

Office of Detention Oversight Compliance Inspection

Enforcement and Removal Operations ERO Miami Field Office

Glades County Detention Center Moore Haven, Florida

January 4-6, 2022

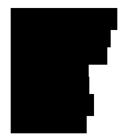
COMPLIANCE INSPECTION of the GLADES COUNTY DETENTION CENTER

Moore Haven, Florida

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COMPLIANCE INSPECTION TEAM MEMBERS



Team Lead ODO
Inspections and Compliance Specialist ODO
Inspections and Compliance Specialist ODO
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FACILITY OVERVIEW

The U.S. Immigration and Customs Enforcement (ICE) Office of Professional Responsibility (OPR) Office of Detention Oversight (ODO) conducted a compliance inspection of the Glades County Detention Center (GCDC) from January 4 to 6, 2022. The facility opened in June 2007 and is owned by the Glades Correctional Development Corporation and operated by the Glades County Sheriff. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at GCDC in June 2007 under the oversight of ERO's Field Office Director in Miami (ERO Miami). The facility operates under the National Detention Standards (NDS) 2019.

ERO has assigned deportation officers and a detention services manager to the facility. A GCDC commander handles daily facility operations and manages support personnel. GCDC provides food services, Armor Correctional Health Care Services provides medical care, and Oasis Management System provides commissary services at the facility. GCDC was accredited by National Commission on Correctional Health Care in February 2021.

Capacity and Population Statistics	Quai	ntity
ICE Detainee Bed Capacity ²		
Average ICE Detainee Population ³		
Male Detainee Population (as of January 4, 2022)		
Female Detainee Population (as of January 4, 2022)		

During its last inspection, in Fiscal Year (FY) 2021, ODO found two deficiencies in the following areas: Funds and Personal Property (1) and Food Service (1).

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

² Data Source: ERO Facility List Report as of January 3, 2022.

COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population greater than 10, 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.⁴

ODO identifies violations of ICE detention standards, ICE policies, or operational procedures as "deficiencies." ODO also highlights instances in which the facility resolves deficiencies prior to completion of the ODO inspection. Where applicable, these corrective actions are annotated with "C" under the *Compliance Inspection Findings* section of this report.

Upon completion of each inspection, ODO conducts a closeout briefing with facility and local ERO officials to discuss preliminary findings. A summary of these findings is shared with ERO management officials. Thereafter, ODO provides ICE leadership with a final compliance inspection report to: (i) assist ERO in developing and initiating corrective action plans; and (ii) provide senior executives with an independent assessment of facility operations. ODO's findings inform ICE executive management in its decision-making to better allocate resources across the agency's entire detention inventory.

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⁴ ODO reviews the facility's compliance with selected standards in their entirety.

FINDINGS BY NATIONAL DETENTION STANDARDS 2019 **MAJOR CATEGORIES**

NDS 2019 Standards Inspected ^{5,6}	Deficiencies
Part 1 – Safety	
Environmental Health and Safety	0
Sub-Total	0
Part 2 – Security	
Admission and Release	1
Custody Classification System	0
Funds and Personal Property	1
Post Orders	0
Searches of Detainees	0
Use of Force and Restraints	0
Special Management Units	0
Sexual Abuse and Assault Prevention and Intervention	0
Sub-Total	2
Part 4 – Care	
Food Service	0
Hunger Strikes	0
Medical Care	1
Personal Hygiene	1
Significant Self-Harm and Suicide Prevention and Intervention	0
Sub-Total	2
Part 5 – Activities	
Correspondence and Other Mail	2
Voluntary Work Program	0
Sub-Total	2
Part 6 – Justice	
Legal Rights Group Presentations	0
Sub-Total	0
Part 7 – Administration and Management	
Detention Files	0
Detainee Transfers	0
Sub-Total	0
Total Deficiencies	6

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

⁶ Beginning in FY 2022, ODO instituted a process of rotating all standards on a 3-year basis. As a result, some standard components may not be present in all inspections.

DETAINEE RELATIONS

ODO interviewed eight detainees, who each voluntarily agreed to participate. ODO offered interviews to the remaining 17 detainees; however, all 17 detainees declined ODO's request for an interview. None of the detainees made allegations of discrimination, mistreatment, or abuse. Most detainees reported satisfaction with the facility except for the concerns below.

Medical Care: One detainee stated he had an eye exam on August 26, 2021, but has not yet received his eyeglasses.

• Action Taken: ODO confirmed through the clinical medical authority (CMA) the optometrist examined the detainee on August 26, 2021, and determined the detainee's uncorrected vision is 20/25. The optometrist completed a prescription and ordered glasses for the detainee on August 27, 2021. On January 4, 2022, the CMA and dayshift nurse contacted the optometrist's office, and on January 5, 2022, the CMA confirmed with the detainee his glasses remained on order but had not yet arrived at the facility. On January 6, 2022, the optometrist followed up with the GCDC medical staff and stated the shipment of the detainee's glasses had been delayed. On February 1, 2022, ODO confirmed ERO Miami received the eyeglasses on January 28, 2022 and will forward them to the the detention facility that is currently houing the detainee.

Medical Care: One detainee stated he submitted his request for a special diet multiple times to the facility's doctor and mental health provider, which the facility has not provided. The detainee said he requested his special diet in person, in print, and via tablet.

 Action Taken: ODO confirmed through the CMA the detainee requested different foods during his initial appointment of chronic care clinics (hyperlipidemia, gastroesophageal reflux, and diabetes mellitus [DM]) on August 9, 2021. The CMA informed the detainee he qualified only for the heart healthy and diabetic diets. On August 25, 2021, the detainee met with the medical staff to review laboratory test results and made no mention of food or diet to medical staff during his appointment. During his scheduled chronic care clinics on November 8, 2021, the detainee told the CMA he did not like pasta or tuna and wanted rice. The CMA reminded the detainee he receives a restricted diet for his DM and does not qualify for any other diet. On January 5, 2022, the CMA met with the detainee to discuss his diet concerns, and the detainee stated the tuna and pasta simply nauseated him. The CMA again reminded the detainee he received a diabetic diet which included reduced or no sugar options and GCDC follows a heart healthy menu overall. The CMA also explained the detainee's diet and medication achieved control of his fasting blood sugar, now averaging 150 mg/dL. The CMA tried to discuss acid reflux versus nausea and the cause of his nausea possibly due to his commissary purchases of spicy foods, but the detainee did not want to discuss this aspect of his diet and requested to stop the discussion. The detainee's next chronic care clinics are scheduled for February 6, 2022.

Telephone Access: One detainee stated the facility charged his account for telephone calls to his attorney when the calls should be free of charge. The detainee said the facility charged him for

other calls that also should be free. He also pointed out that the repeated disconnects with his attorney required him to make multiple calls.

• Action Taken: ODO interviewed the facility's commander and the ViaPath representative and reviewed the detainee's phone usage from the digital phone tracking system. The detainee regularly uses all allotted free call credits. All detainees receive a weekly allotment of 130 minutes of free calls each Wednesday at noon. Free calls consist of 10 13-minute calls which may be used consecutively to talk with whomever the detainee chooses to call. ODO observed GCDC staff explain the use of free telephone credits to the detainee who acknowledged his understanding of the free call program. ODO was unable to identify any instances in which the facility charged the detainee for phone calls that by the NDS 2019 should have been free calls.

COMPLIANCE INSPECTION FINDINGS

SECURITY

ADMISSION AND RELEASE (AR)

ODO reviewed detainee detention files and found in out of files, staff did not make a copy of an identity document (driver's license) for the detention file (**Deficiency AR-1**⁷).

FUNDS AND PERSONAL PROPERTY (FPP)

ODO reviewed detained detention files and found file contained a property inventory form, which listed an identity document, but facility staff did not place a copy of the identity document in the detainee's detention file (**Deficiency FPP-10**8).

CARE

MEDICAL CARE (MC)

ODO reviewed detainee medical files of detainees the facility's medical staff prescribed psychotropic medications and found in out of files, medical staff did not obtain a separate documented informed consent that included a description of the medications' side effects (Deficiency MC-93⁹).

⁷ "Identity documents, such as passports, birth certificates, etc., will be copied for the detention file, and the original forwarded to ICE/ERO." *See* ICE NDS 2019, Standard, Admission and Release, Section (II)(C).

⁸ "Identity documents, such as passports, birth certificates, etc., shall be copied for the detention file, and the original forwarded to ICE/ERO." *See* ICE NDS 2019, Standard, Funds and Personal Property, Section (II)(B)(2).

⁹ "Prior to the administration of psychotropic medications, a separate documented informed consent, that includes a description of the medications side effects, shall be obtained." *See* ICE NDS 2019, Standard, Medical Care, Section (II)(O).

PERSONAL HYGIENE (PH)

ODO interviewed the facility commander and the housing sergeant, inspected the hygiene and clothing items the facility issued to detainees upon admission, and found the facility does not issue skin lotion to the detainees (**Deficiency PH-14**¹⁰).

ACTIVITIES

CORRESPONDENCE AND OTHER MAIL (COM)

ODO interviewed the facility staff, reviewed the facility's detainee/inmate handbook, and found the facility's handbook does not inform detainees facility staff may not read their special correspondence (**Deficiency COM-6**¹¹).

ODO interviewed the facility's staff, reviewed the facility's inmate mail policy and facility's detainee handbook, and found the facility does not place into the detainee's file a copy of identity documents received at the facility, via the U.S. mail (**Deficiency COM-32**¹²).

Corrective Action: During the inspection, the facility's commander updated the facility's inmate mail policy to require facility staff to place a copy of identity documents received at the facility, via the U.S. mail, into the detainee's detention file. The facility's commander emailed the updated policy to all facility staff. In addition, ODO received and reviewed the updated inmate mail policy (C-1).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 19 standards under NDS 2019 and found the facility in compliance with 14 of those standards. ODO found six deficiencies in the remaining five standards. ODO commends facility staff members for their responsiveness during this inspection and noted one instance where staff initiated corrective action. ERO provided ODO with the uniform corrective action plan for ODO's last inspection of GCDC on June 21, 2021.

¹⁰ "Each detainee shall receive, at a minimum, the following items: ...

^{6.} One container of skin lotion."

See ICE NDS 2019, Standard, Personal Hygiene, Section (II)(F)(6).

^{11 &}quot;At a minimum, the notification shall specify: ...

^{4.} That special correspondence may only be opened in the detainee's presence, and may be inspected for contraband, but not read."

See ICE NDS 2019, Standard, Correspondence and Other Mail, Section (II)(B)(4).

¹² "Identity documents (passports, birth certificates, etc.) shall be turned over to ICE/ERO. A copy shall be provided to the detainee and a copy shall be placed in the detainee's file." *See* ICE NDS 2019, Standard, Correspondence and Other Mail, Section (II)(G).

Compliance Inspection Results Compared	FY 2021 (NDS 2019)	FY 2022 (NDS 2019)
Standards Reviewed	12	19
Deficient Standards	2	5
Overall Number of Deficiencies	2	6
Repeat Deficiencies	0	0
Areas of Concern	1	0
Corrective Actions	1	1
Facility Rating	N/A	Superior