

U.S. Department of Homeland Security

Immigration and Customs Enforcement Office of Professional Responsibility Inspections and Detention Oversight Division Washington, DC 20536-5501

Office of Detention Oversight Follow-Up Compliance Inspection

Enforcement and Removal Operations ERO Detroit Field Office

Geauga County Jail Chardon, Ohio

August 2-6, 2021

FOLLOW-UP COMPLIANCE INSPECTION of the GEAUGA COUNTY JAIL

Chardon, Ohio

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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 inspection of the Geauga County Jail (GCJ) in Chardon, Ohio, from August 2 to 6, 2021. This inspection focused on the standards found deficient during ODO's last inspection of GCJ from March 15 to 19, 2021. The facility opened in 2005 and is owned and operated by the Geauga County Sheriff's Office. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at GCJ in 1996 under the oversight of ERO's Field Office Director in Detroit (ERO Detroit). The facility operates under the National Detention Standards (NDS) 2000.

ERO Detroit has assigned detention officers to the facility. A Geauga County Sheriff's Office lieutenant handles daily facility operations and manages support personnel. Geauga County provides food services, medical care, and commissary services at the facility. The facility does not hold any accreditations from outside entities.

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

During its last inspection, in Fiscal Year (FY) 2021, ODO conducted an inspection of GCJ and found six deficiencies in the following areas: Admission and Release (1); Detainee Classification System (2); Funds and Personal Property (1); Special Management Unit (Disciplinary Segregation) (1); and Telephone Access (1).

Office of Detention Oversight August 2021

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

² Data Source: ERO Facility List as of July 26, 2021.

³ Ibid.

FOLLOW-UP COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population of 10 or more detainees, and where detainees are housed for longer than 72 hours, to assess compliance with ICE National Detention Standards. These inspections focus solely on facility compliance with detention standards that directly affect detainee life, health, safety, and 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 (NDS) 2000 MAJOR CATEGORIES

NDS 2000 Standards Inspected ⁴	Deficiencies	
Part 1 - Detainee Services		
Admission and Release	0	
Detainee Classification System	10	
Food Service	0	
Funds and Personal Property	3	
Staff-Detainee Communication	1	
Telephone Access	0	
Sub-Total	14	
Part 2 - Security and Control		
Emergency Plans	0	
Environmental Health and Safety	0	
Special Management Unit (Administrative Segregation)	0	
Special Management Unit (Disciplinary Segregation)	0	
Use of Force	0	
Sub-Total	0	
Part 3 - Health Services		
Hunger Strikes	0	
Medical Care	0	
Suicide Prevention and Intervention	0	
Sub-Total	0	
Total Deficiencies	14	

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

DETAINEE RELATIONS

ODO interviewed 12 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. Most detainees reported satisfaction with facility services except for the concerns listed below. ODO attempted to conduct detainee interviews via video teleconference; however, ERO Detroit and the facility were not able to accommodate this request due to technology issues. As such, ODO conducted the detainee interviews via telephone.

Admission and Release: One detainee stated he received the ICE National Detainee Handbook and GCJ detainee handbook but could not understand them because they were in English, and he knows only Arabic.

• Action Taken: ODO interviewed ERO Detroit and the GCJ staff and found during the intake process the detainee received the ICE National Detainee Handbook and the GCJ detainee handbook. During the intake process, the detainee acknowledged signing for the receipt of both handbooks but the receipt does not indicate the language of the handbooks. On August 4, 2021, the detainee received an ICE National Detainee Handbook and a GCJ detainee handbook, both printed in Arabic.

Medical Care: One detainee stated he has not received a prescription for nasal spray that a medical doctor wrote after examining him for nasal congestion on approximately July 20, 2021.

• Action Taken: ODO interviewed the GCJ health service administrator (HSA), who reviewed the detainee's medical record. On July 20, 2021, the doctor prescribed Nasocort nasal spray. The ICE Health Service Corps (IHSC) denied the order for the medication since the IHSC formulary did not list it. On July 21, 2021, the facility staff advised the detainee of this change. On August 3, 2021, the detainee again advised the HSA of his nasal congestion and need for nasal spray during his daily medical check. The HSA spoke with the doctor and received new nasal spray orders. On August 4, 2021, the detainee received his nasal spray.

Medical Care: One detainee stated he had not been scheduled for a dental appointment after submitting a medical request.

• Action Taken: ODO interviewed the GCJ HSA, who reviewed the detainee's medical record. The medical staff placed the detainee on the dentist's appointment list after his physical exam on June 12, 2021. The medical staff informed ODO the dentist visits the facility roughly every six-to-eight weeks depending on the demand for dental care. Medical staff scheduled the detainee for a dental appointment for September 1-2, 2021, the dates of the dentist's next visit to GCJ. The detainee received twice-daily medical checks and exhibited no symptoms indicating a dental emergency.

Medical Care: One detainee stated he requested to see the dentist months ago for a broken tooth. He said the staff informed him that a dentist would examine him but received no scheduled appointment.

• Action Taken: ODO interviewed the GCJ HSA, who reviewed the detainee's medical record. A dentist examined the detainee on the following dates: January 31, 2021; March 3, 2021; and May 26, 2021. The detainee requested a specific acrylic partial denture that requires IHSC approval. On August 4, 2021, the medical staff updated the detainee on IHSC's pending approval for the dental procedure.

Medical Care: One detainee stated she is a cancer survivor and is awaiting a decision for any further treatment.

• Action Taken: ODO interviewed the GCJ HSA, who reviewed the detainee's medical record and found the detainee received cancer treatments at her previous facility. On June 16, 2021, the medical staff received and reviewed the negative results of the detainee's laboratory tests. Medical staff informed her of the results and informed her to submit a medical request if she had any other concerns.

Staff-Detainee Communication: One detainee stated he has received no response to a family-visit request, submitted to ERO Detroit on approximately July 19, 2021.

• Action Taken: ODO interviewed ERO Detroit staff and found the detainee did submit a request for a visit but staff was unsure of the exact date. ERO Detroit staff stated they answered the request verbally, but ODO was unable to verify when ERO Detroit responded to the request because staff did not log it in the request logbook. On August 2, 2021, ERO Detroit replied to the detainee in writing and informed him that GCJ is not currently conducting family visits due to the COVID-19 pandemic. ODO cited the lack of documentation in the request logbook as a deficiency in the *Staff-Detainee Communication* section of the report.

Telephone Access: One detainee stated his frustration with the excessive static interference on the telephone lines and the expense of telephone calls.

• Action Taken: ODO interviewed GCJ staff, who stated there were no reports made by detainees of static interference on the phone lines. On August 4, 2021, GCJ staff checked the housing unit phones and found them to be in proper working order. ODO also reviewed the phone rates at GCJ and found them within the required \$0.20 per minute.

FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

DETAINEE SERVICES

DETAINEE CLASSIFICATION SYSTEM (DCS)

ODO reviewed detainee detention files and found files did not contain documentation of the facility's initial classification upon arrival to GCJ before admittance into the

ODO interviewed the jail administrator, who stated the facility conducted the classification training verbally and there were no training files for classification (**Deficiency DCS-5**⁶). ODO reviewed detainee detention files containing initial detainee classification and reclassification forms and found a first-line supervisor did not approve the classification of out of the initial detainee classification forms nor for 12 out of 12 detainee reclassification forms (Deficiency DCS-10⁷). This is a repeat deficiency. ODO reviewed detainee detention files containing initial detainee classifications forms, interviewed GCJ intake/processing officers, and found in detainee classifications forms reviewed, the intake staff did not review a detainee's entire criminal history information provided by ERO Detroit to classify each new arrival to GCJ (Deficiency DCS-148). ODO reviewed detainee detention files containing initial detainee classification forms and found a supervisor did not review intake/processing officers' classification files for accuracy and completeness by a GCJ supervisor (Deficiency DCS-19⁹). ODO reviewed detainee detention files containing initial detainee classification forms, interviewed GCJ intake/processing officers, and found intake staff did not use the most reliable, objective information provided by ERO Detroit to classify each new arrival to GCJ. Specifically, staff did not review the detainees' entire criminal history and instead relied on detainees selfreporting (Deficiency DCS-22¹⁰). ODO reviewed detainee housing assignments, detainee detention files containing initial detainee classification and reclassification forms and found detainees were not housed according to their classification levels. Specifically, ODO found one low custody level detainee housed with high custody level detainees and three medium-low custody level detainees with histories of assaultive behavior housed in low custody level housing units (Deficiency DCS-25¹¹). ODO reviewed detainee detention files containing initial detainee classification forms, ⁵ "The classification system ensures:

general population (Deficiency DCS-3⁵).

^{1.} All detainees are classified upon arrival, before being admitted into the general population." *See* ICE NDS 2000, Standard, Detainee Classification System, Section (III)(A)(1).

⁶ "All officers assigned to classification duties shall be trained in the facility's classification process." *See* ICE NDS 2000, Standard, Detainee Classification System, Section (III)(A)(1).

⁷ "The classification system ensures: ...

^{3.} The first-line supervisor will review and approve each detainee's classification." See ICE NDS 2000, Standard, Detainee Classification System, Section (III)(A)(3).

⁸ "The officer assigned to intake/processing will review the detainee's A-file, work-folder and/or information provided by INS, to identify and classify each new arrival according to the Detention Classification System (DCS)." *See* ICE NDS 2000, Standard, Detainee Classification System, Section (III)(B).

⁹ "In all detention facilities, a supervisor will review the intake/processing officer's classification files for accuracy and completeness." *See* ICE NDS 2000, Standard, Detainee Classification System, Section (III)(C).

¹⁰ "Staff shall use the most reliable, objective information from the detainee's A-file or work- folder during the classification process." *See* ICE NDS 2000, Standard, Detainee Classification System, Section (III)(D).

¹¹ "All facilities shall ensure that detainees are housed according to their classification level." *See* ICE NDS 2000, Standard, Detainee Classification System, Section (III)(E).

interviewed GCJ intake/processing officers, and found intake staff did not classify new arrivals by their convictions when assessing the criminal record reports. Specifically, GCJ's classification forms did not allow for the consideration of a detainee's entire criminal history provided by ERO Detroit and also for the consideration of a detainee's self-reporting of his/her criminal history during the classification process (Deficiency DCS-29 12).

ODO reviewed detainee housing assignments and detainee detention files containing the initial detainee classification and found intake staff classified 1 detainee with aggravated felony convictions as low custody level (**Deficiency DCS-30** ¹³).

ODO reviewed detainee housing assignments, detainee detention files containing initial detainee classification, and reclassification forms and found, when necessary to house detainees of different classification levels together, GCJ did not house detainees according to their classification levels. Specifically, ODO found low custody level detainee housed with high custody level detainees and three medium-low custody level detainees with histories of assaultive behavior housed in low custody level housing units (Deficiency DCS-36¹⁴).

FUNDS AND PERSONAL PROPERTY (FPP)

ODO reviewed GCJ's Admissions/Intake policy, interviewed GCJ staff, and found GCJ did not have written procedures for the inventory and audit of detainee funds, valuables, and personal property (**Deficiency FPP-54** ¹⁵). This is a repeat deficiency.

ODO reviewed GCJ's Admission/Release and Inmate Release policies, interviewed the GCJ staff, and found GCJ did not have written policy and procedures for detainee property reported missing or damaged (**Deficiency FPP-70** ¹⁶).

ODO reviewed GCJ's Admission/Release and Inmate Release policies, interviewed GCJ staff, and found GCJ did not have written policy for the loss of, or damage to, properly receipted detainee property as required by the standard (**Deficiency FPP-80** ¹⁷).

c. May not include any detainee with an aggravated felony conviction." *See* ICE NDS 2000, Standard, Detainee Classification System, Section (III)(E)(1)(c).

¹² "New arrivals are generally classified by convictions when assessing the criminal record reports." *See* ICE NDS 2000, Standard, Detainee Classification System, Section (III)(E).

¹³ "1. Level 1 Classification

¹⁴ "When it becomes necessary to house detainees of different classification levels the following guidelines shall be followed:

^{1.} Level three detainees will not be housed with level one detainees.

^{3.} Under no circumstance will a level two detainee with a history of assaultive or combative behavior be placed in a level one housing unit." *See* ICE NDS 2000, Standard, Detainee Classification System, Section (III)(F)(1)(3)._

¹⁵ "Each facility shall have a written procedure for inventory and audit of detainee funds, valuables, and personal property." *See* ICE NDS 2000, Standard, Funds and Personal Property, Section (III)(F).

¹⁶ "Each facility shall have a written policy and procedures for detainee property reported missing or damaged." *See* ICE NDS 2000, Standard, Funds and Personal Property, Section (III)(H).

¹⁷ "All CDFs and IGSA facilities will have and follow a policy for loss of or damage to properly receipted detainee property, as follows:

^{1.} All procedures for investigating and reporting property loss or damage will be implemented as specified

STAFF-DETAINEE COMMUNICATION (SDC)

During an interview, a detainee informed ODO that he had not received a response from ICE regarding his request. ODO interviewed ERO Detroit staff, who stated staff verbally responded to the detainee; however, ODO could not verify if ERO Detroit responded to the request within hours because ERO Detroit did not record the request in a logbook (**Deficiency SDC-32** ¹⁸).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 14 standards under NDS 2000 and found the facility in compliance with 11 of those standards. ODO found 14 deficiencies in the remaining 3 standards. ODO commends GCJ staff for its responsiveness during this inspection. ODO recommends ERO Detroit work with GCJ to resolve any deficiencies that remain outstanding in accordance with contractual obligations. ERO provided ODO with the uniform corrective action plan for ODO's last inspection of GCJ on July 20, 2021.

Compliance Inspection Results Compared	FY 2021 (NDS 2000)/(NDS 2019)	FY 2021 (NDS 2000)
Standards Reviewed	18/3	14
Deficient Standards	5	3
Overall Number of Deficiencies	6	14
Repeat Deficiencies	3	2
Areas Of Concern	8	0
Corrective Actions	0	0

2. Supervisory staff will conduct the investigation;

in this standard;

^{3.} The senior facility contract officer will process all detainee claims for lost or damaged property promptly;

The official deciding the claim will be at least one level higher in the chain of command than the official investigating the claim;

^{5.} They will promptly reimburse detainees for all validated property losses caused by facility negligence;

^{6.} They will not arbitrarily impose a ceiling on the amount to be reimbursed for a validated claim; and

^{7.} The senior contract officer will immediately notify the designated INS officer of all claims and outcomes." See ICE NDS 2000, Standard, Funds and Personal Property, Section (III)(H)(1-7).

¹⁸ "All requests shall be recorded in a logbook specifically designed for that purpose." *See* ICE NDS 2000, Standard, Staff-Detainee Communication, Section (III)(B)(2).