



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

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## Office of Detention Oversight Compliance Inspection

Enforcement and Removal Operations  
ERO Detroit Field Office  
Morrow County Correctional Facility  
Mount Gilead, OH

August 21-23, 2018

**COMPLIANCE INSPECTION**  
**for the**  
Morrow County Correctional Facility  
Mount Gilead, OH

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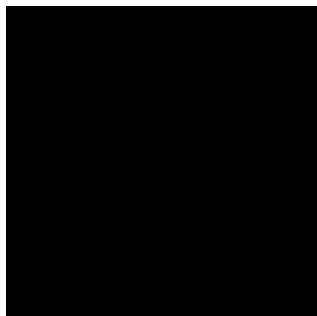
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**COMPLIANCE INSPECTION TEAM MEMBERS**

	Lead Inspections and Compliance Specialist	ODO
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## FACILITY OVERVIEW

The Office of Detention Oversight (ODO) conducted a compliance inspection of the Morrow County Correctional Facility (MCCF), in Mount Gilead, Ohio, from August 21-23, 2018<sup>1</sup>. The MCCF opened in 1996, and in August 2009 entered into an agreement with the Office of Enforcement and Removal Operations (ERO) to house U.S. Immigration and Customs Enforcement (ICE) detainees under the oversight of ERO's Field Office Director (FOD) in Detroit. The facility is owned by Morrow County and operated by the Morrow County Sheriff's Office. The facility operates under the National Detention Standards (NDS) 2000.

ERO Deportation Officers (DO) and a Detention Services Manager (DSM) are assigned to the facility, but they are not located on-site. A Sheriff oversees the facility, a Captain handles daily facility operations and is supported by █ personnel. Aramark Correctional Services manages MCCF's food services. Morrow County employees provide medical care services. The facility does not hold American Correctional Association (ACA) accreditation.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity <sup>2</sup>	52 <sup>3</sup>
Average ICE Detainee Population <sup>4</sup>	35
Male Detainee Population (as of 8/21/2018)	16
Female Detainee Population (as of 8/21/2018)	5

In fiscal year (FY) 2015, ODO conducted an inspection of MCCF and found 55 deficiencies in the following areas: Access to Legal Materials (5 deficiencies), Admission and Release (2), Detainee Classification System (2), Detainee Grievance Procedures (5), Detainee Handbook (3), Environmental Health and Safety (4), Food Service (5), Funds and Personal Property (4), Medical Care (1), Special Management Unit – Administrative Segregation (3), Special Management Unit – Disciplinary Segregation (3), Staff-Detainee Communication (4), Suicide Prevention and Intervention (1), Telephone Access (9), and Use of Force (4).

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<sup>1</sup> The MCCF houses male and female detainees of low, medium, medium-high, and high classification levels.

<sup>2</sup> Data Source: ERO Facility List Report as of November 13, 2017.

<sup>3</sup> MCCF total bed capacity is 126, but can be expanded up to 135 for emergencies. ICE detainee bed capacity depends on the facility's daily local inmate population.

<sup>4</sup> *Ibid.*

## FY 2018 FINDINGS BY NDS 2000 MAJOR CATEGORIES

NDS 2000 STANDARDS INSPECTED <sup>5</sup>	DEFICIENCIES
<b>Part 1 – Detainee Services</b>	
Access to Legal Material	5
Admission and Release	5
Detainee Classification System	2
Detainee Grievance Procedure	8
Detainee Handbook	6
Food Service	3
Funds and Personal Property	4
Staff-Detainee Communication	9
Telephone Access	3
<b>Sub-Total</b>	<b>45</b>
<b>Part 2 – Security and Control</b>	
Environmental Health and Safety	2
Special Management Unit (Administrative Segregation)	3
Special Management Unit (Disciplinary Segregation)	2
Use of Force	5
<b>Sub-Total</b>	<b>12</b>
<b>Part 3 – Health Services</b>	
Medical Care	0
Suicide Prevention and Intervention	0
<b>Sub-Total</b>	
<b>Total Deficiencies</b>	<b>57</b>

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

## COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population greater than ten and where detainees are housed for over 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.<sup>6</sup> ODO identifies violations linked to ICE detention standards, ICE policies, or operational procedures as *deficiencies*. ODO also highlights instances when the facility resolves deficiencies prior to completion of the ODO inspection -- these corrective actions are annotated with “C” under the Inspection Findings section of this report.

At the conclusion of each inspection, ODO hosts a closeout briefing with facility and local ERO officials to discuss preliminary findings. A summary of these findings is also 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. Additionally, ODO findings inform ICE executive management decision making in better allocating resources across the agency’s entire detention inventory.

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<sup>6</sup> ODO reviews the facility’s compliance with selected standards in their entirety.

## DETAINEE RELATIONS

ODO interviewed 17 randomly-selected male and female detainees to assess the conditions of confinement. Interview participation was voluntary, and most detainees reported being satisfied with facility services with the exception of the below concerns. Additionally, while the majority of detainees did not express allegations of abuse, discrimination, or mistreatment, one male detainee alleged verbal abuse on the part of a staff member, and several others indicated concerns regarding their safety as discussed below:

*Safety:* Several male detainees mentioned facility inmates often make derogatory comments towards ICE detainees, quoting the President's stance on immigration, and make threatening comments to them in the bathroom. The male detainees also claimed inmates frequently fight each other.

- Action Taken: ERO told ODO that some detainees who previously brought their concerns to ERO's attention have been transferred to the Butler County Jail (BCJ) in Ohio. ERO stated these detainees were also given the choice of being housed in the facility's protective custody pod, but they turned this option down.

*Officer Misconduct:* One detainee alleged he was verbally abused by a facility correctional officer and submitted a grievance on July 31, 2018, via the kiosk, expressing his concerns.

- Action Taken: ODO reviewed the facility grievance log and the detainee's file. Neither contained any indication of the grievance or the facility's response. ODO was able to obtain a copy of the grievance from the kiosk and noted the response lacked substance. ODO found no evidence the grievance was reported to ICE ERO as required<sup>7</sup>. ODO brought this matter to the attention of the field office.

*Detainee Handbook:* Several detainees claimed they did not receive the local facility handbook and another detainee claimed not to have received the ICE National Detainee Handbook.

- Action Taken: ODO reviewed the detainee's files and interviewed staff. The files contained no signed acknowledgement of receipt. However, in talking with staff, ODO learned the facility handbook is available (in English and Spanish) on the detainee kiosk located in the housing areas; hard copies are also maintained at each unit officer desk and are available for detainee review.
- ERO acknowledged the ICE National Detainee Handbook was not consistently distributed to all detainees at this facility as most detainees receive the national handbook prior to transferring to this facility. Note: many detainees at this location were previously housed at the Butler County Jail in Hamilton, OH. ODO ensured these detainees received a copy of the requisite handbook prior to the conclusion of the inspection.

*Environmental Health and Safety:* One detainee claimed that the \$20.00 cost of a haircut was excessive.

- Action Taken: ODO spoke with the Captain concerning the haircut fee. The Captain explained that a private barber visits the facility to provide haircuts for both detainees and inmates and

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<sup>7</sup> See ICE Memorandum-Employee Obligation to Report Corruption and Misconduct to the ICE Office of Professional Responsibility, Joint Intake Center, U.S. Department of Homeland Security Office of the Inspector General, ICE Management, or Office of Special Counsel, dated May 7, 2018.

charges \$20 per cut. He also indicated indigent detainees are allowed one free haircut per month. ODO cites charging detainees to maintain personal hygiene an **Area of Concern**.

*Medical Care:* Two detainees expressed concerns about medical care:

One detainee claimed he submitted a sick call request for a toothache and has not seen by medical staff.

- Action Taken: ODO reviewed the detainee's medical file and discussed the issue with medical staff. ODO confirmed the detainee submitted a sick call request for tooth pain on August 16, 2018 and was evaluated and prescribed medication the next day. However, medical records indicate the detainee did not pick up his medication from the pill line from August 17-20, 2018. Following the detainee's interview, he submitted a second sick call request indicating he could not sleep at night because of his toothache. Medical staff met with the detainee and explained he needed to pick up his medication daily from the pill line for the next ten days.

One detainee stated during the admission medical screening he requested anxiety medication which has not been provided.

- Action Taken: ODO reviewed the detainee's medical file and found his medication was available from the pill line, but he had not been picking it up. At ODO's request medical staff indicated they would have mental health staff follow up with the detainee to explain the pill line process and determine next steps.

# COMPLIANCE INSPECTION FINDINGS

## DETAINEE SERVICES

### ACCESS TO LEGAL MATERIAL (ALM)

MCCF maintains one law library for use by ICE detainees, equipped with one computer work station having LexisNexis version 3.4 and a printer/copier machine. ODO was unable to verify if the law library is large enough to accommodate all detainees who request its use because the facility does not accurately capture all requests. Instead, requests for access are collected verbally, and only fulfilled requests are documented (**Deficiency ALM-1<sup>8</sup>**). MCCF's own weekly inspections showed the computer is not in working order (**Deficiency ALM-2<sup>9</sup>**). ODO found the facility has been unable to fulfill requests for accessing the library due to extensive periods of inoperable equipment. Specifically, equipment was not available for detainees to research and prepare documents for legal proceedings from March 16, 2018 until August 22, 2018 (**Deficiency ALM-3<sup>10</sup>**). Consequently, the facility is unable to consistently allow detainees to use the law library for a minimum of five hours each week (**Deficiency ALM-4<sup>11</sup>**).

- Corrective-Action: The facility initiated corrective action by fixing the computer and ensuring it is operational (**CA-1**).

The detainee handbook gives notification of law library access and associated rules and procedures. However, the detainee handbook does not include the procedure for notifying a designated employee that library material is missing or damaged (**Deficiency ALM-5<sup>12</sup>**).

### ADMISSION AND RELEASE (A&R)

ODO's review found all funds and personal property are inventoried in the presence of the detainee, and inventory sheets are signed by the detainee and two staff witnesses. This inventory is entered into the facility database, the detainee is given a copy, and a copy is kept in the detainee file. The booking staff confirmed detainees have arrived at MCCF and reported missing property; however, MCCF does not use the Form I-387, Report of Detainee Missing Property and does not forward it to ERO (**Deficiency A&R-1<sup>13</sup>**).

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<sup>8</sup> "The law library shall be large enough to provide reasonable access to all detainees who request its use." See ICE NDS 2000, Standard, Access to Legal Material, Section (III)(A).

<sup>9</sup> "The facility shall designate an employee with responsibility to inspect the equipment at least weekly and ensure that it is in good working order, and to stock sufficient supplies." See ICE NDS 2000, Standard, Access to Legal Material, Section (III)(B). **This is a Repeat Deficiency.**

<sup>10</sup> "The law library shall provide an adequate number of typewriters and/or computers, writing implements, paper, and office supplies to enable detainees to prepare documents for legal proceedings." See ICE NDS 2000, Standard, Access to Legal Material, Section (III)(B)(1).

<sup>11</sup> "Each detainee shall be permitted to use the law library for a minimum of five (5) hours per week." See ICE NDS 2000, Standard, Access to Legal Material, Section (III)(G). **This is a Repeat Deficiency.**

<sup>12</sup> "The detainee handbook or equivalent, shall provide detainees with the rules and procedures governing access to legal materials, including the following information: ...6. the procedure for notifying a designated employee that library material is missing or damaged." See ICE NDS 2000, Standard, Access to Legal Material, Section (III)(Q)(6). **This is a Repeat Deficiency.**

<sup>13</sup> "The officer shall complete a Form I-387, 'Report of Detainee's Missing Property' when any newly arrived detainee claims his/her property has been lost or left behind. IGSA facilities shall forward the completed I-387s to INS." See ICE NDS 2000, Standard, Admission and Release, Section (III)(I).



MCCF's detainee orientation to the facility consists of the detainee handbooks, which are available via the kiosk, and the "Know Your Rights" video played in the housing units each Saturday. However, ODO determined the facility does not have an approved orientation procedure (**Deficiency A&R-2<sup>14</sup>**) or site-specific orientation video approved by ERO (**Deficiency AR-3<sup>15</sup>**). ODO also found MCCF's release procedures are specified in their policy; however, they were not approved by ERO (**Deficiency A&R-4<sup>16</sup>**).

ODO reviewed detention files of all 22 detainees held at MCCF during the inspection and found each had a Form I-203, Order to Detain or Release; yet, four were not signed by an ERO authorizing official (**Deficiency A&R-5<sup>17</sup>**).

ODO notes as an **Area of Concern** the lack of detainee privacy during the admission process. Inspectors observed the admission of one Spanish-speaking detainee during the inspection and noted the booking officer asked another detainee from general population to report to booking to translate for the newly arriving detainee<sup>18</sup>. Having another detainee provide translation services is a concern for a variety of reasons, including confidentiality and the accuracy of the translation. ODO verified the DHS "I Speak" posters were posted in the booking area. The officer explained they have access to "Google translate" in the booking area, and there is a language line in the medical unit; however, the officer said it is easier for another detainee to translate. ODO notes medical intake screening is not translated by other detainees, and the language line is used for that part of the process.

## **DETAINEE CLASSIFICATION SYSTEM (DCS)**

The overall classification processes for detainees at MCCF is inconsistent and often lacks sufficient documentation clearly articulating how classification decisions are made. MCCF maintains six policies on classification; however, in practice, these policies only apply to inmates. ICE detainees are all classified by ERO using the Risk Classification Assessment (RCA) instrument prior to admission to the facility. According to booking officers and the Supervisory Detention and Deportation Officer (SDDO), MCCF only houses low and medium-level detainees. The low-level detainees are housed in the dormitories, and medium-level detainees are housed in pods [REDACTED]. ODO's review of documentation found a detainee classified as a high level on the Form I-216, Record of Persons and Property Transferred, was housed in the MCCF male dormitory with low-level detainees (**Deficiency DCS-1<sup>19</sup>**). ODO notified the facility and ERO staff about

<sup>14</sup> "In IGSA's the INS office of jurisdiction shall approve all orientation procedures." See ICE NDS 2000, Standard, Admission and Release, Section (III)(J).

<sup>15</sup> "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). **This is a Repeat Deficiency.**

<sup>16</sup> "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 approved (sic) the IGSA release procedures." See ICE NDS 2000, Standard, Admission and Release, Section (III)(J). Note: Error in the NDS outline. Should be (III)(L).

<sup>17</sup> "An order to detain or release (Form I-203 or I-203a) bearing the appropriate official signature shall accompany the newly arriving detainee." See ICE NDS 2000, Standard, Admission and Release, Section (III)(H).

<sup>18</sup> "The OIC will provide translation assistance to detainees exhibiting literacy or language problems and those who request it. This may involve translators from the private sector or from the detainee population." See ICE NDS 2000, Standard, Detainee Handbook, Section (III)(A)(E).

<sup>19</sup> "All facilities ensure that detainees are housed according to their classification level. [REDACTED]"

the discrepancy. ODO notes prior to completion of the inspection, the Sheriff sought to address this issue by housing the high-level detainee in the Special Management Unit until a more permanent solution could be implemented.

ODO reviewed 22 detainee files and found none of them contained any classification documents to include copies of documents created by ICE (such as the Risk Classification Assessment) or documents created by the facility (**Deficiency DCS-2<sup>20</sup>**). Detainees at the facility wear lime green uniforms, but there is no other distinction or marking indicating a classification level.

ODO identified multiple **Areas of Concern** regarding MCCF's classification practices.

[REDACTED]

The facility co-mingles ICE detainee and county inmates in housing areas, and the only means of custody distinction is their physical housing location and lime green uniforms (worn by ICE detainees). Without readily identifiable custody levels, errors in placements are likely, as noted above in the placement of a high-level detainee in a low-level dormitory.

#### **DETAINEE GRIEVANCE PROCEDURE (DGP)**

MCCF has an informal and formal grievance system in place which allows grievances to be addressed at the lowest level possible and in the most efficient and timely manner. The facility uses Keefe Group Offender Communicator Center Kiosks for grievances. All detainees have access to these kiosks throughout the day. The instructions are in English, and Spanish translation service is provided upon request. During the 12-month period preceding the inspection, ODO confirmed 23 formal grievances were filed by detainees. The Grievance Coordinator explained multiple informal grievances were filed during the same 12-month period; however, they were not documented or placed in the detainee's detention file (**Deficiency DGP-1<sup>21</sup>**). ODO found the facility has no written policy in place that explains how informal grievances are to be documented.

ODO reviewed the facility's grievance log and found grievances are not responded to promptly (**Deficiency DGP-2<sup>22</sup>**). Less than half of the grievances were answered in less than ten days, the

<sup>20</sup> "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 Detainee Classification System (DCS). Pending receipt processing of critical information (see paragraph III.A.2 above), the officer will segregate the detainee from the general population. The officer will place all original paperwork relating to the detainee's assessment and classification in his/her A-file, with a copy in the detention file." See ICE NDS 2000, Standard, Detainee Classification System, Section (III)(B). **This is a Repeat Deficiency.**

<sup>21</sup> "If an oral grievance is resolved to the detainee's satisfaction at any level of review, the staff member need not provide the detainee written confirmation of the outcome, however the staff member will document the results for the record and place his/her report in the detainee's detention file." See ICE NDS 2000, Standard, Detainee Grievance Procedure, Section (III)(A)(1). **This is a Repeat Deficiency.**

<sup>22</sup> "When the first-line supervisor receives a formal grievance, he/she will officially meet with the detainee to attempt

other half were answered after ten days. Some grievances took 30 and 40 days for resolution. ODO found two grievances alleging officer misconduct against a facility officer that were not reported to ICE ERO, the ICE Office of Professional Responsibility's (OPR) Joint Intake Center (JIC), or the Department of Homeland Security (DHS) Office of the Inspector General (OIG) (**Deficiency DGP-3<sup>23</sup>**). ODO informed ERO Field Office leadership of these allegations during the inspection.

ODO also notes as an **Area of Concern**, that in addition to the delays in answering grievances, the responses frequently were insufficient to provide resolution. ODO reviewed 23 grievances and found 15 responses were still in review or contained responses such as "Done," "Answered," and "No longer here." The grievance log also lacked first review, and reply dates, as well as grievance numbers. Additionally, some updates were logged four months after the grievance was first submitted. Lastly, facility policy does not provide guidance on submitting officer misconduct allegations to OPR nor did ERO have procedures in place to coordinate the review and submission of staff misconduct allegations.

The facility relies on [REDACTED] Corporals to conduct checks throughout the day for detainee grievances and to respond to them independently. The facility does not have a grievance committee to review formal complaints (**Deficiency DGP-4<sup>24</sup>**). ODO found no detention files contained copies of grievances. Additionally, formal grievances, when resolved, are not placed in the detainee's detention file (**Deficiency DGP-5<sup>25</sup>**).

ODO found the facility handbook has information on how to file a grievance with facility staff, notification that facility staff will not harass, discipline, punish, or otherwise retaliate against detainees for filing a grievance, and the opportunity to file a complaint about officer misconduct with the DHS OIG. However, the detainee handbook does not have the procedures for contacting ERO to appeal a decision (**Deficiency DGP-6<sup>26</sup>**). Therefore, detainees are unaware they can communicate directly with ERO if they are dissatisfied with the facility response (**Deficiency DGP-7<sup>27</sup>**). Facility policy and the local supplement to the handbook do not inform detainees on how to file appeals, nor are appeals consistently responded to within five days of receipt (**Deficiency DGP-8<sup>28</sup>**).

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to resolve the issue. If the grievance cannot be resolved to the satisfaction of the detainee, the supervisor will notate the detainee grievance form and refer the written grievance to the next level of supervision in his/her chain of command or to the appropriate department head. The responsible department head or staff officer will act on the grievance within five working days through informal or formal resolution." See ICE NDS 2000, Standard, Detainee Grievance Procedures, Section (III)(A)(2).

<sup>23</sup> "Staff must forward all detainee grievances containing allegations of officer misconduct to a supervisor or higher-level official in the chain of command. CDFs and IGSA facilities must forward detainee grievances alleging officer misconduct to INS. INS will investigate every allegation of officer misconduct." See ICE NDS 2000, Standard, Detainee Grievance Procedures, Section (III)(F).

<sup>24</sup> The OIC must allow the detainee to submit a formal, written grievance to the facility's grievance committee." See ICE NDS 2000, Standard, Detainee Grievance Procedures, Section (III)(A)(2). **This is a Repeat Deficiency.**

<sup>25</sup> "A copy of the grievance will remain in the detainee's detention file for at least three years." See ICE NDS 2000, Standard, Detainee Grievance Procedures, Section (III)(E). **This is a Repeat Deficiency.**

<sup>26</sup> "The grievance section of the detainee handbook will provide notice of the following: The procedures for contacting the INS to appeal the decision of the OIC of a CDF or an IGSA facility." See ICE NDS 2000, Standard, Detainee Grievance Procedures, Section (III)(G).

<sup>27</sup> "CDFs and IGSA facilities must allow any INS detainee dissatisfied with the facility's response to his/her grievance to communicate directly with INS." See ICE NDS 2000, Standard, Detainee Grievance Procedures, Section (III)(C).

<sup>28</sup> "The OIC will provide the detainee a written decision within five days of receiving the appeal." See ICE NDS 2000,

## DETAINEE HANDBOOK (DH)

ODO reviewed the facility handbook and determined the handbook includes an overview of programs and services, detainee rights and responsibilities, disciplinary procedures and sanctions, contraband, grievance and appeals procedures, and prohibited acts and behaviors. It also informs detainees about the facility's zero tolerance policies regarding, sexual abuse, harassment and retaliation; housing assignments; commissary, telephone and library privileges; and rules related to mail, recreation, and visitation. However, the local handbook does not include information on accessing personal property (**Deficiency DH-1<sup>29</sup>**).

ODO's review of procedures, documentation, and interviews with staff found all arriving detainees at MCCF are not given a facility handbook or ICE National Detainee Handbook upon admission to the facility. Electronic versions of the handbooks are placed on the kiosk, and hardcopies are available at each unit officers' desk for detainees to review; however, detainees cannot use the kiosk until they acknowledge receipt of the handbook. ODO noted that the only version of the local handbook available to both staff and detainees is the 2016 version (staff confirmed a March 2018 edition is the most current version). Staff informed ODO the facility does not have an established procedure in place for immediately communicating revisions of the handbook to staff and detainees (**Deficiency DH-2<sup>30</sup>**). Additionally, ERO distributes the 2013 version of the ICE National Detainee Handbook but only upon request—the most recent version is dated April 2016 (**Deficiency DH-3<sup>31</sup>**).

New officers receive a flash drive, which includes a copy of the local handbook within three days of their entrance on duty; however, not all staff members who have contact with detainees receive a copy of the local handbook (**Deficiency DH-4<sup>32</sup>**). In addition, staff members do not receive training focused on its contents (**Deficiency DH-5<sup>33</sup>**).

MCCF has not established a committee responsible for revising the detainee handbook annually or as the need arises (**Deficiency DH-6<sup>34</sup>**), instead this responsibility is assigned to a staff member.

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Standard, Detainee Grievance Procedures, Section (III)(C).

<sup>29</sup> “The overview will briefly describe individual programs and services and associated rules. Among others, these include recreation, visitation, education, voluntary work, telephone use, correspondence, library use and the commissary/canteen. The overview will also cover medical policy (sick call); facility-issued items, e.g., clothing, bedding, etc.; access to personal property; and meal service.” See ICE NDS 2000, Standard, Detainee Handbook, Section (III)(B).

<sup>30</sup> “The handbook will not be immediately reprinted to incorporate every revision. The OIC will instead establish procedures for immediately communicating such revisions to staff and detainees: posting copies of the changes on bulletin boards in housing units and other prominent areas; informing new arrivals during orientation process; distributing a memorandum to staff, and so forth.” See ICE NDS 2000, Standard, Detainee Handbook, Section (III)(H). **This is a Repeat Deficiency.**

<sup>31</sup> “Please distribute the new ICE National Detainee Handbook to all those in your area of responsibility that address detainee issues and to all detention facilities for immediate distribution to all ICE detainees.” See *NDS Change Notice*—National Detention Standards ICE National Detainee Handbook Standard, dated November 2, 2007.

<sup>32</sup> “The OIC will provide a copy of the handbook to every staff member who has contact with detainees.” See ICE NDS 2000, Standard, Detainee Handbook, Section (III)(G). **This is a Repeat Deficiency.**

<sup>33</sup> “The OIC will provide a copy of the handbook to every staff member who has contact with detainees. These staff members will also receive training focused on its contents.” See ICE NDS 2000, Standard, Detainee Handbook, Section (III)(G). **This is a Repeat Deficiency.**

<sup>34</sup> “An appointed committee will conduct annual reviews and revisions by facility department heads at the OIC.” See ICE NDS 2000, Standard, Detainee Handbook, Section (III)(I). **This is a Repeat Deficiency.**

## FOOD SERVICE (FS)

There is a detailed sanitation inspection program in place with clean-as-you-go procedures fully posted throughout the kitchen area; however, the overall sanitation of the kitchen does not meet acceptable standards. Surfaces throughout food service areas were sticky, and ODO observed food particles on them. The hood over the steam pot, stainless steel surfaces, handwashing sink, ice machine, carts used to transport satellite trays, and floors require additional cleaning (**Deficiency FS-1<sup>35</sup>**) and trash containers did not have lids (**Deficiency FS-2<sup>36</sup>**). The facility has written procedures for administrative, medical, and/or dietary personnel to conduct weekly inspections of all food service areas; however, ODO found no documentation these inspections are conducted (**Deficiency FS-3<sup>37</sup>**).

## FUNDS AND PERSONAL PROPERTY (F&PP)

ODO found the facility has an inventory process in place, but it does not address audit procedures (**Deficiency F&PP-1<sup>38</sup>**), and ODO found no evidence of any property audits being conducted. At booking, all funds, valuables and property are inventoried, and the inventory documents are entered in JAMN. ODO reviewed the files of all 22 detainees housed at MCCF during the inspection and confirmed each file contained a completed inventory form. Upon release, these inventory forms are compared, and the detainee signs for the receipt of property. However, during booking, the officers do not obtain a forwarding address from detainees (**Deficiency F&PP-2<sup>39</sup>**).

ODO inspected the property storage area and found it was secure, well-lit and ventilated, and is restricted to booking officers and supervisors. Within the property room, there are individual lockers for each detainee; ODO observed that each detainee locker was locked. The lockers are labeled and have two labeled bags: one for general property and one for valuables. ODO found that one valuable bag held a detainee's identification document (**Deficiency F&PP-3<sup>40</sup>**).

ODO's review of the detainee handbook for information on Lost or Damaged Property found it

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<sup>35</sup> "All facilities shall meet the following environmental standards: ...

c. Routinely clean walls, floors and ceilings in all areas. d. Ventilation hoods to prevent grease buildup and wall/ceiling condensation that can drip into food or onto food-contact surfaces. ...

h. To prevent cross-contamination, kitchenware and food-contact surfaces should be washed, rinsed, and sanitized after each use and after any interruption of operations during which contamination could occur."

See ICE NDS 2000, Standard, Food Service, Section (III)(H)(5). **This is a Repeat Deficiency.**

<sup>36</sup> "All facilities shall meet the following environmental standards: ...

j. Garbage and other trash shall be collected and removed as often as possible. The garbage/refuse containers shall have sufficient capacity for the volume, and shall be kept covered cleaned frequently, and insect and rodent proof. The facility shall comply with all applicable regulations (local, state, and federal) on refuse handling and disposal."

See ICE NDS 2000, Standard, Food Service, Section (III)(H)(5). **This is a Repeat Deficiency.**

<sup>37</sup> "The facility shall implement written procedures for the administrative, medical, and/or dietary personnel conducting weekly inspections of all food service areas, including dining, storage, equipment, and food preparation areas." See ICE NDS 2000, Standard, Food Service, Section (III)(H)(13)(a). **This is a Repeat Deficiency.**

<sup>38</sup> "Each facility shall have a written procedure for the inventory and audit of detainee funds, valuables, and personal property." See ICE NDS 2000, Standard, Funds and Personal Property, Section (III)(F). **This is a Repeat Deficiency.**

<sup>39</sup> "Standard operating procedure will include obtaining a forwarding address from every detainee who has personal property that could be lost or forgotten in the facility after the detainee's release, transfer, or removal." See ICE NDS 2000, Standard, Funds and Personal Property, Section (III)(C). **This is a Repeat Deficiency.**

<sup>40</sup> "Identification documents such as passports, birth certificates, etc., will be kept in the detainees A-file. Upon request, staff will provide the detainee a copy of the document, certified by an INS official to be true and correct." See ICE NDS 2000, Standard, Funds and Personal Property, Section (III)(B)(3).

does not notify the detainees of their ability to obtain certified copies of any personal identification documents (i.e., passports, drivers licenses, birth certificates) held by ERO in their A-file (**Deficiency F&PP-4<sup>41</sup>**).

### STAFF-DETAINEE COMMUNICATION (SDC)

MCCF detainees are not restricted from having frequent informal access and interaction with facility staff members and ERO staff. Schedules for ERO visits, occurring [REDACTED], were found posted in all four pods that house detainees. ERO staff sign-in at the front desk of the facility and a log is maintained of their announced and unannounced visits. ODO's review of the sign-in logs showed 25 of 70 entries did not have a sign-out time, nor did it indicate that ERO signed-in for unannounced visits (**Deficiency SDC-1<sup>42</sup>**). Furthermore, ERO and the facility could not provide documentation that there is written policy for these unannounced visits to occur (**Deficiency SDC-2<sup>43</sup>**).

ODO's interview of staff and a review of policy found detainee requests are faxed to the ERO Columbus field office and logged into a facility ICE Detainee request log. However, the logbook did not contain the detainee's A-Number, Nationality, and the staff's response and action (**Deficiency SDC-3<sup>44</sup>**). Although a log exists that keeps track of the requests, MCCF does not have a formal process and/or written policies in place to route, track and record detainee requests to ERO (**Deficiency SDC-4<sup>45</sup>**). ODO found requests are not promptly forwarded to ERO and most requests in the ICE Detainee request log were sent by the facility to ERO more than 72-hours after receipt. Of the 300 requests reviewed by ODO, a majority were not only sent to ERO after the 72-hour period, but sometimes over a month after the detainee submitted the request (**Deficiency SDC-5<sup>46</sup>**).

ODO found none of the detention files reviewed contained copies of ICE detainee requests (**Deficiency SDC-6<sup>47</sup>**). ODO reviewed the facility handbook and determined it does not inform

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<sup>41</sup> "The detainee handbook or equivalent shall notify the detainees of facility policies and procedures concerning personal property, including: ...

2. That, upon request, they will be provided an INS-certified copy of any identity document (passport, birth certificate, etc.) placed in their A-files."

See ICE NDS 2000, Standard, Funds and Personal Property, Section (III)(J)(2). **This is a Repeat Deficiency.**

<sup>42</sup> "Each facility shall develop a method to document the unannounced visits, and ICE will document visits to IGSAs." See ICE NDS 2000, Standard, Staff-Detainee Communication, Section (III)(A)(1).

<sup>43</sup> "Policy and procedures shall be in place to ensure and document that the ICE Officer in Charge (OIC), the Assistant Officer in Charge (AOIC) and designated department heads conduct regular unannounced (not scheduled) visits to the facility's living and activity areas to encourage informal communication between staff and detainees and informally observing living and working conditions." See ICE NDS 2000, Standard, Staff-Detainee Communication, Section (III)(A)(1).

<sup>44</sup> "All requests shall be recorded in a logbook specifically designed for that purpose. The log, at a minimum, shall contain: ...

c. A-number; d. Nationality; f. The date that the request, with staff response and action, is returned to the detainee."

See ICE NDS 2000, Standard, Staff-Detainee Communication, Section (III)(B)(2)(c)(d)(f).

<sup>45</sup> "All facilities that house ICE detainees must have written procedures to route detainee requests to the appropriate ICE official." See ICE NDS 2000, Standard, Staff-Detainee Communication, Section (III)(B).

<sup>46</sup> "The detainee requests shall be forwarded to the ICE office of jurisdiction within 72 hours from receiving the request." See ICE NDS 2000, Standard, Staff-Detainee Communication, Section (III)(B)(1)(b).

<sup>47</sup> "All completed Detainee Requests will be filed in the detainee's detention file and will remain in the detainee's detention file for at least three years." See ICE NDS 2000, Standard, Staff-Detainee Communication, Section (III)(B)(2). **This is a Repeat Deficiency.**



detainees they can submit written questions, requests or concerns to ERO (**Deficiency SDC-7<sup>48</sup>**).

ODO reviewed the ERO Facility Liaison Visit Checklists and found they were completed only 11 times for the six-month period preceding the inspection (**Deficiency SDC-8<sup>49</sup>**). Specifically, there were no documented visits by ERO in January or May, and only one or two visits per month in the remaining timeframe.

ODO found the intake area of the facility as well as all housing pods had an ICE Zero Tolerance for Sexual Abuse and Assault Prevention Poster with the OIG telephone number on it, but not the required DHS OIG Hotline poster. Other common areas that did not have OIG posters were the medical and recreation areas of the facility as well as the law library. Additionally, ODO did not see copies of the DHS OIG Poster in the two main housing units for males and females, and the posters were not posted in the common areas of the facility (**Deficiency SDC-9<sup>50</sup>**).

### TELEPHONE ACCESS (TA)

ODO found detainees are notified of the rules regarding use of the telephones by means of the facility handbook, and notifications posted in a binder at the officers' desk in each housing unit. However, notification of the procedures for requesting an unmonitored call to a court, legal representative, or for the purposes of obtaining legal representation was not included (**Deficiency TA-1<sup>51</sup>**).

ODO noted that when ERO staff inspect the telephones, they conduct random calls to pre-programmed numbers on the pro bono consulate list, and appropriately use the Telephone Serviceability Worksheet; however, ERO staff does not consistently perform these inspections on a weekly basis, as required (**Deficiency TA-2<sup>52</sup>**). ODO interviewed ERO staff and reviewed logs and found detainees were not interviewed regarding telephone issues nor were their written complaints reviewed consistently (**Deficiency TA-3<sup>53</sup>**).

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<sup>48</sup> "The handbook shall state that the detainee has the opportunity to submit written questions, requests, or concerns to ICE staff and the procedures for doing so, including the availability of assistance in preparing the request." See ICE NDS 2000, Standard, Staff-Detainee Communication, Section (III)(B)(3). **This is a Repeat Deficiency.**

<sup>49</sup> "For Inter-Governmental Service Agreements (IGSAs) facilities housing ICE detainees the model protocol should be completed weekly for regularly used facilities and each visit for facilities, which are used intermittently." See Change Notice – National Detention Standards Staff/Detainee Communication Model Protocol, dated June 15, 2017.

<sup>50</sup> "Each Field Office Director shall ensure that the attached document regarding OIG Hotline is conspicuously posted in all units housing ICE detainees." See Change Notice - National Detention Standards Staff-Detainee Communication Standard, dated June 15, 2017).

<sup>51</sup> "It shall also place a notice at each monitored telephone stating: ...

2. the procedure for obtaining an unmonitored call to a court, legal representative, or for the purposes of obtaining legal representation."

See ICE 2000 NDS, Standard, Telephone Access, Section (III)(K)(2).

<sup>52</sup> "Effective immediately, concurrent with staff/detainee communications visits, ICE staff will verify serviceability of all telephones in detainee housing units by conducting random calls to pre-programmed numbers posted on the pro bono/consulate list. ICE staff will also interview a sampling of detainees and review written detainee complaints regarding detainee telephone access. The Field Office Director (FOD) shall ensure that all phones in all applicable facilities are tested on a weekly basis." See Change Notice- National Detention Standard Telephone Access Standard, dated April 4, 2007.

<sup>53</sup> "Effective immediately, concurrent with staff/detainee communications visits, ICE staff will verify serviceability of all telephones in detainee housing units by conducting random calls to pre-programmed numbers posted on the pro bono/consulate list. ICE staff will also interview a sampling of detainees and review written detainee complaints regarding detainee telephone access. The Field Office Director (FOD) shall ensure that all phones in all applicable facilities are tested on a weekly basis." See Change Notice-National Detention Standard Telephone Access Standard,

## **SECURITY AND CONTROL**

### **ENVIRONMENTAL HEALTH AND SAFETY (EH&S)**

ODO's inspection of the facility found conditions were not at an acceptable level of sanitation in several areas including the food service department and health services unit (**Deficiency EH&S-1<sup>54</sup>**). ODO found the health services unit was cluttered with files and paperwork, and its overall sanitation was poor. Sanitation conditions in the Special Management Unit were also poor with dirt and debris on the floors and wax build-up in the corners of the room and at door thresholds.

ODO's assessment of the medical department found sharps are properly inventoried and accounted for. Disposal of bio-hazardous waste is handled through the Mt. Gilead Fire Department. However, ODO found no blood and body fluid clean-up kits readily available (**Deficiency EH&S-2<sup>55</sup>**).

### **SPECIAL MANAGEMENT UNIT (ADMINISTRATIVE SEGREGATION) (SMU-AS)**

ODO observed there were no detainees housed in the SMU at the time of the inspection. ODO's interviews with staff found detainees are provided with access to the law library, visitation and religious services upon request and staff make rounds in the unit every hour in accordance with facility policy; however, ODO was unable to confirm detainees received these privileges/services or were regularly monitored because MCCF does not maintain a permanent log (**Deficiency SMU AS-1<sup>56</sup>**).

ODO's review of documentation found there were nine instances of detainees placed on AS in the year preceding the inspection. ODO found the file for one detainee on AS for 21 days had an incomplete AS order, and all other associated documentation was missing (**Deficiency SMU AS-2<sup>57</sup>**). A file of a second detainee contained a complete written order and report of incident by the reporting officer for engaging in a physical altercation with another detainee; however, there is no further record to indicate the length of stay on AS. Two of the remaining seven records reflected the detainees were placed on AS for a period of 22 and 27 days respectively for threatening staff, and there was no documentation the detainees received a status review within 72 hours after

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dated April 4, 2007.

<sup>54</sup> "Environmental health conditions will be maintained at a level that meets recognized standards of hygiene. The standards include those from the American Correctional Association, the Occupational Safety and Health Administration, the Environmental Protection Agency, the Food and Drug Administration, the National Fire Protection Association's Life Safety Code, and the National Center for Disease Control and Prevention." See ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(R)(1).

<sup>55</sup> "Spills of blood and body fluids will be cleaned up and the surface decontaminated in such a manner as to minimize the possibility of workers becoming exposed to infectious organisms, including HIV and HBV. A suitable cleanup kit will be maintained for use in cases of spills of blood and body fluids. Cleanup kits may be obtained from commercial sources, or kits may be put together by INS HSD staff or leading health care provider." See ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(R)(3).

<sup>56</sup> "A permanent log will be maintained in the SMU. The log will record all activities concerning the SMU detainee, e.g. meals served, recreation, visitors, etc." See ICE NDS 2000, Standard, Special Management Unit, Administrative Segregation, Section (III)(E). **This is a Repeat Deficiency.**

<sup>57</sup> "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 impossible. A copy of the written 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).



placement, and every seven days for the first month (**Deficiency SMU AS-3<sup>58</sup>**).

### **SPECIAL MANAGEMENT UNIT (DISCIPLINARY SEGREGATION) (SMU-DS)**

There were no detainees on DS at the time of inspection. A review of documentation found there were four instances of detainees sanctioned with DS in the year preceding the inspection. ODO was unable to confirm the detainees sanctioned with DS received privileges and services required by the NDS because MCCF does not maintain a permanent log (**Deficiency SMU DS-1<sup>59</sup>**). MCCF does not have written procedures for regular review of detainees in DS, nor are supervisory staff aware they must complete seven-day reviews for detainees placed in DS (**Deficiency SMU DS-2<sup>60</sup>**).

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<sup>58</sup> “All facilities shall implement written procedures for the regular review of all administrative-detention cases, consistent with the procedures specified below. In SPCs/CDFs, 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. ...After seven consecutive days in administrative segregation, the detainee may exercise the right to appeal to the OIC the conclusions and recommendations of any review conducted. The detainee may use any standard form of written communication, e.g., detainee request, to file the appeal.” See ICE NDS 2000, Standard, Special Management Unit, Administrative Segregation, Section (III)(C).

<sup>59</sup> “A permanent log will be maintained in the SMU. The log will not [*sic*] all activities concerning the SMU detainees, e.g. meals served, recreation, visitors, etc.” See ICE NDS 2000, Standard, Special Management Unit, Disciplinary Segregation, Section III(E).

<sup>60</sup> “All facilities shall implement written procedures for the regular review of all disciplinary segregation cases, consistent with the procedures specified below.

1. The Supervisory Detention Enforcement Officer (SDEO) shall review the status of a detainee in disciplinary segregation every seven days to determine whether the detainee:
  - a. abides by all rules and regulations; and,
  - b. is provided showers, meals, recreation, and other basic living standards, in accordance with section III.D., below. The weekly review(s) will include an interview with the detainee. The SDEO shall document his/her findings after every review, by completing a Disciplinary Segregation Review Form (I-887).
2. The SDEO may recommend the detainee’s early release from the SMU upon finding that time in disciplinary segregation is no longer necessary to regulate the detainee’s behavior.
3. An early-release recommendation must have OIC approval before the detainee can be returned to the general population.
4. The SDEO may shorten, but not extend, the original sanction.
5. All review documents shall be placed in the detainee’s detention file.
6. 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).

## USE OF FORCE (UOF)

ODO's review of MCCF policies showed staff are directed to attempt to gain the voluntary cooperation of a detainee, use only the amount of force necessary to gain control, and that excessive force shall not be used. However, MCCF policy does not make any distinction between immediate and calculated UOF. [REDACTED]

[REDACTED]  
(Deficiency UOF-1<sup>61</sup>).

ODO observed security cameras with live video recording capabilities positioned throughout the facility. [REDACTED] (Deficiency UOF-2<sup>62</sup>). Through staff interviews, ODO determined the security cameras, which [REDACTED]

MCCF detention officers attend the corrections academy and, upon completion, are certified by the state of Ohio. All staff must attend refresher training in defensive tactics annually. The Captain and Corporal reported staff are trained by a Road Deputy in the use of [REDACTED] and are recertified every year. However, training records are kept by the Road Deputy who was on leave; consequently, ODO was unable to verify the training was provided (Deficiency UOF-3<sup>63</sup>).

Through interviews, ODO noted three UOF incidents in the year preceding the inspection. Each involved immediate UOF and review of documentation confirmed none called for application of calculated UOF techniques. The files of the three incidents contained detailed incident reports from all staff involved. Although facility policy requires examination by medical personnel as soon as possible after force has been used, there was no documentation of medical evaluation following one of the three UOF incidents (Deficiency UOF-4<sup>64</sup>).

ODO found facility policy requires that UOF be investigated and evaluated by a supervisor within 24 hours of the incident. Although facility supervisors sign each UOF form, there is no documentation of after-action review to assess the reasonableness of actions taken (Deficiency UOF-5<sup>65</sup>).

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<sup>61</sup> "When a detainee must be forcibly restrained during a calculated use of force, the use-of-force team technique shall apply." See ICE NDS 2000, Standard Use of Force, Section (III)(A)(4). **This is a Repeat Deficiency.**

<sup>62</sup> "INS requires that all incidents of use-of-force be documented and forwarded to INS for review. The videotaping of all calculated use-of-force is required." See ICE NDS 2000, Standard, Use-of-Force, Section (III)(A)(2)(b). **This is a Repeat Deficiency.**

<sup>63</sup> "To control a situation involving an aggressive detainee, all staff must be made aware of their responsibilities through ongoing training. All detention personnel shall also be trained in approved methods of self-defense, confrontation avoidance techniques, and the use of force to control detainees. Staff will be made aware of prohibited use-of-force acts and techniques. Specialized training shall be required for certain non-lethal equipment e.g., [REDACTED]. Staff members will receive annual training in confrontation avoidance procedures and forced cell-move techniques. Each staff member participating in a calculated use-of-force cell move must have documentation of annual training in these areas." See NDS 2000, Use-of-Force, Section (III)(O).

<sup>64</sup> "After any use-of-force or forcible application of restraints, medical personnel shall examine the detainee, immediately treating any injuries. The medical services provided shall be documented." See ICE NDS 2000, Standard, Use-of-Force, Section (III)(G)(2). **This is a Repeat Deficiency.**

<sup>65</sup> "Written procedures shall govern the use-of-force incident review, whether calculated or immediate, and the application of restraints. The review is to assess the reasonableness of the actions taken (force proportional to the detainee's actions), etc. IGSA will pattern their incident review process after INS. INS shall review and approve all

## CONCLUSION

During this inspection ODO, reviewed the facility's compliance with 15 standards under NDS 2000 and found the facility in compliance with only two standards. ODO found 57 deficiencies in the remaining 13 standards—this includes 25 repeat deficiencies. While the total number of deficiencies is concerning, ODO notes many of the repeat deficiencies are administrative in nature, resulting from the facility's lack of documentation and poor records management practices.

In addition to the large number of deficiencies cited, ODO identified several **Areas of Concern**. The failure of staff to use interpreters during the intake process, the lack of a detailed and effective classification system, and inadequate grievance pose significant risk to detainee safety. Also, during interviews, several detainees described county inmates as intimidating the detainee population. Inadequate classification controls and poor records management may only serve to exacerbate these problems in the future. Finally, facility staff do not regularly announce themselves when entering opposite gender housing units. Although the facility is not contractually obligated to comply with ICE's Sexual Assault and Abuse Prevention and Intervention standard, ODO informed staff that 6 CFR Part 115, Standards to Prevent, Detect, and Respond to Sexual Abuse and Assault in Confinement Facilities (Final Rule dated March 7, 2014), requires officers of the opposite sex entering housing units to announce their presence. ODO recommends the local ERO field office work with the facility to resolve all outstanding deficiencies and these areas of concern in accordance with contractual obligations.

Compliance Inspection Results Compared	FY 2015 (NDS 2000)	FY 2018 (NDS 2000)
Standards Reviewed	15	15
Deficient Standards	15	13
Overall Number of Deficiencies	55	57
Deficient Priority Components	N/A	N/A
Corrective Action	3	1

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After Action Review procedures.” See ICE NDS 2000, Standard, Use of Force, Section (III)(K). **This is a Repeat Deficiency.**