

# Office of Detention Oversight Follow-Up Compliance Inspection

# Enforcement and Removal Operations ERO Chicago Field Office

Christian County Jail Ozark, Missouri

August 16-19, 2021

# FOLLOW-UP COMPLIANCE INSPECTION of the CHRISTIAN COUNTY JAIL

Ozark, Missouri

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# FOLLOW-UP COMPLIANCE INSPECTION TEAM MEMBERS



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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 Christian County Jail (CCJ) in Ozark, Missouri, from August 16 to 19, 2021. This inspection focused on the standards found deficient during ODO's last inspection of CCJ from April 5 to 9, 2021. The facility opened in May 1997 and is owned and operated by Christian County. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at CCJ in August 1998 under the oversight of ERO's Field Office Director (FOD) in Chicago (ERO Chicago). The facility operates under the National Detention Standards (NDS) 2019.

ERO has assigned deportation officers to the facility. A CCJ warden handles daily facility operations and manages support personnel. Trinity Service Group provides food services, PrimeCare Medical provides medical services, and Keefe Commissary Network provides commissary services at the facility. The facility was accredited by the National Commission on Correctional Health Care in July 2017.

| Capacity and Population Statistics                 | Quantity |  |
|--|----------|--|
| ICE Detainee Bed Capacity <sup>2</sup>             |          |  |
| Average ICE Detainee Population <sup>3</sup>       | _        |  |
| Male Detainee Population (as of August 16, 2021)   |          |  |
| Female Detainee Population (as of August 16, 2021) |          |  |

During its last inspection, in April 2021, ODO found 13 deficiencies in the following areas: Admission and Release (1); Custody Classification System (1); Funds and Personal Property (1); Food Service (2); Sexual Abuse and Assault Prevention and Intervention (3); Staff-Detainee Communication (3); and Medical Care (2).

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

<sup>&</sup>lt;sup>2</sup> Data Source: ERO Facility List Report as of August 16, 2021.

<sup>&</sup>lt;sup>3</sup> Ibid.

<sup>&</sup>lt;sup>4</sup> Per the ERO Facility List Report as of August 16, 2021, CCJ has a FY 2020 average daily population of 12 detainees, which is why ODO scheduled CCJ for an inspection in FY2021. Although the facility's population count during the inspection was zero, the facility has a current contract to house ICE detainees, which is why ODO continued with the inspection.

### 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 <sup>5&amp;6</sup>               | Deficiencies |
|---|--------------|
| Part 1 – Safety   |              |
| Environmental Health and Safety                               | 0            |
| Sub-Total   | 0            |
| Part 2 – Security   |              |
| Admission and Release   | 0            |
| Custody Classification System                                 | 1            |
| Funds and Personal Property                                   | 0            |
| Use of Force and Restraints                                   | 0            |
| Special Management Units                                      | 0            |
| Staff-Detainee Communication                                  | 0            |
| Sexual Abuse and Assault Prevention and Intervention          | 0            |
| Sub-Total   | 1            |
| Part 4 – Care   |              |
| Food Service  | 0            |
| Hunger Strikes  | 0            |
| Medical Care  | 0            |
| Significant Self-Harm and Suicide Prevention and Intervention | 0            |
| Sub-Total   | 0            |
| Total Deficiencies  | 1            |

## **DETAINEE RELATIONS**

The facility's detainee population count was zero during the ODO follow-up inspection, and therefore, ODO conducted no detainee interviews. Although the facility's detainee population count was 0, the facility still has an active contract to house detainees and its FY 2020 ADP was 12, which met the qualifying criteria of an ADP of 10 or more for an ODO inspection.

<sup>&</sup>lt;sup>5</sup> For greater detail on ODO's findings, see the Follow-Up Compliance Inspection Findings section of this report.

<sup>&</sup>lt;sup>6</sup> 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.

### FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

# **SECURITY**

#### CUSTODY CLASSIFICATION SYSTEM (CCS)

ODO reviewed the facility's detainee handbook and found it did not contain an explanation of the facility's classification levels, with the conditions and restrictions applicable to each classification level (**Deficiency CCS-30**<sup>7</sup>).

## CONCLUSION

During this inspection, ODO assessed the facility's compliance with 12 standards under NDS 2019 and found the facility in compliance with 11 of those standards. ODO found one deficiency in the one remaining standard. ODO commends facility staff for their responsiveness during this inspection. ODO recommends ERO 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 CCJ in April 2021.

| Compliance Inspection Results Compared | First FY 2021<br>(NDS 2019) | Second FY 2021<br>(NDS 2019) |
|--|-----------------------------|------------------------------|
| Standards Reviewed                     | 19                          | 12                           |
| Deficient Standards                    | 7                           | 1                            |
| Overall Number of Deficiencies         | 13                          | 1                            |
| Repeat Deficiencies                    | 0                           | 0                            |
| Areas of Concern                       | 0                           | 0                            |
| Corrective Actions                     | 0                           | 0                            |

<sup>&</sup>lt;sup>7</sup> "The facility shall include a classification section in its detainee handbook which will include the following:

<sup>1.</sup> An explanation of the classification levels, with the conditions and restrictions applicable to each.' See ICE NDS 2019, Standard, Custody Classification System, Section (II)(H)(1).