



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
2023-002-203**

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

**Saint Clair County Jail
Port Huron, Michigan**

September 19-21, 2023

FOLLOW-UP COMPLIANCE INSPECTION
of the
SAINT CLAIR COUNTY JAIL
Port Huron, Michigan

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FOLLOW-UP COMPLIANCE INSPECTION TEAM MEMBERS



Section Chief	ODO
Team Lead	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 follow-up inspection of the Saint Clair County Jail (SCCJ) in Port Huron, Michigan, from September 19 to 21, 2023.¹ This inspection focused on the standards found deficient during ODO’s last inspection of SCCJ from March 28 to 30, 2023. The facility opened in 2005 and is owned and operated by the Saint Clair County Sheriff’s Office. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at SCCJ in 2007 under the oversight of ERO’s Field Office Director in Detroit (ERO Detroit). The facility operates under the National Detention Standards (NDS) 2019.

[REDACTED] An SCCJ jail administrator handles daily facility operations and manages [REDACTED] support personnel. Aramark provides food and commissary services, and YesCare Health provides medical care 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 September 19, 2023)	[REDACTED]
Adult Female Population (as of September 19, 2023)	[REDACTED]

During its last full inspection, in Fiscal Year (FY) 2023, ODO found 19 deficiencies in the following areas: Admission and Release (1); Custody Classification System (1); Detainee Handbook (1); Environmental Health and Safety (2); Medical Care (2); Recreation (1); Sexual Abuse and Assault Prevention and Intervention (8); Transportation by Land (1); and Visitation (2).

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 September 11, 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.⁴

While follow-up inspections are intended to focus on previously identified deficiencies, ODO will conduct a complete review of several core standards, which include but are not limited to Medical Care, Hunger Strikes, Suicide Prevention, Food Service, Environmental Health and Safety, Emergency Plans, Use of Force and Restraints/Use of Physical Control Measures and Restraints, Admission and Release, Classification, and Funds and Personal Property. ODO may decide to conduct a second full inspection of a facility in the same FY based on additional information obtained prior to ODO's arrival on-site. Factors ODO will consider when deciding to conduct a second full inspection will include the total number of deficiencies cited during the first inspection, the number of deficient standards found during the first inspection, the completion status of the first inspection's 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.

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	0
Sub-Total	0
Part 2 – Security	
Admission and Release	0
Custody Classification System	2
Funds and Personal Property	0
Use of Force and Restraints	0
Special Management Units	0
Sexual Abuse and Assault Prevention and Intervention	0
Sub-Total	2
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
Sub-Total	0
Part 5 – Activities	
Recreation	1
Visitation	0
Sub-Total	1
Part 6 – Justice	
Detainee Handbook	0
Sub-Total	0
Total Deficiencies	3

⁵ For greater detail on ODO’s findings, see the *Follow-up Compliance 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 27 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 concern listed below.

Funds and Personal Property: One detainee stated his account balance did not reflect the \$208 check he possessed when he arrived at the facility nor a \$100 check his family deposited on September 18, 2023.

- Action Taken: ODO interviewed a facility lieutenant and found the facility booked the detainee on September 18, 2023, with a \$208 check, pending a bank clearance. The detainee's family deposited \$200 into his account on the same day. The facility lieutenant confirmed it takes time for the funds to become available; however, on September 19, 2023, the lieutenant provided ODO a copy of the detainee's account with an available balance of \$408. On September 20, 2023, ODO followed up with the detainee to ensure he was aware of the available balance.

Medical Care: One detainee stated he has submitted sick call requests for kidney stones and pain in his mouth but received only pain medication and no evaluation by a doctor.

- Action Taken: ODO interviewed the facility health services administrator (HSA), reviewed the detainee's medical file, and found the detainee submitted sick call requests for tooth pain on August 4 and August 29, 2023. On August 4, 2023, medical staff noted visual decay, foul odor, and swelling on both upper and lower sides of his mouth. Medical staff prescribed amoxicillin (875 mg), twice a day, for 7 days, and Motrin (400 mg), twice a day, as needed for pain. ODO found the detainee refused his prescribed amoxicillin in 4 out of 7 days. On August 29, 2023, a nurse practitioner (NP) prescribed Clindamycin (300 mg), three times a day, for 10 days (discontinued after 6 days due to diarrhea), and the detainee refused Motrin for pain. On September 6, 2023, the NP evaluated the detainee and addressed his dental pain. On September 12, 2023, the NP followed up with the detainee and scheduled an appointment with an outside dentist. On September 20, 2023, the outside dentist evaluated the detainee and identified three teeth for extraction, but the detainee refused treatment. The NP evaluated the detainee upon the return from the dentist, and the detainee stated to the NP he did not want his teeth extracted because he was working with a provider for implants and signed a refusal of treatment form. The NP prescribed amoxicillin (875 mg), twice a day, for 10 days and PerioGard (15 ml) at bedtime, as a mouth rinse. The detainee stated kidney pain during his sick call visit on September 6, 2023, and the NP ordered a urine culture, diagnostic lab tests, and an ultrasound of kidneys and abdomen. On September 8, 2023, the NP discussed the lab test results with the detainee and confirmed the detection of small kidney stones on each kidney. On September 12, 2023, the NP, prescribed Flomax (0.4 mg), twice a day, to assist with flushing the kidney stones, and Zofran for nausea (4 mg), twice a day, as needed. On September 15, 2023, the detainee submitted a sick call request for pain, no sleep, and blood in his

urine. The NP evaluated the detainee on the same day and found no blood in the urine after checking with a urine dip stick, and medical staff found a normal spine and no bowel obstructions after taking X-rays. The detainee acknowledged understanding all information.

FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

SECURITY

CUSTODY CLASSIFICATION SYSTEM (CCS)

ODO reviewed █ detainee files and found in █ out of █ files, a supervisor did not review a detainee's classification (**Deficiency CCS-6⁷**).

ODO reviewed █ detainee files and found in █ out of █ files, a supervisor did not review the intake/processing officer's classification file for accuracy and completeness (**Deficiency CCS-10⁸**).

ORDER

DISCIPLINARY SYSTEM (DS)

ODO reviewed the facility's disciplinary policy and found the facility holds detainees in segregation without privileges for 40 to 60 days per incident for serious and major violations exceeding the 30-day limit; however, during ODO's review period, the facility did not have any detainees in segregation past 30 days. As such, ODO noted this as an **Area of Concern**.

CARE

MEDICAL CARE (MC)

ODO reviewed the facility's medical care policy, reviewed █ medical records, and found medical staff documented █ detainee medical records with 17 instances of medication refusals recorded in the medication administration record, which makes the facility compliant with the standard; however, the facility's medical care policy states a refusal form must be signed by each detainee for every medication refusal, which the facility did not have. ODO noted this as an **Area of Concern**.

⁷ "The classification system shall ensure: ...

4. A supervisor will review each detainee's classification."

See ICE NDS 2019, Standard, Custody Classification System, Section (II)(A)(4).

⁸ "A supervisor will review the intake/processing officer's classification file for each detainee for accuracy and completeness." See ICE NDS 2019, Standard, Custody Classification System, Section (II)(B).

ACTIVITIES

RECREATION (R)

ODO observed the facility's exercise areas and found no fixed exercise equipment (**Deficiency R-8⁹**). **This is a repeat deficiency.**

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 16 standards under NDS 2019 and found the facility in compliance with 14 of those standards. ODO found three deficiencies in the remaining two standards. Since SCCJ's last full inspection in March 2023, the facility has shown significant improvement. SCCJ went from 11 deficient standards and 19 deficiencies in March 2023 to 2 deficient standards and 3 deficiencies during this most recent inspection. ODO received a completed UCAP for the full inspection in March 2023, which likely contributed to the facilities increased performance. The corrective action listed on the UCAP for the previously cited Recreation standard deficiency indicates detainees may request moveable equipment to be used in the outdoor recreation yards. However, this does not address the lack of fixed exercise equipment. ODO recommends ERO work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations.

Compliance Inspection Results Compared	FY 2023 Full Inspection (NDS 2019)	FY 2023 Follow-up Inspection (NDS 2019)
Standards Reviewed	19	16
Deficient Standards	9	2
Overall Number of Deficiencies	19	3
Priority Component Deficiencies	0	0
Repeat Deficiencies	5	1
Areas Of Concern	2	2
Corrective Actions	0	0
Facility Rating	Acceptable/Adequate	N/A

⁹ "Exercise areas shall offer a variety of fixed and movable equipment." See ICE NDS 2019, Standard, Recreation, Section (I)(C)(1).