apparent that the request is serious in nature, procedures shall be in place for an expedited review and response to the request.

DEFICIENCY SDC-5

In accordance with the ICE NDS, Staff-Detainee Communication, section (III)(B)(2), the FOD must ensure all requests are recorded in a logbook specifically designed for that purpose. In IGSAs, the date the request was forwarded to ICE, and the date it was returned shall also be recorded.

USE OF FORCE (UOF)

ODO reviewed the Use of Force NDS at CCCF to determine if necessary use of force is utilized only after all reasonable efforts have been exhausted to gain control of a subject, while protecting and ensuring the safety of detainees, staff and others, preventing serious property damage, and ensuring the security and orderly operation of the facility, in accordance with the ICE NDS. ODO interviewed staff and reviewed local policies, training records, use of force documentation, and surveillance video recordings of two use of force incidents. ODO toured the facility, inspected security equipment, and reviewed local policies, use of force documentation, and training records.

ODO was informed there have been five incidents involving use of force and application of restraints on detainees in the past year. The facility's stock of non-lethal weapons consist of batons, OC Spray, and tasers. Use of tasers on detainees is expressly prohibited by facility policy.

CCCF policy states that the use and level of physical force is dependent upon the officer's perception of resistance and danger posed by that resistance. It divides force in terms of that which is necessary to gain control of detainee's resistance into five categories: Officer Presence/Verbal Direction, Compliance Controls, Physical Controls, Intermediate Controls, and Deadly Force Response. The policy does not distinguish between situations necessitating immediate use of force from those in which there is no immediate threat to the detainee or others, allowing assessment and possible resolution without resorting to force. In addition, the policy does not require documentation by way of videotape. Although fixed, digital security cameras are located throughout the facility, they have limited range and do not have audio capability. ODO's review of two video recordings of force incidents confirmed there were blind areas that the cameras are incapable of capturing. Though a handheld video camera is maintained in the supervisor's office, it is not used to record use of force incidents, as required by the NDS (**Deficiency UOF-1**).

CCCF does not have a designated use of force team. When an incident occurs, a request for assistance is transmitted by radio, and any available personnel are expected to respond. Responding staff are not trained in, and do not follow, the use of force team techniques, including: team composition, supervisory roles and the video recording of incidents (**Deficiency UOF-2**). Recording calculated use of force incidents is required per the NDS. Specifically, the NDS requires information, such as, but not limited to, the introduction and preamble by the use of force team leader noting the facility name, location, date, and time, and the faces of all participating team members, must be audio and visually recorded. Use of a portable camera will enable CCCF staff to record, for example, close-up footage of the detainee's body during medical examination in order to document the presence or absence of injuries.

Additionally, team safeguards are not in place to prevent injury and exposure to communicable disease (**Deficiency UOF-3**). Training and the use of protective gear is critically important to ensure the welfare of staff and the detainee population.

STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS

DEFICIENCY UOF-1

In accordance with the ICE NDS, Use of Force, section (III)(A)(2)(a)(b), the FOD must ensure, if a detainee is in an isolated location (e.g., a locked cell, a range) where there is no immediate threat to the detainee or others, the officer(s) takes the time to assess the possibility of resolving the situation without resorting to force. The calculated use of force is feasible in most cases. Calculated use of force is appropriate when the detainee is in a cell or other area with a securable door or grill, even if the detainee is verbalizing threats or brandishing a weapon, provided staff sees no immediate danger of the detainee causing harm. The calculated use of force affords staff time to strategize, resolving situations in the least confrontational manner. Incidents of use of force shall be documented and forwarded to ICE for review. The videotaping of all calculated uses of force is required.

DEFICIENCY UOF-2

In accordance with the ICE NDS, Use of Force, section (III)(A)(4)(a-1), the FOD must ensure, when a detainee must be forcibly moved and/or restrained during a calculated use of force, the use-of-force team technique applies.

DEFICIENCY UOF-3

In accordance with the ICE NDS, Use of Force, section (III)(D), the FOD must ensure use-of-force team safeguards are in place to prevent injury and exposure to communicable disease. Use-of-Force team members and others participating in calculated uses of force shall wear protective gear. If the circumstances of an immediate use-of-force incident permit, staff will obtain and use appropriate protective equipment (helmets with face shields, gloves, pads, etc.) before intervening.