



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
Compliance Inspection**

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

**Seneca County Jail
Tiffin, Ohio**

October 25-27, 2022

COMPLIANCE INSPECTION
of the
SENECA COUNTY JAIL
Tiffin, Ohio

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COMPLIANCE INSPECTION TEAM MEMBERS



Team Lead	ODO
Inspections and Compliance Specialist	ODO
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FACILITY OVERVIEW

The U.S. Immigration and Customs Enforcement (ICE) Office of Professional Responsibility (OPR) Office of Detention Oversight (ODO) conducted a compliance inspection of the Seneca County Jail (SCJ) in Tiffin, Ohio, from October 25 to 27, 2022.¹ The facility opened in 1994 and is owned and operated by Seneca County. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at SCJ in 1996 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 no staff assigned to the facility. An SCJ facility administrator handles daily operations and manages [REDACTED] support personnel. Seneca County provides food services and medical care, and Stellar Services 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 October 25, 2022)	[REDACTED]
Adult Female Population (as of October 25, 2022)	[REDACTED]

During its last inspection, in Fiscal Year (FY) 2022, ODO found seven deficiencies in the following areas: Environmental Health and Safety (5) and Medical Care (2).

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

² Data Source: ERO Facility List as of October 24, 2022.

³ *Ibid.*

COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population greater than 10, and where detainees are housed for 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.⁴

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

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

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

FINDINGS BY NATIONAL DETENTION STANDARDS 2019 MAJOR CATEGORIES

NDS 2019 Standards Inspected ^{5,6}	Deficiencies
Part 1 - Safety	
Environmental Health and Safety	0
Transportation by Land	1
Sub-Total	1
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
Special Management Units	0
Sexual Abuse and Assault Prevention and Intervention	0
Sub-Total	0
Part 3 - Order	
Disciplinary System	0
Sub-Total	0
Part 4 - Care	
Food Service	0
Medical Care	0
Significant Self-Harm and Suicide Prevention and Intervention	0
Terminal Illness and Death	0
Disability Identification, Assessment, and Accommodation	1
Sub-Total	1
Part 5 - Activities	
Correspondence and Other Mail	2
Recreation	1
Visitation	0
Sub-Total	3
Part 6 - Justice	
Detainee Handbook	0
Sub-Total	0
Total Deficiencies	5

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

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

DETAINEE RELATIONS

ODO interviewed 22 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. Most detainees reported satisfaction with facility services except for the concerns listed below.

Law Libraries and Legal Material: One detainee stated he represented himself in legal proceedings and needed more access to the law library, but the facility closed the law library on weekends and whenever court was in session.

- Action Taken: ODO reviewed the facility's law library logs, interviewed facility staff, and found the law library operates Monday through Friday, 8 a.m. to 10:30 a.m. and 12 p.m. to 2:30 p.m., with additional time on the weekend upon detainee request. ODO found the law library collocated in the same room as the court and observed law library operations. ODO reviewed law library requests and found no requests nor grievances from the detainee. Facility staff advised the detainee to submit requests for additional law library time through the electronic request system.

Personal Hygiene: Eight detainees in housing unit H stated they had to share 12 jackets among all detainees during cold weather recreation. The detainees also stated the jackets had not been washed in over a month and were kept on the floor beside the officer's desk.

- Action Taken: ODO toured the facility, interviewed facility staff, and found the facility maintained a sufficient quantity of jackets for issuance to detainees who chose outdoor recreation during cold weather. Facility staff conducted a jacket inventory during the inspection, which showed the facility had a total of 118 jackets available for detainee use. Specifically, 29 jackets in unit H, 30 in the general recreation yard, and an additional 59 in storage. SCJ staff acknowledged some jackets were old and in need of repair but confirmed facility staff laundered all jackets weekly. Additionally, ODO found SCJ recently completed renovations that required a temporary removal of jacket storage hooks. ODO confirmed completion of renovations on October 26, 2022, and staff returned and hung all jackets on storage hooks.

COMPLIANCE INSPECTION FINDINGS

SAFETY

TRANSPORTATION BY LAND (TL)

ODO reviewed facility TL policies, interviewed ERO Detroit staff and SCJ transport officers, observed the transport office, and found the facility did not develop nor post guidelines for locating an overdue vehicle (**Deficiency TL-29**⁷).

⁷ "Each office will develop and post written guidelines for locating an overdue vehicle." See ICE NDS 2019, Standard, Transportation by Land, Section (II)(K).

CARE

DISABILITY IDENTIFICATION, ASSESSMENT, AND ACCOMMODATION (DIAA)

ODO reviewed the facility's DIAA policy and [REDACTED] detainee detention files, interviewed facility staff, and found the facility did not notify or inform 1 Mandarin-speaking detainee of the facility's disability accommodations policy in a language and manner the detainee could understand (**Deficiency DIAA-50⁸**).

Corrective Action: On October 25, 2022, the assistant jail administrator issued a staff-wide email instructing all staff to direct all non-English/Spanish speaking detainees to the attention of management and management will make translation/interpretation accommodations of handbooks and other orientation documents (**C-1**).

ACTIVITIES

CORRESPONDENCE AND OTHER MAIL (COM)

ODO reviewed the facility's mail and email correspondence policy, interviewed facility leadership, and found the facility did not conduct the inspection of special correspondence for contraband in the presence of detainees. Specifically, ODO found the facility opened all incoming correspondence without detainees present due to attempted security breaches via incoming legal mail (**Deficiency COM-19⁹**).

ODO reviewed the facility's mail and email correspondence policy, interviewed facility leadership, and found the facility photocopied all incoming correspondence due to attempted security breaches via incoming legal mail (**Deficiency COM-22¹⁰**).

RECREATION (R)

ODO observed facility housing and recreation areas and found no variety of fixed and movable equipment. Specifically, male housing units contained one fixed exercise rack and no movable equipment, and both outdoor and female recreation areas contained neither fixed nor movable exercise equipment (**Deficiency R-8¹¹**).

⁸ "The facility orientation program shall notify and inform detainees about the facility's disability accommodations policy, including their right to request reasonable accommodations and how to make such a request, in a language and/or manner they can understand." See ICE NDS 2019, Standard, Disability Identification, Assessment, and Accommodation, Section (II)(I).

⁹ "All facilities shall implement procedures for inspecting incoming special correspondence for contraband. Any such inspection shall be in the presence of the detainee." See ICE NDS 2019, Standard, Correspondence and Other Mail, Section (II)(E)(2).

¹⁰ "Staff shall neither read nor copy incoming or outgoing special correspondence." See ICE NDS 2019, Standard, Correspondence and Other Mail, Section (II)(E)(2).

¹¹ "Exercise areas shall offer a variety of fixed and movable equipment." See ICE NDS 2019, Standard, Recreation, Section (II)(C)(1).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 19 standards under NDS 2019 and found the facility in compliance with 15 of those standards. ODO found five deficiencies in the remaining four standards. ODO commends facility staff members for their responsiveness 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 SCJ in May 2022.

Compliance Inspection Results Compared	FY 2022 (NDS 2019)	FY 2023 (NDS 2019)
Standards Reviewed	19	19
Deficient Standards	2	4
Overall Number of Deficiencies	7	5
Repeat Deficiencies	0	0
Areas Of Concern	4	0
Corrective Actions	0	1
Facility Rating	Superior	Superior