



U.S. Department of Homeland Security

Immigration and Customs Enforcement

Office of Professional Responsibility

Inspections and Detention Oversight Division

Washington, DC 20536-5501

**Office of Detention Oversight
Compliance Inspection**

Enforcement and Removal Operations

ERO Philadelphia Field Office

Pike County Correctional Facility

Lords Valley, PA

March 1-3, 2016

**COMPLIANCE INSPECTION
for the
PIKE COUNTY CORRECTIONAL FACILITY
Lords Valley, Pennsylvania**

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EXECUTIVE SUMMARY

The Office of Detention Oversight (ODO) conducted a compliance inspection of the Pike County Correctional Facility (PCCF) in Lords Valley, Pennsylvania, from March 1 to 3, 2016.¹ PCCF opened in December 1995 and is owned by Pike County, PA and operated by the Pike County Sheriff Department. The Office of Enforcement and Removal Operations (ERO) began housing detainees at PCCF in January 1996 pursuant to an Intergovernmental Service Agreement (IGSA), under the oversight of ERO’s Field Office Director (FOD) in Philadelphia.

ERO staff members are assigned to the facility. A Detention Services Manager is assigned part-time to the facility. A Warden is responsible for oversight of daily facility operations and is supported by (b) (7) personnel. The PrimeCare Inc. provides medical care and PCCF provides food services. The facility holds no accreditations at the time of inspection.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity ²	200
Average ICE Detainee Population ³	145
Male Detainee Population (as of 03/01/2016)	142
Female Detainee Population (as of 03/01/2016)	1

OVERALL FINDINGS

In September 2013, ODO conducted an inspection of the PCCF under the Performance-Based National Detention Standards (PBNDS) 2008. ODO reviewed the facility’s compliance with 23 standards and found the facility compliant with 11 standards. ODO found 22 deficiencies in the remaining 12 standards, five of which were priority components.

Inspection Results Compared	FY 2013 (PBNDS 2008)	FY2016 (PBNDS 2008)
Standards Reviewed	23	15
Deficient Standards	12	3
Overall Number of Deficiencies	22	9
Deficient Priority Components	5	4
Corrective Actions Initiated	N/A	3

In FY2016, ODO conducted an inspection of the PCCF under the Performance-Based National Detention Standards (PBNDS) 2008. ODO reviewed the facility’s compliance with 15 standards and found the facility compliant with 12 standards. ODO found nine deficiencies in the remaining three standards, four of which were priority components. Finally, ODO identified three opportunities where the facility initiated corrective action.⁴

¹ Male and female detainees with low, medium, and high security classification levels are detained at the facility for longer than 72 hours.

² Data Source: ERO Facility List Report as of February 29, 2016.

³ *Ibid.*

⁴ Corrective actions, where immediately implemented, best practices and ODO recommendations, as applicable, have been identified in the Inspection Findings section and annotated with a “C”, “BP” or “R”, respectively.

FINDINGS BY PBNDS 2008 MAJOR CATEGORIES

PBNDS 2008 STANDARDS INSPECTED ⁵	DEFICIENCIES
Part 1 – Safety	
1.2 - Environmental Health and Safety	2
Part 2 – Security	
2.1 - Admission and Release	0
2.2 - Classification System	0
2.5 - Funds and Personal Property	0
2.11 - Sexual Abuse and Assault Prevention and Intervention	0
2.12 - Special Management Units	0
2.13 - Staff-Detainee Communication	0
2.15 - Use of Force and Restraints	0
Sub-Total	2
Part 4 – Care	
4.1 - Food Service	0
4.3 - Medical Care	6
4.6 - Suicide Prevention and Intervention	0
Sub-Total	6
Part 5 – Activities	
5.6 - Telephone Access	0
Sub-Total	0
Part 6 – Justice	
6.1 - Detainee Handbook	0
6.2 - Grievance System	0
6.3 - Law Libraries and Legal Material	1
Sub-Total	1
Total Deficiencies	9

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

INSPECTION PROCESS

Every fiscal year, the Office of Detention Oversight (ODO), a unit within U.S. Immigration and Customs Enforcement's (ICE) Office of Professional Responsibility (OPR), conducts compliance inspections at detention facilities in which detainees are accommodated for periods in excess of 72 hours and with an average daily population greater than ten to determine compliance with the ICE National Detention Standards (NDS) 2000, or the Performance-Based National Detention Standards (PBNDS) 2008 or 2011, as applicable.

During the compliance inspection, ODO reviews each facility's compliance with those detention standards that directly affect detainee health, safety, and/or well-being.⁶ Any violation of written policy specifically linked to ICE detention standards, ICE policies, or operational procedures that ODO identifies is noted as a deficiency. ODO also highlights any deficiencies found involving those standards that ICE has designated under either the PBNDS 2008 or 2011, to be "priority components."⁷ Priority components have been selected from across a range of detention standards based on critical importance, given their impact on facility security and/or the health and safety, legal rights, and quality of life of detainees in ICE custody.

Immediately following an inspection, ODO hosts a closeout briefing in person with both facility and ERO field office management to discuss their preliminary findings, which are summarized and provided to ERO in a preliminary findings report. Thereafter, ODO provides ERO with a final compliance inspection report to: (i) assist ERO in working with the facility to develop a corrective action plan to resolve identified deficiencies; and (ii) provide senior ICE and ERO leadership with an independent assessment of the overall state of ICE detention facilities. The reports enable senior agency leadership to make decisions on the most appropriate actions for individual detention facilities nationwide.

⁶ ODO reviews the facility's compliance with selected standards in their entirety.

⁷ Priority components have not been identified for the NDS.

DETAINEE RELATIONS

ODO interviewed 28 detainees, each of whom volunteered to participate. None of the detainees made allegations of mistreatment or discrimination. The majority of detainees reported being satisfied with facility services, with the exception of the allegations below:

- *Admission and Release:* Seven detainees alleged they were issued stained undergarments during admission.
 - o Action Taken: ODO interviewed facility staff, reviewed policy and personally checked the condition of clothing during processing and found the issued items to be clean and stain free but not new. Facility policy states that if a detainee's clothing becomes torn or stained it is the detainee's responsibility to submit a request for the clothing to be exchanged on a one for one item basis. This exchange process is accomplished daily at the facility, as laundry is done seven days per week. None of the detainee's detention files contained request forms to exchange clothing; however, in response to ODO's inquiry, the facility offered the detainees the opportunity to exchange their clothing per facility policy.

- *Sexual Abuse and Assault Prevention and Intervention:* Detainee alleged verbal abuse in the form of sexual harassment from a facility staff member during an interview with ODO staff.
 - o Action Taken: ODO immediately reported this allegation to facility staff. Facility staff initiated an investigation during the inspection, reported this allegation to ERO staff, who subsequently reported this allegation to the Joint Intake Center.

- *Medical Care:* Detainee alleged that while at the facility he received improper treatment for an inflamed retina. He further alleged that since his initial treatment in January 2016 and his subsequent visit to the Emergency Room (ER) in February 2016, he has lost eyesight in the eye.
 - o Action Taken: ODO reviewed the detainees' medical file and found on February 9, 2016 medical services staff sent the detainee to the ER, concerned about the detainee's complaint of vision loss. He was given eye drops and sent back, with an ophthalmology follow-up appointment scheduled for the next day. The ophthalmologist diagnosed "inflamed right eye" and released him on eye drops, and the detainee raised no further complaints about his eye during the rest of the inspection.

- *Medical Care:* Detainee alleged medication is withheld from him in retaliatory fashion when he misses medical calls.
 - o Action Taken: ODO reviewed the detainee's medical record and found that although the detainee did need diabetes medication, he did not appear for his pill call time and thus did not receive the medication. Medical services subsequently instructed the detainee on the medication distribution policy, explaining that he is supposed to receive his oral diabetic medication at specific time intervals to allow sufficient time before the next dose can be administered.

- *Medical Care:* Detainee alleged he needs a special diet to resolve a facial outbreak he experienced upon his arrival at the facility. The detainee also alleged he has an ingrown toenail that needs to be removed.
 - o Action Taken: ODO spoke to medical staff regarding the detainee's request for a special diet. Medical staff stated that special diets are only ordered for chronic care patients and those with allergies.

Medical staff evaluated the detainee in the clinic on March 1, 2016 and found he did not have a chronic medical condition or allergies that required a special diet. Medical staff also evaluated the detainee's ingrown toenail, on March 1, 2016 and prescribed him daily betadine foot soaks for one week. The detainee was scheduled for a follow-up appointment with the provider on March 10, 2016.

- *Medical Care:* Detainee alleged that his chipped tooth is not being taken care of by medical services.
 - o Action Taken: ODO reviewed the medical file and found on Christmas Eve the detainee fell face first into his bunk, pushing his teeth into his gum. He was transferred to emergency room care where his teeth were pulled down, but one tooth was chipped. Detainee was evaluated and informed by the facility dentist on January 8, 2016, who applied a temporary filling into the chipped area and advised the detainee that, although one was needed, he cannot do root canals.

The Health Service Administrator (HSA) consulted with on-site ERO staff to identify a dentist in New Jersey who could take the case. The HSA submitted a request to ICE Health Service Corps (IHSC) for approval for a dental referral and the name of the dentist. Medical services subsequently informed the detainee of his dental appointment with the outside dentist.

- *Medical Care:* Detainee alleged the facility told him he does not qualify for liver treatment.
 - o Action Taken: ODO reviewed the detainee's files and interviewed medical staff. On March 1, 2016, the facility conducted a comprehensive chemistry panel that shows the liver enzyme levels did not meet criteria for hepatitis treatment;

however, the detainee did receive additional testing on March 16th and more laboratory work was conducted on March 22, 2016⁸.

- *Medical Care:* Detainee alleged the facility has not addressed his dental issues.
 - o Action Taken: ODO interviewed medical staff and reviewed the detainee's medical file. The facility received the detainee's first dental service sick call request on February 23, 2015. The detainee was scheduled to see the dentist on March 4, 2016.

- *Medical Care:* Detainee alleged the facility has not addressed his hand fracture.
 - o Action Taken: ODO interviewed the medical staff and reviewed the detainee's medical file. On January 5, 2016, the facility physician evaluated the detainee for complaints of right hip and right hand pain related to a sports injury that occurred years ago. Medical services informed the detainee he was scheduled for an orthopedic consult for March 28, 2016⁹.

- *Medical Care:* Detainee alleged he was approved for a partial knee replacement, but the facility has not addressed his request to see a specialist.
 - o Action Taken: ODO interviewed medical staff and reviewed the detainee's medical file. ICE did not tell the detainee he was approved for knee replacement. On October 12, 2015, the facility medical doctor evaluated the detainee for complaints of knee pain. The detainee was provided a neoprene knee sleeve for support. The physician assistant ordered x-rays of the knee on February 29, 2016, and the detainee was subsequently seen by the physician assistant on March 17, 2016. The detainee was offered assistive devices, i.e. a cane, which the detainee refused. Medical services scheduled the detainee for an orthopedic consult in April 2016. The detainee was instructed to submit a sick call slip if he experienced further knee pain.

- *Medical Care:* Detainee alleged he endured two heart attacks, and the facility has not addressed his cardiomyopathy. He also alleged he has leg problems. The detainee said he fears he will die at the facility as a result of poor medical treatment.
 - o Action Taken: ODO reviewed the detainee's medical file and interviewed medical staff. On November 5, 2015, chronic care clinics evaluated his history of cardiomyopathy. The HSA reported that treatment authorization requests were submitted to IHSC to refer the detainee to an outside specialist who was approved by IHSC on December 16, 2015, and an appointment was scheduled for December 31, 2015. However, just prior to the appointment, the cardiologist

⁸ Medical services provided detainee his blood work results on March 23, 2016.

⁹ The detainee was released from the facility on March 7, 2016.

cancelled the appointment due to personal reasons. The next available appointment with this cardiologist was in March 2016. As a result, the HSA arranged an appointment with an alternative provider for February 5, 2016. However, the detainee was transferred to York County Prison in York, Pennsylvania on January 14, 2016 and was returned to this facility on February 11, 2016, six days after the February 5th appointment. ODO contacted IHSC on March 9, 2016 and was informed by IHSC that the detainee is stable and is scheduled for a cardiology consultation on March 30, 2016.

- *Medical Care:* Detainee requesting a follow-up appointment regarding his neck x-rays.
 - o Action Taken: ODO was informed by medical staff that the x-ray was taken February 29, 2016 and results of the x-ray will be reviewed and followed-up with the detainee on March 3, 2016.

- *Detainee Handbook:* Detainee alleged he did not receive a copy of the detainee handbook upon admittance.
 - o Action Taken: ODO reviewed the detainee's file and obtained a copy of a detainee handbook receipt. The receipt was signed and dated by the detainee during admission.

- *Grievance System:* Detainee alleged facility staff responded, in an untimely manner, close to fourteen days after he filed a grievance for opened legal mail.
 - o Action Taken: ODO reviewed the detainee's file and found a grievance filed on January 5, 2016 for opened legal mail. The report stated the envelope was not marked as legal mail, did not have a return address and had a suspicious substance on it. On January 6, 2016, facility staff filed an informal inmate grievance resolution for the incident. On January 13, 2016, a second grievance was filed for the same incident by the detainee. The facility responded the same day with the same incident details and denied the detainee's grievance. On February 15, 2016 an appeal was filed by the detainee. The appeal was denied by the facility the same day.

- *Law Libraries and Legal Material:* Detainee alleged staff delivered his legal mail opened.
 - o Action Taken: ODO reviewed the detainee detention file and found a grievance was filed for opened legal mail on January 16, 2016; the facility responded to the grievance on January 18, 2016. ODO concluded the facility searched the mail for contraband because the envelope was unmarked and did not have a return address.

INSPECTION FINDINGS

SAFETY

ENVIRONMENTAL HEALTH AND SAFETY (EH&S)

Facility is not conducting quarterly fire drills for all locations (**Deficiency EH&S-1¹⁰**).

Corrective Action: The facility initiated corrective action during the inspection by modifying its policy requiring that fire drills be conducted in accordance with the standard (C-1).

Facility is not evacuating all detainees during their quarterly fire drills for all locations (**Deficiency EH&S-2¹¹**).

CARE

MEDICAL CARE (MC)

The clinical medical authority does not consistently review intake screening forms to assess priority for detainee treatment (**Deficiency MC-1¹²**).

Facility does not consistently perform intake tuberculosis screening by means of a chest x-ray or tuberculin skin test within 12 hours for new arrivals (**Deficiency MC-2¹³**).

Facility is not performing initial dental screening exams (**Deficiency MC-3¹⁴**).

Corrective Action: The facility initiated corrective action during the inspection by adding a section to the electronic medical record to prompt medical staff to perform initial dental screening exams (C-2).

Facility does not consistently document medication administered to detainees (**Deficiency MC-4¹⁵**).

¹⁰ “Fire drills shall be conducted and documented at least quarterly in all facility locations including administrative areas.” See ICE PBNDS 2008, Standard, Environmental Health and Safety, Section (VII)(D).

¹¹ “Detainees shall be evacuated during fire drills, except: in areas where security would be jeopardized; in medical areas where patient health could be jeopardized; or in individual cases when evacuation of patients is logistically not feasible. Staff shall simulate drills in areas where detainees are not evacuated.” See ICE PBNDS 2008, Standard, Environmental Health and Safety, Section (VII)(D)(2).

¹² “Initial medical, dental, and mental health screening shall be done within 12 hours of arrival by a health care provider or a detention officer specially trained to perform this function.” See ICE PBNDS 2008, Standard, Medical Care, Section (V)(I)(1).” **This is a priority component.**

¹³ “All new arrivals shall receive TB screening within 12 hours of intake and using methods in accordance with CDC guidelines....” See PBNDS 2008, Standard, Medical Care, Section (V)(C)(2).” **This is a priority component.**

¹⁴ “An initial dental screening exam shall be performed within 14 days of the detainee’s arrival.” See ICE PBNDS 2008, Standard, Medical Care, Section (V)(M).

¹⁵ “Written records of all medication given to detainees shall be maintained.” See ICE PBNDS 2008, Standard, Medical Care, Section (V)(P).

Not all detention staff receive cardiopulmonary (CPR), automated external defibrillator (AED), and emergency first aid training annually (**Deficiency MC-5¹⁶**).

Facility failed to consistently obtain signed informed consent forms for the administration of psychotropic medication (**Deficiency MC-6¹⁷**).

Corrective Action: The facility initiated corrective action during the inspection by having their medical care service provider, PrimeCare, Inc., develop and implement a specific consent form to document this treatment (**C-3**).

JUSTICE

LAW LIBRARIES AND LEGAL MATERIAL (LL&LM)

ODO observed the Law Library Usage and Legal Material policies and procedures are not posted in the Law Library (**Deficiency LL&LM-1¹⁸**).

¹⁶ “All detention staff shall receive cardio pulmonary resuscitation (CPR, AED), and emergency first aid training annually....” See ICE PBNDS 2008, Standard, Medical Care, Section (V)(O). **This is a priority component.**

¹⁷ “For any additional procedure, a separate documented informed consent will be obtained.” See ICE PBNDS 2008, Standard, Medical Care, Section (V)(T). **This is a priority component.**

¹⁸ “These policies and procedures shall also be posted in the law library along with a list of the law library’s holdings.” See ICE PBNDS 2008, Standard, Law Libraries and Legal Material, Section (V)(O).