



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 Atlanta Field Office

Stewart Detention Center

Lumpkin, Georgia

June 22–25, 2015

**COMPLIANCE INSPECTION
for the
STEWART DETENTION CENTER
LUMPKIN, GEORGIA**

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EXECUTIVE SUMMARY

The Office of Detention Oversight (ODO) conducted a compliance inspection of the Stewart Detention Center (SDC) in Lumpkin, Georgia, from June 22 to 25, 2015.¹ SDC opened in 2006 and is owned and operated by the Corrections Corporation of America (CCA). Enforcement and Removal Operations (ERO) began housing detainees at SDC in 2006 pursuant to an Intergovernmental Service Agreement (IGSA), under the oversight of ERO’s Field Office Director (FOD) in Atlanta, Georgia.

ERO staff members, including a Detention Service Manager, are assigned to the facility. A CCA Warden is responsible for oversight of daily facility operations and is supported by (b)(7)e personnel. Trinity Food Service provides food services, and the ICE Health Service Corps (IHSC) provides medical services. The facility is accredited by the American Correctional Association.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity ²	2,000
Average ICE Detainee Population ³	1,209
Male Detainee Population (as of 06/23/2015)	1,483
Female Detainee Population	N/A

OVERALL FINDINGS

In May 2013, ODO conducted an inspection of SDC under the 2008 Performance-Based National Detention Standards (PBNDS), reviewing the facility’s compliance with 18 standards and finding the facility compliant with 14 standards. There were a total of six deficiencies in the remaining four standards.

Inspection Results Compared	FY 2013 (PBNDS 2008)	FY2015 (PBNDS 2011)
Standards Reviewed	18	16
Deficient Standards	4	5
Overall Number of Deficiencies	6	10
Deficient Priority Components	3	4
Corrective Actions Initiated	0	1

In June 2015, ODO conducted an inspection of SDC under the PBNDS 2011, reviewing the facility’s compliance with 16 standards and finding the facility compliant with eleven of those standards. ODO found ten deficiencies, one of which was a repeat deficiency⁴, under the remaining five standards; four of those deficiencies relate to priority components.⁵ Finally, ODO identified one opportunity where the facility initiated corrective action during the course of the inspection.⁶

¹ Male 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 June 22, 2015

³ Ibid.

⁴ ODO identified a repeat deficiency from the May 2013 ODO inspection in the Admission and Release standard.

⁵ Deficient priority components were found in the following three standards: Admission and Release (2); Custody Classification System (1); and Food Service (1).

⁶ 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 2011 MAJOR CATEGORIES

PBNDS 2011 STANDARDS INSPECTED ⁷	DEFICIENCIES
Part 1 - Safety	
1.2 - Environmental Health and Safety	0
Sub-Total	0
Part 2 - Security	
2.1 - Admission and Release	4
2.2 - Custody Classification System	1
2.5 - Funds and Personal Property	0
2.11 - Sexual Abuse and Assault Prevention and Intervention	0
2.12 - Special Management Units	3
2.13 - Staff-Detainee Communication	0
2.15 - Use of Force and Restraints	0
Sub-Total	8
Part 4 - Care	
4.1 - Food Service	1
4.3 - Medical Care	0
4.4 - Medical Care (Women)	0
4.6 - Significant Self-Harm and Suicide Prevention and Intervention	0
Sub-Total	1
Part 5 - Activities	
5.6 - Telephone Access	0
Sub-Total	0
Part 6 - Justice	
6.1 - Detainee Handbook	0
6.2 - Grievance System	1
6.3 - Law Libraries and Legal Materials	0
Sub-Total	1
Total Deficiencies	10

⁷ 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 applicable ICE National Detention Standards (NDS) 2000, the Performance-Based National Detention Standards (PBNDS) 2008 or 2011.

During the compliance inspection, ODO reviews each facility's compliance with those detention standards that directly affect detainee health, safety, and/or well-being.⁸ 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 will highlight any deficiencies found involving those standards that ICE has designated with either the PBNDS 2008 or 2011 to be "priority components."⁹ 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.

⁸ ODO reviews the facility's compliance with selected standards in their entirety.

⁹ Priority components have not been identified for the NDS.

DETAINEE RELATIONS

ODO interviewed 37 detainees, who volunteered to participate. None of the detainees made allegations of mistreatment, abuse, or discrimination. The majority of detainees reported being satisfied with facility services, with the exception of the complaints below:

- *Food Service:* A detainee alleged he was diabetic and supposed to receive a medical diet tray.
 - Action Taken: ODO notified medical services about the alleged condition, and medical services provided food service with the diet prescription.
- *Staff-Detainee Communication:* Twenty-one detainees alleged they have not seen or rarely see their deportation officers. Examination of the housing unit logbooks revealed, while ERO signed in for both their scheduled and unscheduled visits, they rarely signed out. ODO was, therefore, unable to determine how long ERO spent conducting staff-detainee communication.
 - Action Taken: Once notified of this issue, the Assistant Field Office Director (AFOD) assigned to the facility immediately implemented a change requiring ERO to sign in and out of the log books during their visits to the housing units to record the amount of time spent with detainees. During the inspection, the AFOD also sent the entire ERO staff to the facility to ensure detainees are aware of their assigned ERO staff member and provide detainees with updated information on their case. Rosters of assigned ERO staff are now posted in each housing pod.
- *Telephone Access:* Eight detainees alleged the telephone rates were excessive.
 - Action Taken: ODO reviewed the telephone rates for the facility and found the rates are in compliance with the revised rate caps for interstate calls from prisons established by the Federal Communications Commission, which took effect on February 11, 2014.

INSPECTION FINDINGS

SECURITY

ADMISSION AND RELEASE (AR)

During an interview with facility staff, ODO was informed detainees are not given the opportunity to shower prior to entering their housing unit (**Deficiency AR-1¹⁰**).

ODO's review of the orientation video found it to be distorted. Additionally, at various points, the audio is mute, and the video freezes and jumps. ODO also learned that the transmitter was not functioning properly in Unit One, D-pod, so detainees could not use their earphones to hear the audio portion (**Deficiency AR-2¹¹**).

ODO found that upon conclusion of the video, housing unit officers did not conduct a question and answer session. During their interviews, the officers even confirmed that question and answer sessions do not routinely occur (**Deficiency AR-3¹²**).

After interviewing staff and ICE/ERO personnel, it was determined the orientation procedures were not approved in advance by the local ERO Field Office (**Deficiency AR-4¹³**).

CUSTODY CLASSIFICATION SYSTEM (CCS)

ODO observed three detainees classified as High eating lunch in the dining room with detainees classified as Low (**Deficiency CCS-1¹⁴**).

SPECIAL MANAGEMENT UNIT (SMU)

Administrative segregation order forms were available in English, only (**Deficiency SMU-1¹⁵**).

¹⁰ "To maintain standards of personal hygiene and to prevent the spread of communicable diseases and other unhealthy conditions within the housing units, where possible, every detainee shall shower before entering his/her assigned unit." See ICE PBNDS 2011, Standard 2.1, Admission and Release, Section (V)(B)(2)(d). **This is a repeat deficiency.**

¹¹ "All facilities shall have a method to provide ICE/ERO detainees an orientation to the facility as soon as practicable, in a language or manner that detainees can understand." See ICE PBNDS 2011, Standard 2.1, Admission and Release, Selection (V)(F). **This is a priority component.**

¹² "Following the orientation, staff shall conduct a question-and-answer session." See ICE PBNDS 2011, Standard 2.1, Admission and Release, Selection (V)(F). **This is a priority component.**

¹³ "Orientation procedures in CDFs and IGSAAs must be approved in advance by the local ICE/ERO Field Office." See ICE PBNDS 2011, Standard 2.1, Admission and Release, Selection (V)(F).

¹⁴ "Low custody detainees may not be comingled with high custody detainees." See ICE PBNDS 2011, Standard 2.2, Custody Classification System, Section (V)(F)(1). **This is a priority component.**

¹⁵ "The administrative segregation order shall be immediately provided to the detainee in a language or manner the detainee can understand, unless delivery would jeopardize the safe, secure, or orderly operation of the facility. All written materials provided to detainees shall generally be translated into Spanish." See ICE PBNDS 2011, Standard 2.12, Special Management Units, Section (V)(A)(2)(e).

Corrective Action: The facility initiated corrective action during the inspection by creating a Spanish version of the administrative segregation order form (C-1).

A review of the hard copy and electronic logs dating back one year prior to the inspection found neither documents provide the date that detainees are released from the SMU (**Deficiency SMU-2**¹⁶).

According to the SMU lieutenant, visitors for detainees assigned to the SMU must wait until general population visitation has concluded. The lieutenant acknowledged that segregated detainees may have their visits canceled if detainees from general population consume the entire time allotted for visitation (**Deficiency SMU-3**¹⁷).

CARE

FOOD SERVICE (FS)

ODO's observation of the process and review of the logs found water temperatures at the pot and pan cleaning station are not recorded as required by the standard (**Deficiency FS-1**¹⁸).

JUSTICE

GRIEVANCE SYSTEM (GS)

ODO reviewed 12 months of grievances, which revealed written or oral responses are not always provided within five days of the receipt of the grievance (**Deficiency GS-1**¹⁹).

¹⁶ "The SMU log shall record the detainee's name, A-number, housing location, date admitted, reasons for admission, status review dates, tentative release date (for detainees in disciplinary segregation), the authorizing official, and date released." See ICE PBNDS 2011, Standard 2.12, Special Management Units, Section (V)(C)(1).

¹⁷ "Segregated detainees may ordinarily use the visiting room during normal visiting hours." See ICE PBNDS 2011, Standard 2.12, Special Management Units, Section (V)(R).

¹⁸ "Staff shall check refrigerator and water temperatures daily and record the results." See ICE PBNDS 2011, Standard 4.1, Food Service, Section (V)(J)(13). **This is a priority component.**

¹⁹ "Detainee shall be provided with a written or oral response within five days of receipt of the grievance." See ICE PBNDS 2011, Standard 6.2, Grievance System, Section (V)(C)(3)(b)(1)(b).