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Office of Detention Oversight Compliance Inspection

Enforcement and Removal Operations
ERO New Orleans Office
Etowah County Jail
Gadsden, AL

December 13-15, 2016

**COMPLIANCE INSPECTION
for the
ETOWAH COUNTY JAIL
GADSDEN, ALABAMA**

TABLE OF CONTENTS

OVERVIEW

Facility Overview.....1
Findings by National Detention Standard (NDS) 2000 Major Categories2

COMPLIANCE INSPECTION PROCESS3

DETAINEE RELATIONS4

COMPLIANCE INSPECTION FINDINGS

DETAINEE SERVICES

Access to Legal Material7
Admission and Release7
Food Service8
Staff-Detainee Communication9
Telephone Access9

SECURITY AND CONTROL

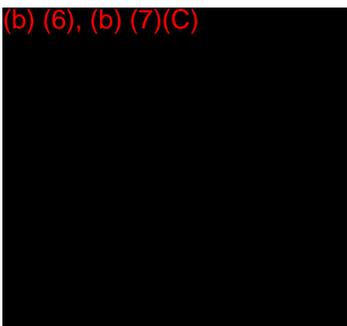
Environmental Health and Safety10
Special Management Unit (Administrative Segregation)10
Special Management Unit (Disciplinary Segregation)11

HEALTH SERVICES

Medical Care11

CONCLUSION12

COMPLIANCE INSPECTION TEAM MEMBERS



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FACILITY OVERVIEW

The Office of Detention Oversight (ODO) conducted a compliance inspection of the Etowah County Detention Center (ECDC) in Gadsden, Alabama, from December 13 to 15, 2016.¹ ECDC opened in March 1994 and is owned and operated by the Etowah County Sheriff's Office. The Office of Enforcement and Removal Operations (ERO) began housing detainees at ECDC in October 1998 pursuant to a United States Marshals Service (USMS) Intergovernmental Agreement (IGA), under the oversight of ERO's Field Office Director (FOD) in New Orleans.

ERO has assigned both Deportation Officers (DO) and a Detention Services Manager (DSM) to the facility. An ECDC Chief is responsible for oversight of daily facility operations and is supported by (b) (7) personnel. Food services are provided by Alabama Institutional Services. Medical services are provided by Doctors' Care Physicians of Gadsden, AL. The facility holds both American Correctional Association (ACA) and National Commission on Correctional Health Care (NCCHC) accreditations. ECDC operates under the ICE National Detention Standards (NDS) 2000. The ECDC is not contractually obligated to comply with the ICE Performance-Based National Detention Standards (PBNDS) 2011, Sexual Abuse and Assault Prevention and Intervention (SAAPI) standard; however, it has made efforts to comply.²

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity ³	350
Average ICE Detainee Population ⁴	291
Male Detainee Population (as of 12/13/2016)	307
Female Detainee Population (as of 12/13/2016)	N/A

In April 2013, ODO conducted a compliance inspection of ECDC under the National Detention Standards (NDS) 2000, reviewing the facility's compliance with 23 standards and found the facility compliant with 20 standards. There were a total of seven deficiencies in the remaining three standards.

¹ Male detainees with low, medium low, medium high, and high security classification levels are detained at the facility for longer than 72 hours.

² ECDC has a designated Prison Rape Elimination Act (PREA) coordinator and has a "zero tolerance" policy stated in, ECDC Policy and Procedure, *Sexual Abuse and Assault Prevention and Intervention*, dated December 2, 2008 and reviewed, June 2016.

³ Data Source: ERO Facility List Report as of December 12, 2016.

⁴ *Ibid.*

FY 2017 FINDINGS BY NDS 2000 MAJOR CATEGORIES

During this inspection, ODO identified deficiencies in the following areas:

NDS 2000 STANDARDS INSPECTED ⁵	DEFICIENCIES
Part 1 – Detainee Services	
Access to Legal Material	2
Admission and Release	3
Detainee Classification System	0
Detainee Grievance Procedures	0
Detainee Handbook	0
Food Service	5
Funds and Personal Property	0
Staff-Detainee Communication	1
Telephone Access	2
Sub-Total	13
Part 2 – Security and Control	
Environmental Health and Safety	1
Special Management Unit (Administrative Segregation)	2
Special Management Unit (Disciplinary Segregation)	1
Use of Force	0
Sub-Total	4
Part 3 – Health Services	
Medical Care	1
Suicide Prevention and Intervention	0
Sub-Total	1
Total Deficiencies	18

⁵ For greater detail on ODO's findings, see the *Compliance Inspection Findings* section of this report.

COMPLIANCE INSPECTION PROCESS

Every fiscal year, ODO, a unit within U.S. Immigration and Customs Enforcement's (ICE) Office of Professional Responsibility (OPR), conducts compliance inspections at detention facilities in which detainees are accommodated for periods in excess of 72 hours and with an average daily population greater than ten to determine compliance with the ICE National Detention Standards (NDS) 2000, or the Performance-Based National Detention Standards (PBNDS) 2008 or 2011, as applicable.

During the compliance inspection, ODO reviews each facility's compliance with those detention standards that directly affect detainee health, safety, and/or well-being.⁶ Any violations of written policy specifically linked to ICE detention standards, ICE policies, or operational procedures that ODO identifies are noted as a deficiency. Corrective actions, immediately implemented by the facility during an inspection, are noted under Compliance Inspection Findings and annotated with a "C."

Immediately following an inspection, ODO hosts a closeout briefing in person with both facility and ERO field office management to discuss ODO's preliminary findings, which are summarized and provided to ERO in a preliminary findings report. Thereafter, ODO provides ERO with a final compliance inspection report to: (i) assist ERO in working with the facility to develop a corrective action plan to resolve identified deficiencies; and (ii) provide senior ICE and ERO leadership with an independent assessment of the overall state of ICE detention facilities. The reports enable senior agency leadership to make decisions on the most appropriate actions for individual detention facilities nationwide.

⁶ ODO reviews the facility's compliance with selected standards in their entirety.

DETAINEE RELATIONS

ODO interviewed 28 detainees, each of whom volunteered to participate. None of the detainees made allegations of mistreatment, abuse, or discrimination. The majority of the detainees reported being satisfied with facility services, with the exception of the concerns noted below:

Admission and Release: Two detainees stated their clothing was not appropriate for the weather conditions.

- **Action Taken:** ODO reviewed ECDC policy, *Personal Hygiene*, revised June 15, 2016, and interviewed senior facility staff. ODO also reviewed U.S. Climate Data for Gadsden, AL.⁷ Based on the weather conditions present during ODO's inspection and a review of the climate data, ODO determined that the clothing provided by ECDC is not always appropriate for the winter months. Specifically, the facility does not issue detainees cold weather jackets. This issue was discussed with ERO staff and the facility compliance manager.

Detainee Handbook: Twenty-two (22) detainees claimed they were not provided the ICE National Detainee Handbook and/or the facility handbook.

- **Action Taken:** ODO reviewed the detainees' detention files and could not determine from the files if they had received the ICE National Detainee Handbook. ODO brought the issue to the attention of the ERO Supervisory Detention and Deportation Officer (SDDO). Prior to completion of the inspection the SDDO and the facility compliance manager provided all 22 detainees with an ICE National Detainee Handbook. Additionally, several boxes of the handbooks were provided to the facility for distribution during the admissions process. Detainees that needed a copy of the facility handbook were also provided a copy of the facility handbook.

Food Service: Seventeen (17) detainees stated the food was bland and the portion sizes are too small. Some also stated they are frequently served the same food.

- **Action Taken:** ODO reviewed the facility's 35-day cyclical menu with the Food Service Administrator (FSA) and determined that some foods are served more frequently than others and often prepared the same way (i.e. boiling). ODO also reviewed facility recipes and noted they did not include seasoning recommendations during food preparation. ODO also determined that daily caloric totals for meals vary and do not always meet those required under the dietician-approved master menu. ODO brought these concerns to the attention of ERO and the FSA. Prior to completion of the inspection, the FSA obtained a copy of one of the U.S. Armed Forces recipe guides and indicated plans to incorporate seasonings into food preparation and to standardize food items/servings.

Medical Care: Five detainees expressed concerns related to medical needs. The first detainee stated he submitted a medical request for glasses but had not received a response.

⁷ See <http://www.usclimatedata.com/climate/gadsden/alabama/united-states/usal0222>.

- Action Taken: ODO reviewed his medical record with facility medical staff and determined the detainee submitted a sick call request on July 11, 2016, requesting reading glasses. Medical records indicate on July 14, 2016, the detainee was seen by medical services and provided a pair of reading glasses. The detainee has not submitted any additional sick call requests regarding glasses. ODO informed medical staff of the detainee's claim.

The second detainee stated he submitted a sick call request on December 9, 2016 and has not been seen by medical staff.

- Action Taken: ODO reviewed the detainee's medical record with the facility medical staff and found the detainee submitted a sick call request on December 9, 2016 to address pain in his left wrist and back. His medical request was triaged on December 10, 2016, and he was seen by medical staff on December 12, 2016. The detainee was prescribed appropriate medication, the initial dosage for which was administered the same day during pill line. However, because he did not attend the morning pill line, he did not receive his second dosage on December 13th. Following ODO's inquiry, medical staff met with the detainee to discuss the need to take his medication as prescribed.

The third detainee claimed he had to wait months to receive medications for his medical conditions.

- Action Taken: ODO reviewed the detainee's medical record with facility medical staff. ODO determined the detainee received a comprehensive health assessment within 24 hours of his arrival at the facility. As a result of the comprehensive health assessment, the detainee was immediately enrolled in the ECDC chronic care clinic, where he was prescribed and received his medications within a day of his arrival at the facility.

The fourth detainee stated he had a medical condition and was never seen by medical staff.

- Action Taken: ODO reviewed the detainee's medical record with facility medical staff. In September 2016, following a sick call request, the detainee was evaluated by the nurse practitioner, facility physician, and an off-site medical provider. The detainee was subsequently diagnosed with a medical condition. ODO confirmed medical staff initiated a treatment regimen which was still in place at the time of the inspection.

The fifth detainee stated he was not able to eat solid food, as he experienced pain when swallowing.

- Action Taken: ODO reviewed the detainee's medical record with the facility medical staff. ODO determined the detainee submitted a sick call request on December 3, 2016, stating he was having difficulty swallowing. He was seen at sick call on December 5, 2016, and prescribed a liquid diet supplement (Ensure) and referred to the facility's mid-level provider. On December 7, 2016, the facility's physician's assistant (PA) examined the detainee. The PA referred the detainee to an off-site provider for a follow-up examination and prescribed a liquid diet for one week. The results of the follow-up examination were pending at the time of the inspection.

Sexual Assault Awareness and Prevention Intervention: Seven detainees claimed when officers of the opposite sex enter the housing units they do not announce their presence.

- Action Taken: ODO toured the housing units and interviewed facility staff members regarding announcements of the presence of the opposite sex when they enter detainee housing units. During the facility tour and throughout the inspection ODO observed that when staff members of the opposite gender entered the housing units they did not consistently announce themselves. This issue was addressed with the SDDO.

Telephone Access: Four detainees claimed interstate telephone calls were very expensive.

- Action Taken: ODO reviewed the ECDC telephone rates with the facility's chief compliance officer (COC). ODO determined the detainee phone rate for an interstate call at ECDC exceeded the rate established by the Federal Communications Commission (FCC). The COC informed ODO that ECDC has entered into a contract with a new telephone service provider. The detainee call rates will be reduced to the FCC cap limits effective January 12, 2017, when the new contract is implemented. *See* the Compliance Inspection Findings: Telephone Access section of this report for more information.

COMPLIANCE INSPECTION FINDINGS

DETAINEE SERVICES

ACCESS TO LEGAL MATERIAL (ALM)

ODO reviewed ECDC policy, *Access to Legal Material*, dated, June 14, 2016. ODO identified that each housing unit has a law library with four computers and one printer. The LexisNexis program was updated on December 12, 2016. However, ECDC did not have a list of available materials posted in each housing unit's law library (**Deficiency ALM-1**⁸).

Corrective action: Prior to the completion of the inspection, the facility initiated corrective action by posting the library material in each housing unit's law library (**C-1**).

ODO reviewed the ECDC detainee handbook and determined the handbook provides the detainees the law library scheduled hours of access and the procedure for requesting access/additional access to the law library. However, the facility handbook did not provide the procedures for requesting legal materials not maintained in the law library (**Deficiency ALM-2**⁹).

Corrective action: Prior to the completion of the inspection, the facility initiated corrective action by posting the procedures to request materials not in the law library, in each housing unit's law library (**C-2**).

ADMISSION AND RELEASE (AR)

ODO reviewed the ECDC admissions process. ODO also observed that an orientation video in English and Spanish is shown on a continuous loop in the intake holding cells. However, the facility and the field office were unable to provide any documentation that the field office had approved ECDC's orientation video or procedures (**Deficiency AR-1**¹⁰).

Corrective Action: Prior to the completion of the inspection, the facility initiated corrective action by submitting the orientation video and procedures to ERO for approval. ERO reviewed the orientation procedures and issued a memorandum approving the video and orientation procedures (**C-3**).

⁸ "The law library shall contain the materials listed in Attachment A. INS shall provide an initial set of these materials. The facility shall post a list of its holdings in the law library. These policies and procedures shall also be posted in the law library along with a list of the law library's holdings." See ICE NDS 2000, Standard, Access to Legal Material, Section (III)(C).

⁹ "The procedure for requesting legal materials not maintained in the law library. These policies and procedures shall also be posted in the law library along with a list of the law library's holdings." See ICE NDS 2000, Standard, Access to Legal Material, Section (III)(Q).

¹⁰ "All facilities shall have a medium to provide INS detainees an orientation to the facility. In IGSA's the INS office of jurisdiction shall approve all orientation procedures." See ICE NDS 2000, Standard, Admission and Release, Section (III)(J).

ODO reviewed ECDC policy, *Admission and Release*, dated, June 2, 2016, regarding requirements for the release of detainees. The facility and the field office were unable to provide documentation that the facility release procedures had been approved by the field office (**Deficiency AR-2¹¹**).

Corrective Action: Prior to the completion of the inspection, the facility initiated corrective action by obtaining a memorandum formally approving their detainee release procedures from the field office (**C-4**).

ODO reviewed the facility's admission and release policy, interviewed detainees and facility staff and determined not all clothing issued to the detainees is appropriate for local weather conditions. Specifically, ODO noted cold weather jackets are not issued to detainees. ODO determined, through both staff and detainee interviews, that detainees are generally declining their privilege to engage in outdoor recreation in colder weather, due to a lack of appropriate cold weather clothing (**Deficiency AR-3¹²**).

FOOD SERVICE (FS)

ODO reviewed the facility recipe cards and the 35-day cycle menu provided by the food service administrator (FSA). ODO determined that approved recipe cards were not available for many menu items on the 35-day cycle menu (**Deficiency FS-1¹³**). A review of available recipes found they do not include seasonings during food preparation. Additionally, at the request of the facility's medical staff salt/pepper are not provided on food trays.

Corrective Action: Prior to the completion of the inspection, the facility initiated corrective action with the FSA obtaining copies of U.S. Armed Forces recipe cards, which include seasoning and standardized ingredients to provide more flavorful meals. The FSA indicated plans to implement the use of spices and standardized ingredients (**C-5**).

At the time of the ODO inspection, there were 37 detainees receiving a religious diet, including 25 detainees receiving kosher meals. ODO review of kosher meal preparation and service found a certified, pre-packaged, sealed, and fully prepared meal was heated and served three times per week. However, the remaining meals in the kosher meal cycle were prepared using recipes and were not consistent with the definition of a kosher meal or the requirements of the standard (**Deficiency FS-2¹⁴**).

¹¹ "Staff must complete certain procedures before any detainee's release, removal, or transfer from the facility. Necessary steps include completing and processing forms, closing files, fingerprinting; returning personal property; and reclaiming facility-issued clothing, bedding, etc. INS will approve the IGSA release procedures." See ICE NDS 2000, Standard, Admission and Release, Section (III)(L).

¹² "Among other things, staff issue detainees clothing and bedding in quantities and weights appropriate for the facility environment and local weather conditions." See ICE NDS 2000, Standard, Admission and Release, Section (III)(F).

¹³ "The CS or equivalent is responsible for ensuring that all items on the master-cycle menu are prepared and presented according to approved recipes." See ICE NDS 2000, Standard, Food Service, Section (III)(D)(1).

¹⁴ "Hot entrees shall be offered three times a week and shall be purchased precooked, heated in their sealed containers, and served hot. With the exception of fresh fruits and vegetables, the facility's kosher-food purchases shall be fully prepared, ready-to-use, and bearing the symbol of a recognized kosher-certification agency." See ICE NDS 2000, Standard, Food Service, Section (III)(E)(4 & 5).

The common-fare program is intended to accommodate detainees whose religious dietary needs cannot be met utilizing the main food line. The common-fare menu is based on a 14-day cycle, with special menus for the ten Federal holidays. ODO reviewed the 14-day common-fare menu with the facility's FSA and determined the menu was certified by a registered dietician; however, an estimated quarterly cost for the common-fare meals was not available for review (**Deficiency FS-3¹⁵**).

ODO's review of documentation provided by the FSA, confirmed sanitation inspections are conducted as required. Local health department inspections and reports for pest control treatments were readily available and current. Staff and inmate worker restrooms were clean and stocked with hand soap and paper towels; however, there were no signs reminding workers to wash their hands prior to returning to work (**Deficiency FS-4¹⁶**).

Corrective Action: Prior to the completion of the inspection, the facility initiated corrective action by posting hand washing reminder signs in all kitchen restrooms (**C-6**).

ODO conducted a walk-through inspection of the facility dry food storage area. Storage areas were neat, organized, and items were all dated to ensure stock rotation. ODO observed that some food items were stored against the walls in the dry storage room (**Deficiency FS-5¹⁷**).

Corrective Action: Prior to the completion of the inspection, the facility initiated corrective action by moving shelving two inches from the wall (**C-7**).

STAFF-DETAINEE COMMUNICATIONS

ODO reviewed the detainee requests logbook and determined it documents the detainee's name, the date the detainee request was received, the detainee's A-number, the name of the officer responding to the request, the date that the request is returned to the detainee, and the detainee's nationality. However, the logbook does not document the name of the officer logging the request (**Deficiency SDC-1¹⁸**).

TELEPHONE ACCESS

ODO reviewed the facility handbook and conducted tours of the detainee housing units. ODO identified that notices were not consistently posted near all detainee telephones, identifying the procedure for obtaining an unmonitored phone call (**Deficiency TA-1¹⁹**).

¹⁵ "The FSA shall estimate quarterly costs for the common-fare program, including this figure in the quarterly budget. The FSA shall maintain a record of the actual costs of both edible and non-edible items." See ICE NDS 2000, Standard, Food Service, Section (III)(E)(12).

¹⁶ "Staff and detainees shall not resume work after visiting the toilet facility without first washing their hands with soap or detergent. The FSA shall post signs to this affect." See ICE NDS 2000, Standard, Food Service, Section (III)(H)(2)(a).

¹⁷ "Store food items at least two inches from the walls and at least six inches above the floor." See ICE NDS 2000, Standard, Food Service, Section (III)(J)(3)(e). **This is a repeat deficiency.**

¹⁸ "All requests shall be recorded in a logbook specifically designed for that purpose. The log, at a minimum, shall contain: Officer logging the request." See ICE NDS 2000, Standard, Staff-Detainee Communication, Section (III)(B)(2)(e).

¹⁹ "The facility shall have a written policy on the monitoring of detainee telephone calls. If telephone calls are monitored, the facility shall notify detainees in the detainee handbook or equivalent provided upon admission. It

Corrective Action: Prior to the completion of the inspection, the facility initiated corrective action by posting the procedure for obtaining an unmonitored phone call **(C-8)**.

ODO reviewed ECDCs telephone contract with Telmate© LLC, the current telephone service provider. The detainee telephone rate for an interstate call at the time of the inspection was \$0.28 cents per minute. The federal rate cap established by the Federal Communications Commission (FCC) is \$0.25 cents per minute **(Deficiency TA-2²⁰)**.

Corrective Action: Effective January 12, 2017, ECDC has contracted with NCIC Inmate Phone Services to provide detainee phone services. Under the new telephone contract all ECDC calling rates will be reduced to at or below the FCC established rate cap **(C-9)**.

SECURITY AND CONTROL

ENVIRONMENTAL HEALTH AND SAFETY (EH&S)

ODO reviewed ECDC's Fire Prevention and Evacuation Plan and other documentation provided by the facility. ODO determined that fire drills are completed monthly and the results are recorded. However, fire drill documentation did not consistently contain the drawing and testing of emergency keys **(Deficiency EH&S-1²¹)**.

Corrective Action: Prior to the completion of the inspection, the facility initiated corrective action by modifying the current fire drill form to include a section to document the drawing and testing of emergency keys **(C-10)**.

SPECIAL MANAGEMENT UNIT-ADMINISTRATIVE SEGREGATION (SMU-AS)

ODO reviewed documentation provided by ECDC and the ECDC policy, *Special Management Units*, dated, June 16, 2016. ODO determined that eleven detainees were placed in administrative segregation in the 12 months preceding the ODO inspection. During the week of the inspection, two detainees were in administrative segregation, both for protective custody. The ECDC policy addresses issuance of an administrative segregation order; however, ODO found that one of the detainees in administrative segregation did not receive a copy of his segregation order **(Deficiency SMU AS-1²²)**.

shall also place a notice at each monitored telephone stating: that detainee calls are subject to monitoring; and the procedure for obtaining an unmonitored call to a court, a legal representative, or for the purposes of obtaining legal representation." See ICE NDS 2000, Standard, Telephone Access, Section (III)(K).

²⁰ "Since Feb. 11, 2014, FCC rate caps for interstate calls are: \$0.25 per minute for collect calls and \$0.21 per minute for debit or pre-paid calls. Charges on inmate calls that exceed these interim rate caps are in violation of federal rules." See Change Notice: FCC Telephone Rate Cap-October 22, 2015.

²¹ "Emergency-key drills will be included in each fire drill, and timed. Emergency keys will be drawn and used by the appropriate staff to unlock one set of emergency exit doors not in daily use. NFPA recommends a limit of four and one-half minutes for drawing keys and unlocking emergency doors." See ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(4)(c).

²² "A written order shall be completed and approved by a supervisory officer before a detainee is placed in administrative segregation, except when exigent circumstances make this impracticable. In such cases, an order shall be prepared as soon as possible. A copy of the order shall be given to the detainee within 24 hours, unless delivery would jeopardize the safety, security, or orderly operation of the facility." See ICE NDS 2000, Standard, Special Management Unit (Administrative Segregation), Section (III)(B).

Corrective Action: Prior to the completion of the inspection, the facility initiated corrective action by providing the detainee a copy of his segregation order (C-11).

ODO reviewed ECDC's policy, *Special Management Units*, dated June 16, 2016. ODO confirmed that a status review is conducted on each detainee within 72 hours of placement and a committee consisting of the captain, disciplinary hearing officer, compliance officer, and the SDDO review the status of detainees in segregation on a weekly basis. However, the 72 hour reviews do not include a written record of the decision and justification for administrative segregation. Weekly reviews also do not include an interview with the detainee or issuance of a copy of the decision regarding continuation or removal from segregation (**Deficiency SMU AS-2²³**).

SPECIAL MANAGEMENT UNIT - DISCIPLINARY SEGREGATION (SMU-DS)

During the week of the ODO inspection, there was one detainee in disciplinary segregation. ODO reviewed his disciplinary packet and confirmed he received his disciplinary order as well as the facility disciplinary hearing findings within 24 hours. ECDC has a segregation review committee that meets weekly. The committee consists of the captain, disciplinary hearing officer, compliance officer, and the SDDO. ODO found the committee's review does not include an interview with the detainee and a copy of the committee's decision is not provided to the detainee (**Deficiency SMU DS-1²⁴**).

HEALTH SERVICES

MEDICAL CARE

Registered Nurses (RNs) conduct detainee health appraisals and physical examinations. Training in performing physical examinations was documented in the RNs' training files. ODO reviewed a representative sample of detainee medical records and confirmed completion of all health appraisals within 14 days of the detainee's arrival at ECDC. Additionally, each health appraisal was reviewed by the facility physician. The medical records also documented completion of

²³ "All facilities shall implement written procedures for the regular review of all administrative detention cases, consistent with the procedures specified below. A supervisory officer shall conduct a review within 72 hours of the detainee's placement in administrative segregation to determine whether segregation is still warranted. The review shall include an interview with the detainee. A written record shall be made of the decision and the justification. A supervisory officer shall conduct the same type of review after the detainee has spent seven days in administrative segregation, and every week thereafter for the first month and at least every 30 days thereafter. The review shall include an interview with the detainee. A written record shall be made of the decision and the justification. A copy of the decision and justification for each review shall be given to the detainee, unless, in exceptional circumstances, this provision would jeopardize security." See ICE NDS 2000, Standard, Special Management Unit (Administrative Segregation), Section (III)(C).

²⁴ "All facilities shall implement written procedures for the regular review of all disciplinary segregation cases, consistent with the procedures specified below. The weekly reviews will include an interview with the detainee. Provided institutional security is not compromised, the detainee shall receive at each formal review, a written copy of the reviewing officer's decision and the basis for this finding." See ICE NDS 2000, Standard, Special Management Unit (Disciplinary Segregation), Section (III)(C)(6).

dental screening within 14 days of arrival; however, in all but one case, the dental screenings were conducted by an RN (**Deficiency MC-1²⁵**).

CONCLUSION

The ODO FY 2016 inspection under NDS 2000 found the facility compliant with six of the fifteen standards reviewed. Although ODO identified 13 instances where the facility initiated corrective action during the course of the inspection, ODO nevertheless found 18 deficiencies in the remaining nine standards. This is an increase of 11 deficiencies from those found during the ODO FY 2013 inspection. This increase may be attributable to changes within facility operations, changes in facility staffing, fluctuations in the detainee populations, and/or to changes in the ODO inspection methodology which now focus solely on standards and associated practices that may directly impact detainee life, health, or safety.

Inspection Results Compared	FY 2013 (NDS)	FY 2016 (NDS)
Standards Reviewed	23	15
Deficient Standards	3	9
Total Number of Deficiencies	7	18
Number of Repeat Deficiencies		1
Corrective Action(s) Initiated	0	11

²⁵ “An initial dental screening exam should be performed within 14 days of the detainee’s arrival. If no on-site dentist is available, the initial dental screening may be performed by a physician, physician’s assistant or nurse practitioner.” See ICE NDS 2000, Standard, Medical Care, Section (III)(E).