

January 30, 2020

TO: [REDACTED]
Assistant Director for Detention Management

FROM: [REDACTED]
Lead Compliance Inspector
The Nakamoto Group, Inc.

SUBJECT: **Annual Detention Inspection of the DeKalb County Detention Facility**

The Nakamoto Group, Inc. performed an annual inspection for compliance with the ICE National Detention Standards (NDS) of the DeKalb County Detention Facility in Ft. Payne, Alabama, during the period of January 28-30, 2020. This is an IGSA facility.

The inspection was performed under the guidance of [REDACTED], Lead Compliance Inspector. Team members were:

Subject Matter Field	Team Member
Detainee Rights	[REDACTED]
Security	[REDACTED]
Medical Care	[REDACTED]
Safety	[REDACTED]
Medical Care	[REDACTED]

Type of Inspection

This is a scheduled annual inspection which is performed to determine overall compliance with the ICE NDS for Over 72 hour facilities. The facility received a previous rating of Acceptable during the January 2017 inspection.

Inspection Summary

The DeKalb County Detention Facility is currently accredited by:

- The American Correctional Association (ACA) - No
- The National Commission on Correctional Health Care (NCCHC) - No
- The Joint Commission (TJC) - No
- Prison Rape Elimination Act (PREA) - No

Standards Compliance

The following information is a summary of the standards that were reviewed and overall compliance that was determined as a result of the 2019 and 2020 annual inspections:



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2019 Annual Inspection–No Inspection	
Acceptable	N/A
Deficient	N/A
Repeat Deficiency	N/A
Not Applicable	N/A

2020 Annual Inspection	
Acceptable	33
Deficient	4
Repeat Deficiency	0
Not Applicable	2

The inspection team identified eighty-two (82) deficient components in the following twenty-five (25) standards

Admission and Release – 2
Correspondence and Other Mail – 2
Detainee Handbook – 7
Food Service – 2
Funds and Personal Property – 1
Detainee Grievance Procedures – 1
Issuance and Exchange of Clothing, Bedding and Towels – 1
Recreation – 1
Detainee Telephone Access – 4
Visitation – 1
Hunger Strikes – 1
Access to Medical Care – 3
Suicide Prevention and Intervention – 2
Disciplinary Policy – 1
Emergency (Contingency) Plans – 1
Environmental Health and Safety – 22
Hold Rooms in Detention Facilities – 2
Key and Lock Control – 1
Population Counts – 1
Security Inspection – 7
Tool Control – 4
Transportation (Land Transportation) – 2
Staff-Detainee Communications – 6
Detainee Transfer Standard – 2
Sexual Abuse and Assault Prevention and Intervention – 5

Facility Snapshot/Description

The DeKalb County Detention Center is located in Ft. Payne, Alabama, approximately 100 miles southwest of Birmingham. The facility is owned by and operated under the jurisdiction of the DeKalb County Sheriff's Office. The facility was built in 2006 and has a rated [REDACTED]. It currently houses adult female ICE detainees and adult male and female United States Marshals Service detainees and DeKalb County inmates. The facility houses all classification levels. [REDACTED]

The facility is a single structure building that contains all of the housing units and support services. The armory is located in the Sheriff's Office which is located outside the secure perimeter. The perimeter of the building is comprised of security fencing and the exterior walls of the building. It is encircled by a road/path which is patrolled once each twelve-hour shift by an unarmed officer either on foot or in a vehicle. The perimeter is under constant camera surveillance which is monitored by central control officers.



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The eighty surveillance camera network provides watch into all housing units, common areas, and main movement corridors. All movement is escorted. All exterior building doors are alarmed and controlled by central control officers.

There are seven separate housing units in the facility but ICE detainees are confined to just one of them. ICE detainees are housed with non-ICE detainees of compatible classification levels. The ICE housing unit is a two-tier design configured into six eight-bed bays and two four-bed bays resulting in a [REDACTED]. The detainee housing unit does not have direct supervision. It is monitored by surveillance cameras and an assigned roving officer. There is one special management unit (SMU); it is a twenty-bed unit divided into ten two-bed cells. It is the only SMU in the facility and houses male and female detainees from all populations. The SMU has a separate outdoor recreation area.

The ICE detainee housing unit, [REDACTED], only contains two telephones, two urinals, two toilets, two showers (one was not working) and two sinks. The shower/toilet area was filthy. It smelled of sour water, had rust and mold on the side walls and ceiling, and the floors were in need of a deep cleaning. The ICE detainee atmosphere throughout the housing unit displayed a sense of brooding tolerance.

LEP detainees (Spanish and Portuguese) were interviewed using the language line. All had been there just two to four days and had little to no comment about their experience at the facility; however, they felt they should not be housed with county criminals. Detainees stated they felt relatively safe at the facility and have not endured any threats or mistreatment by other detainees or staff. There were no complaints regarding access to legal materials, medical care, or telephone use; and no substantive discontent with the quality/quantity of food. There was one personal hygiene concern raised by one ICE detainee; it was immediately resolved by health care staff. One of only two showers in the detainee housing unit was not working which left [REDACTED] with one shower. This concern was discussed with the maintenance supervisor who stated he was unaware of the problem. Observations indicated facility employees conduct themselves professionally during their interactions with detainees.

ICE detainees do not hold work assignments at the facility. Detainees were witnessed engaging with each other and watching television. The inspection team found the housing unit was maintaining a below average level of sanitation. An inspection of the overall facility, however, revealed sanitation conditions were average. All detainees receive at least one hour of outdoor recreation daily. Detainees were seen participating in family and legal visits.

Food service is provided by Trinity Service Group, Inc. All other services are provided by DeKalb County employees.

The Facility Significant Incident Summary (SIS) was not provided during the inspection.

Areas of Concern/Significant Observations

There were 82 component concerns in 25 standards and four deficient standards discovered during the inspection.

Environmental Health and Safety:

Policy: Each facility will establish a hazardous materials program for the control, handling, storage, and use of flammable, toxic, and caustic materials. This will protect detainees, staff, and visitors, preventing breaches in safety and security. Among other things, the facility will include the identification and labeling of hazardous materials in accordance with applicable regulations, standards and codes (Occupational



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Safety and Health Administration (OSHA), National Fire Protection Association, etc.); will provide warnings of incompatible materials, etc

Finding: The facility does not have a system in place for storing, issuing, and maintaining inventories of hazardous substances/materials. SDS files are not in all areas of the facility where hazardous substances/material are stored and used. The detainee housing unit and shower area was displaying serious sanitation concerns and the unit had an offensive odor. There were no records to show air and water temperatures were maintained within industry standards throughout the past twelve months. There was no training documentation to support employees and non-ICE detainees received advance training on the use, storage and disposal of hazardous substances/materials. There were no procedures or documentation to show the facility adheres to the applicable fire, health and safety codes, standards and regulations. There was no training or credential evidence to support a technically qualified employee has been appointed to conduct fire and safety inspections. There was no record available that suggested fire and safety inspections are completed. The facility does not have an approved fire prevention, control, and evacuation plan. Monthly fire inspections and fire drills are not conducted. There is no sanitation program in place that covers barbering operations. The facility does not adequately account for equipment and material that pose a potential risk to security and safety. Standard cleaning practices are sporadic in their application. Generator tests occur on a monthly schedule; not every two weeks. There was no documentation to support quarterly testing of other emergency systems and equipment had been completed.

Recommendation: Each of the noted deficiencies cited in the above finding section must be corrected, developed, accomplished, and implemented through the establishment of a system that can be regularly inspected for adherence to the expectations of the standard.

Security Inspections:

Policy: In an area with heightened security requirements, the post officer must thoroughly understand all aspects of facility operations. Specially trained officers only will be assigned to these security-inspection posts.

Finding: There is no requirement for documenting security inspections. The frequency of inspections and the procedures for reporting issues could not be confirmed. The facility does not have a visitor pass system. The documentation of vehicles and drivers entering and leaving the facility is incomplete. Vehicles entering and leaving the facility are not searched. Tools are not inventoried when they enter and leave the facility.

Recommendation: Establish a security inspection system that documents each search activity. Develop a visitor pass system and implement the program for all individuals entering and leaving the facility. Document the specifics of all vehicular traffic and the driver's name and company entering and leaving the facility. Search all vehicles when entering and leaving the facility. Demand inventories of all tools entering and leaving the facility and require an inventory of those tools is present with the tools for the time they are on grounds.

Tool Control:

Policy: Every facility will establish a tool-control policy with which all employees shall comply. The Maintenance Supervisor shall maintain a computer-generated or typewritten inventory of tools and equipment, and storage locations. These inventories shall be current, filed, and readily available during an audit.

Finding: The maintenance, medical and food service departments do not have tool inventories. Not all of the tools in the maintenance department and none of the knives assigned to the food service department



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are marked and readily identifiable. The food service tool storage system is not maintaining secure and safe storage for all knives. Outside contractor tools are not inventoried when they enter and leave the facility.

Recommendation: Require tool inventories are established and maintained for all tools inside the facility. Mark all tools so they are readily identifiable and store them so their absence will be easily recognized. Ensure all tools are securely stored. Require outside contractors to inventory their tools when they enter and leave the facility.

Staff-Detainee Communications:

Policy: Procedures must be in place to allow for formal and informal contact between key facility staff and ICE staff and ICE detainees and permit detainees to make written requests to ICE staff and receive an answer in an acceptable time frame.

Finding: Weekly ICE/ERO tours of the facility are not documented. There is no documentation to indicate current climate and conditions of confinement were observed during ICE/ERO facility tours. There were no detainee request forms available in the detainee housing unit. There was no documentation to support detainee requests received were responded to within 72 hours of receipt. Scheduled ICE/ERO visit days and times are not posted in the ICE housing unit.

Recommendation: Require weekly ICE/ERO facility visits are made and documented noting the demands specified in the standard. Supply the detainee housing unit with detainee request forms and replenish that inventory during the ICE/ERO weekly housing unit tours. Establish a detainee request log with a format that shows the requirements specified in the standard. Post the days and hours of the weekly scheduled ICE/ERO tours in the detainee housing unit.

Recommended Rating and Justification

The Lead Compliance Inspector recommends that the facility receive a rating of Deficient. The facility does not comply with all of the ICE National Detention Standards (NDS). Four (4) standards were found Deficient and two (2) standards were Not Applicable (N/A). All remaining thirty-three (33) standards were found to be in compliance.

LCI Assurance Statement

The findings of compliance and noncompliance are accurately and completely documented on the G-324A Inspection Form and are supported by documentation in the inspection file. An out brief was conducted at the facility and in addition to the entire Nakamoto Group, Inc. Inspection Team, the following were present:

- ICE Officials – [REDACTED]

- Facility Staff – [REDACTED]

[REDACTED]

[REDACTED], Lead Compliance Inspector

January 30, 2020

Printed Name of LCI

Date



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