



U.S. Department of Homeland Security
U.S. 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**

**Monroe County Detention-Dorm
Monroe, Michigan**

July 12-15, 2021

**FOLLOW-UP COMPLIANCE INSPECTION
of the
MONROE COUNTY DETENTION-DORM
Monroe, Michigan**

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FOLLOW-UP COMPLIANCE INSPECTION TEAM MEMBERS



Team Lead
Contractor
Contractor
Contractor
Contractor

ODO
Creative Corrections
Creative Corrections
Creative Corrections
Creative Corrections

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 Monroe County Detention-Dorm (MCDD) in Monroe, Michigan, from July 12 to 15, 2021.¹ This inspection focused on the standards found deficient during ODO’s last inspection of the MCDD from March 22 to 26, 2021. The facility opened in 2000 and is owned and operated by Monroe County. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at MCDD in 2000 under the oversight of ERO’s Field Office Director in Detroit (ERO Detroit). The facility operates under the National Detention Standards (NDS) 2019.

ERO has assigned deportation officers and a detention services manager to the facility. An MCDD lieutenant handles daily facility operations and manages █ support personnel. Continental Café, LLC provides food services, Advanced Correctional Healthcare, Inc. provides medical care, and Keefe Group provides commissary services at the facility. The facility does not hold any accreditations from outside entities.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity ²	█
Average ICE Detainee Population ³	█
Male Detainee Population (as of July 12, 2021)	█
Female Detainee Population (as of July 12, 2021)	█

During its last inspection, in Fiscal Year (FY) 2021, ODO found three deficiencies in the following area: Significant Self-Harm and Suicide Prevention and Intervention (3).

¹ This facility holds male 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 June 21, 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 2019 MAJOR CATEGORIES

NDS 2019 Standards Inspected ^{4,5}	Deficiencies
Part 1 – Safety	
Environmental Health and Safety	0
Sub-Total	0
Part 2 – Security	
Admission and Release	0
Custody Classification System	0
Funds and Personal Property	0
Hold Rooms in Detention Facilities	0
Use of Force and Restraints	0
Sub-Total	0
Part 4 – Care	
Food Service	0
Hunger Strikes	0
Medical Care	2
Significant Self-Harm and Suicide Prevention and Intervention	0
Sub-Total	2
Total Deficiencies	2

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

⁵ 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.

DETAINEE RELATIONS

ODO interviewed nine detainees, who each voluntarily agreed to participate. Two detainees declined the ODO interview. 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 conducted detainee interviews via video teleconference.

Food Service: One detainee requested a low-sodium diet as he had concerns regarding his high blood pressure, which required medication to control.

- Action Taken: ODO reviewed the detainee's medical record and found the detainee had not requested a low-sodium diet prior to ODO's interview. ODO also found the facility prescribed the detainee blood pressure medication, which he takes daily, and facility staff check his blood pressure on a weekly basis. ODO spoke with the facility assistant administrator and confirmed the medical staff's efforts to schedule an evaluation of the detainee for a low-sodium diet. On July 14, 2021, the facility medical staff evaluated the detainee and placed him on a low-sodium diet effective the same day.

Sexual Abuse and Assault Prevention and Intervention: Six detainees stated that female officers do not announce their presence when entering male dormitories.

- Action Taken: ODO spoke with the facility assistant administrator, who confirmed it is facility policy for officers of the opposite gender to announce themselves when entering dorms. On July 16, 2021, the facility assistant administrator spoke with the female officers to reiterate this policy. Additionally, he sent an email outlining this requirement to ensure officers announce their presence with authority so that all individuals in the dorms are aware of their presence.

FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

CARE

FOOD SERVICE (FS)

ODO interviewed the facility kitchen operations manager (KOM) and found that, due to the COVID-19 pandemic, the Monroe County Health Department (MCHD) had not conducted an official annual inspection of MCDD since February 21, 2019. The MCHD informed the facility last year they were suspending all inspections until further notice. ODO reviewed the memorandum from MCHD, dated July 12, 2021, confirming the suspension of inspections at that time. The MCHD indicated it would notify the facility as soon as annual inspections resumed. ODO notes the suspension of the annual health inspection as an **Area of Concern**.

MEDICAL CARE (MC)

ODO reviewed ■ detainee medical records and found ■ detainee did not receive a tuberculosis (TB) screening in accordance with the Centers for Disease Control and Prevention guidelines. Specifically, ODO found the detainee received a TB skin test; however, the facility read the test

results 96 hours after administering it, instead of the required 72 hours. The skin test indicated a positive result for TB, and medical staff followed up with a chest X-ray of the detainee, which was negative for active TB (**Deficiency MC-18⁶**).

ODO reviewed [REDACTED] detainee medical records and found [REDACTED] detainee did not receive a comprehensive health assessment within 14 days of the detainee's arrival at the facility. Specifically, the facility medical staff completed the health assessment [REDACTED] days after the detainee's arrival (**Deficiency MC-27⁷**).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 10 standards under NDS 2019 and found the facility in compliance with 9 of those standards. ODO found two deficiencies in the remaining standard. ODO commends facility staff for its responsiveness and professionalism during this inspection. ODO recommends ERO Detroit 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 the MCDD which occurred in March 2021.

Compliance Inspection Results Compared	First FY 2021 (NDS 2019)	Second FY 2021 (NDS 2019)
Standards Reviewed	18	10
Deficient Standards	1	1
Overall Number of Deficiencies	3	2
Repeat Deficiencies	0	0
Areas of Concern	0	1
Corrective Actions	1	0

⁶ “All new arrivals shall receive tuberculosis (TB) screening in accordance with the most current Centers for Disease Control and Prevention (CDC) guidelines, including, but not limited to, CDC Guidelines for Correctional Facilities, prior to being placed in general population.” See ICE NDS 2019, Standard, Medical Care, Section (II)(D)(1).

⁷ “The facility will conduct and document a comprehensive health assessment, including a physical examination and mental health screening, on each detainee within 14 days of the detainee's arrival at the facility.” See ICE NDS 2019, Standard, Medical Care, Section (II)(E).