



U.S. Department of Homeland Security
U.S. Immigration and Customs Enforcement
Office of Professional Responsibility
ICE Inspections
Washington, DC 20536-5501

**Office of Detention Oversight
Follow-Up Compliance Inspection
2023-002-172**

**Enforcement and Removal Operations
ERO Detroit Field Office**

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

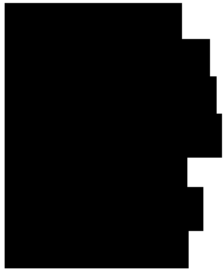
August 8-10, 2023

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

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FOLLOW-UP COMPLIANCE INSPECTION TEAM MEMBERS



Acting Team Lead

ODO

Inspections and Compliance Specialist

ODO

Inspections and Compliance Specialist

ODO

Contractor

Creative Corrections

Contractor

Creative Corrections

Contractor

Creative Corrections

Contractor

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 August 8 to 10, 2023.¹ This inspection focused on the standards found deficient during ODO’s last inspection of MCDD from February 14 to 16, 2023. The facility opened in 2000 and is owned by Monroe County and operated by the Monroe County Sheriff’s Office. 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.

[REDACTED] A jail administrator handles daily facility operations and manages [REDACTED] support personnel. Continental Cafe, LLC provides food services, Advanced Correctional Healthcare provides medical care, and Keefe Commissary provides commissary services at the facility. The facility does not hold any accreditations from any outside entities.

Capacity and Population Statistics	Quantity
ICE Bed Capacity ²	[REDACTED]
Average ICE Population ³	[REDACTED]
Adult Male Population (as of August 8, 2023)	[REDACTED]
Adult Female Population (as of August 8, 2023)	[REDACTED]

During its last full inspection, in Fiscal Year (FY) 2023, ODO found four deficiencies in the following areas: Medical Care (2); Recreation (1); and Transportation by Land (1).

¹ This facility holds male 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 August 7, 2023.

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/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 may 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 uniform corrective action plan (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.

FINDINGS BY NATIONAL DETENTION STANDARDS 2019 MAJOR CATEGORIES

NDS 2019 Standards Inspected ^{4,5}	Deficiencies
Part 1 - Safety	
Environmental Health and Safety	0
Transportation by Land	0
Sub-Total	0
Part 2 - Security	
Admission and Release	0
Custody Classification System	0
Facility Security and Control	0
Funds and Personal Property	0
Hold Rooms in Detention Facilities	0
Use of Force and Restraints	0
Staff-Detainee Communication	0
Sub-Total	0
Part 4 - Care	
Food Service	0
Medical Care	1
Significant Self-Harm and Suicide Prevention and Intervention	0
Terminal Illness and Death	0
Sub-Total	1
Part 5 - Activities	
Recreation	0
Telephone Access	0
Sub-Total	0
Part 6 - Justice	
Grievance System	0
Sub-Total	0
Total Deficiencies	1

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

⁵ 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 standards.

DETAINEE RELATIONS

ODO interviewed 26 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. One detainee indicated thoughts of self-harm and ODO immediately referred him to facility medical staff for evaluation, which is detailed below. Most detainees reported satisfaction with facility services except for the concerns listed below.

Correspondence and Other Mail: One detainee stated the facility did not provide envelopes to send mail.

- Action Taken: ODO spoke to a facility lieutenant, reviewed the facility detainee handbook, and found facility staff provided ICE detainees with envelopes and stamps, when detainees submitted requests for those items via the facility's KITE (request) system. ODO reviewed the detainee request log and found the detainee had not submitted a request for envelopes. ODO informed the detainee to submit future requests for envelopes through the KITE system, and the detainee acknowledged understanding.

Law Libraries and Legal Material: One detainee stated the ICE computer with Lexus Nexus is broken and all text is in English.

- Action Taken: ODO spoke to a facility lieutenant and found the detainees informed the facility of the broken computer on August 1, 2023. Facility staff coordinated repair of the computer on August 2, 2023, and installed an updated version of Lexus Nexus on August 4, 2023. On August 9, 2023, ODO visited the housing unit and verified the repair of the computer and accessibility of Lexus Nexus in multiple languages. ODO informed the detainee of the repaired computer and available access of Lexus Nexus in multiple languages.

Medical Care: One detainee stated he felt depressed and requested to speak with the facility's mental health provider.

- Action Taken: Following the ODO interview, a facility licensed practical nurse (LPN) conducted a health assessment of the detainee and confirmed the detainee denied suicidal ideations nor wanting medication. The facility LPN referred the detainee to an off-site mental health counselor (MHC), who evaluated the detainee on the same day. The MHC diagnosed the detainee as not suicidal but noted the detainee's request for depression medication. On August 9, 2023, a facility provider examined the detainee for depression and prescribed Lexapro (10 mg) for 90 days, scheduled a follow-up appointment in 3 months, and informed the detainee to contact medical staff via the KITE system, if needed.

Medical Care: One detainee stated he had thoughts of harming himself.

- Action Taken: ODO spoke to a facility LPN and found the detainee arrived at the facility on May 4, 2023. During his initial examination, the detainee denied any medical concerns. On May 11, 2023, a facility registered nurse completed the detainee's 14-day examination, noting the detainee's confirmation of no mental health issues. Following the ODO interview, a facility provider conducted a health assessment of the detainee and confirmed the detainee's stress and insomnia due to feeling overwhelmed. The facility provider prescribed Pamelor (25 mg) for 90 days, scheduled a follow-up chronic care appointment in 3 months, and encouraged the detainee to contact medical staff via the KITE system, if needed. Following the inspection, ODO reached out to the facility on August 28, 2023, to request an update on this detainee and the facility informed ODO the detainee had refused medication (discontinued August 22, 2023) and no longer wished to speak with a mental health professional.

Sexual Abuse and Assault Prevention and Intervention: One detainee stated his concern over occasional harassment by other detainees.

- Action Taken: During the ODO interview on August 8, 2023, a detainee claimed other Venezuelan detainees occasionally called him names such as "motorhead" and "bulldog" and made fun of his indigenous ethnicity. The detainee stated the harassment was verbal and therefore he felt safe at the facility. The detainee stated he had not reported the incident to the facility and refused to provide ODO with the detainees' names. ODO checked the grievance logs and confirmed the detainee made no submission of the incident to the facility nor ERO Detroit. Following the interview, ODO informed ERO Detroit and facility leadership of the detainee's concerns. On August 9, 2023, ERO Detroit informed ODO that facility staff scheduled the transfer of the detainee to the Saint Clair County Jail for the following day as a precautionary measure.

FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

CARE

MEDICAL CARE (MC)

ODO reviewed one detainee medical record in which the facility administered psychotropic medication and found the facility medical staff did not obtain a separate informed-consent form from the detainee that included a description of the medication's side effects (**Deficiency MC-93⁶**). **This is a repeat deficiency and a priority component.**

⁶ "Prior to the administration of psychotropic medications, a separate documented informed consent, that includes a description of the medication's side effects, shall be obtained." See ICE NDS 2019, Standard, Medical Care, Section (II)(O).

CONCLUSION

During this follow-up compliance inspection, ODO assessed the facility's compliance with 16 standards under NDS 2019 and found the facility in compliance with 15 of those standards. ODO found one deficiency in the remaining standard. Since MCDD's last full inspection in February 2023, the facility's overall compliance with the ICE NDS 2019 has improved. MCDD went from three deficient standards and four deficiencies in February 2023, to one deficient standard and one repeat deficiency during this most recent inspection. The facility's improved performance likely resulted from completing the UCAP for ODO's last inspection of MCDD in February 2023. ODO recommends ERO Detroit work with the facility to resolve any deficiencies that remain outstanding in accordance with the contractual obligations.

Compliance Inspection Results Compared	FY 2023 Full Inspection NDS 2019	FY 2023 Follow-up Inspection NDS 2019
Standards Reviewed	18	16
Deficient Standards	3	1
Overall Number of Deficiencies	4	1
Priority Component Deficiencies	2	1
Repeat Deficiencies	0	1
Areas Of Concern	0	0
Corrective Actions	0	0
Facility Rating	Superior	N/A