

Department Of Homeland Security
Immigration and Customs Enforcement

Detention Review Summary Form
Facilities Used Over 72 hours

A. Type of Facility Reviewed

- ☐ ICE Service Processing Center
☒ ICE Contract Detention Facility
☐ ICE Intergovernmental Service Agreement

B. Current Inspection

Type of Inspection
☐ Field Office ☒ HQ Inspection

Date[s] of Facility Review
3/19/2019 - 3/21/2019

C. Previous/Most Recent Facility Review

Date[s] of Last Facility Review
3/20/2018- 3/22/2018

Previous Rating
☒ Meets Standards ☐ Does Not Meet Standards

D. Name and Location of Facility

Name
Northeast Ohio Correctional Center

Address (Street and Name)
2240 Hubbard Road

City, State and Zip Code
Youngstown, OH 44505

County
Mahoning

Name and Title of Facility Administrator
(Warden/OIC/Superintendent)

Telephone # (Include Area Code)

Field Office / Sub-Office (List Office with oversight responsibilities)
Detroit

Distance from Field Office
220 miles

E. ICE Information

Name of Inspector (Last Name, Title and Duty Station)
/ LCI/Detainee Rights SME / Nakamoto Group

Name of Team Member / Title / Duty Location
/ Medical SME / Nakamoto Group

Name of Team Member / Title / Duty Location
/ Safety SME / Nakamoto Group

Name of Team Member / Title / Duty Location
/ Security SME / Nakamoto Group

Name of Team Member / Title / Duty Location
/ Medical SME / Nakamoto Group

F. CDF/IGSA Information Only

Contract Number Date of Contract or IGSA

Basic Rates per Man-Day

Other Charges: (If None, Indicate N/A)

Estimated Man-days Per Year

G. Accreditation Certificates

List all State or National Accreditation[s] received:
ACA, PREA & Joint Commission

☐ Check box if facility has no accreditation[s]

H. Problems / Complaints (Copies must be attached)

The Facility is under Court Order or Class Action Finding
☐ Court Order ☐ Class Action Order

The Facility has Significant Litigation Pending
☐ Major Litigation ☐ Life/Safety Issues

☒ Check if None.

I. Facility History

Date Built

Date Last Remodeled or Upgraded

Date New Construction / Bedspace Added

Future Construction Planned

☐ ☒ Date:

Current Bedspace

Future Bedspace (# New Beds only)
Number: Date:

J. Total Facility Population

Total Facility Intake for previous 12 months

Total ICE Mandays for Previous 12 months

K. Classification Level (ICE SPCs and CDFs Only)

| | L-1 | L-2 | L-3 |
|--|-----|-----|-----|
| | | | |

L. Facility Capacity

| | Rated | Operational | Emergency |
|--|-------|-------------|-----------|
| | | | |

M. Average Daily Population

| | ICE | USMS | Other |
|--|-----|------|-------|
| | | | |

N. Facility Staffing Level

Security: Support:

Significant Incident Summary Worksheet

For The Nakamoto Group to complete its review of your facility, the following information must be completed prior to the scheduled review dates. The information on this form should contain data for the past twelve months in the boxes provided. The information on this form is used in conjunction with the ICE Detention Standards in assessing your Detention Operations against the needs of the ICE and its detained population. This form should be filled out by the facility prior to the start of any inspection. Failure to complete this section will result in a delay in processing this report and the possible reduction or removal of ICE' detainees at your facility.

| <i>Incidents</i> | <i>Description</i> | Jan – Mar | Apr – Jun | Jul – Sept | Oct – Dec |
|--|--|------------------|------------------|-------------------|------------------|
| Assault: Offenders on Offenders ¹ | Types (Sexual ² , Physical, etc.) | 0 | 0 | Physical – 1 | 0 |
| | With Weapon | 0 | 0 | 0 | 0 |
| | Without Weapon | 0 | 0 | 1 | 0 |
| Assault: Detainee on Staff | Types (Sexual Physical, etc.) | 0 | P | 0 | Physical – 2 |
| | With Weapon | 0 | 0 | 0 | 0 |
| | Without Weapon | 0 | 1 | 0 | 2 |
| Number of Forced Moves, incl. Forced Cell moves ³ | | 0 | 2 | 5 | 5 |
| Disturbances ⁴ | | 0 | 0 | 0 | 0 |
| Number of Times Chemical Agents Used | | 0 | 0 | 1 | 2 |
| Number of Times Special Reaction Team Deployed/Used | | 0 | 0 | 2 | 0 |
| # Times Four/Five Point Restraints applied/used | Number/Reason (M=Medical, V=Violent Behavior, O=Other) | 0 | 0 | 0 | 0 |
| | Type (C=Chair, B=Bed, BB=Board, O=Other) | N/A | N/A | N/A | N/A |
| Number of Times Canines Used in Facility | | 0 | 0 | 0 | 0 |
| Offender / Detainee Medical Referrals as a result of injuries sustained. | | 0 | 0 | 0 | 0 |
| Escapes | Attempted | 0 | 0 | 0 | 0 |
| | Actual | 0 | 0 | 0 | 0 |
| Grievances: | # Received | 8 | 8 | 23 | 18 |
| | # Resolved in favor of Offender/Detainee | 0 | 1 | 5 | 7 |
| Deaths | Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other) | A | N/A | N/A | N/A |
| | Number | 1 | 0 | 0 | 0 |
| Psychiatric / Medical Referrals | # Medical Cases referred for Outside Care | 8 | 14 | 18 | 13 |
| | # Psychiatric Cases referred for Outside Care | 0 | 0 | 0 | 0 |

¹ Any attempted physical contact or physical contact that involves two or more offenders

² Oral, anal or vaginal penetration or attempted penetration involving at least 2 parties, whether it is consenting or non-consenting

³ Routine transportation of detainees/offenders is not considered "forced"

⁴ Any incident that involves four or more detainees/offenders, includes gang fights, organized multiple hunger strikes, work stoppages, hostage situations, major fires, or other large scale incidents.

DHS/ICE Detention Standards Review Summary Report

| 1. Meets Standards | | 2. Does Not Meet Standards | | 3.Repeat Finding | | 4. Not Applicable | | 1 | 2 | 3 | 4 |
|---|--|-------------------------------------|--------------------------|--------------------------|--|-------------------|--|---|---|-------------------------------------|-------------------------------------|
| PART 1 SAFETY | | | | | | | | | | | |
| 1 | Emergency Plans | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | |
| 2 | Environmental Health and Safety | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | |
| 3 | Transportation (By Land) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | <input checked="" type="checkbox"/> | |
| PART 2 SECURITY | | | | | | | | | | | |
| 4 | Admission and Release | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | |
| 5 | Classification System | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | |
| 6 | Contraband | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | |
| 7 | Facility Security and Control | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | |
| 8 | Funds and Personal Property | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | <input type="checkbox"/> |
| 9 | Hold Rooms in Detention Facilities | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | |
| 10 | Key and Lock Control | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | |
| 11 | Population Counts | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | |
| 12 | Post Orders | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | |
| 13 | Searches of Detainees | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | |
| 14 | Sexual Abuse and Assault Prevention and Intervention | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | |
| 15 | Special Management Units | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | |
| 16 | Staff-Detainee Communication | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | |
| 17 | Tool Control | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | |
| 18 | Use of Force and Restraints | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | |
| PART 3 ORDER | | | | | | | | | | | |
| 19 | Disciplinary System | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | |
| PART 4 CARE | | | | | | | | | | | |
| 20 | Food Service | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | |
| 21 | Hunger Strikes | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | |
| 22 | Medical Care | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | |
| 23 | Personal Hygiene | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | |
| 24 | Suicide Prevention and Intervention | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | |
| 25 | Terminal Illness, Advance Directives, and Death | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | |
| PART 5 ACTIVITIES | | | | | | | | | | | |
| 26 | Correspondence and Other Mail | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | |
| 27 | Escorted Trips for Non-Medical Emergencies | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | <input checked="" type="checkbox"/> |
| 28 | Marriage Requests | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | <input type="checkbox"/> |
| 29 | Recreation | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | |
| 30 | Religious Practices | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | |
| 31 | Telephone Access | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | |
| 32 | Visitation | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | |
| 33 | Voluntary Work Program | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | <input type="checkbox"/> |
| PART 6 JUSTICE | | | | | | | | | | | |
| 34 | Detainee Handbook | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | |
| 35 | Grievance System | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | |
| 36 | Law Libraries and Legal Material | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | |
| 37 | Legal Rights Group Presentations | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | |
| PART 7 ADMINISTRATION & MANAGEMENT | | | | | | | | | | | |
| 38 | Detention Files | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | |
| 39 | News Media Interviews and Tours | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | |
| 40 | Staff Training | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | |
| 41 | Transfer of Detainees | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | |

LCI Review Assurance Statement

By signing below, the Lead Compliance Inspector (LCI) certifies that all findings of noncompliance with policy or inadequate controls contained in the Inspection Report are supported by evidence that is sufficient and reliable. Furthermore, findings of noteworthy accomplishments are supported by sufficient and reliable evidence. Within the scope of the review, the facility is operating in accordance with applicable law and policy, and property and resources are efficiently used and adequately safeguarded, except for the deficiencies noted in the report.

| | |
|---|------------|
| Lead Compliance Inspector: (Print Name) | Signature |
| [REDACTED] | [REDACTED] |
| Title & Duty Location | Date |
| Lead Compliance Inspector, The Nakamoto Group, Inc. | 3/21/2019 |

Team Members

| | |
|---|--|
| Print Name, Title, & Duty Location | Print Name, Title, & Duty Location |
| [REDACTED], Medical SME, The Nakamoto Group, Inc. | [REDACTED], Security SME, The Nakamoto Group, Inc. |
| Print Name, Title, & Duty Location | Print Name, Title, & Duty Location |
| [REDACTED], Safety SME, The Nakamoto Group, Inc. | [REDACTED], Medical SME, The Nakamoto Group, Inc. |

Recommended Rating:

☒ Meets Standards
☐ Does Not Meet Standards

Comments: This inspection was conducted to determine the overall compliance with the ICE Performance-Based National Detention Standards (PBNDS) 2011. The following are the PBNDS 2011 additions/changes to the standards listed on page three:

- Medical Care (Women), a new standard, was rated Not Applicable (N/A);
- Classification System is now titled Custody Classification System;
- Suicide Prevention and Intervention is now titled Significant Self-Harm and Suicide Prevention and Intervention;
- Escorted Trips for Non-Medical Emergencies is now titled Trips for Non-Medical Emergencies;
- News Media Interviews and Tours is now titled Interviews and Tours;
- Transfer of Detainees is now titled Detainee Transfer

There were nineteen allegations of sexual assault or abuse reported at this facility since the last inspection. None involved ICE detainees. Three allegations involved staff; two of these were unfounded and one was substantiated. The other sixteen allegations were all unsubstantiated.

There was one death reported at the facility since the last inspection. On 12/16/2018 staff discovered a non-ICE detainee unresponsive on his cell floor. Staff initiated CPR and 911 was notified. The detainee was transported to the emergency room where he was pronounced deceased. A cause of death is pending. There was one serious suicide attempt by an ICE detainee. On 3/12/2019 a 23-year-old detainee was found on the floor of his cell unresponsive with cuts to his left forearm and some bleeding. 911 was called and the detainee was transported to the emergency room. His cuts were sutured and he was returned to the facility. The detainee was placed on suicide watch and remained on this status until 3/19/2019.

The use of chemical agents by trained certified personnel is authorized by policy. The facility does not have Tasers. The facility does not have a canine unit. Canine units from the police department are brought in for contraband detection but the canine units are never used in any area that houses ICE detainees.

During this inspection period there was one calculated use of force incident and there were thirteen immediate use of force incidents. The calculated use of force incident was a result of a detainee becoming aggressive towards staff and refusing to be taken from the

SMU to the medical department for an examination. The detainee refused all orders to submit to restraints. The cell extraction team was organized and the order to submit to restraints was again given and the detainee did not respond. The extraction team entered the cell. The detainee became submissive and the extraction was completed without incident. The detainee was placed in restraints and then taken to the medical department where an examination determined that there were no injuries. Of the thirteen immediate use of force incidents, two of them were of a serious nature. In one incident, a detainee was threatening staff with a broom handle and the detainee refused all orders to drop the broom handle. In the second incident, two detainees were fighting and refused all orders to separate and continued striking each other. As a result, the use of chemical agents (OC) was required. Once the detainees stopped fighting, they were placed in restraints and taken to be decontaminated. Both detainees were taken to the medical department for an examination and only minor injuries were reported. Both detainees were placed in administrative segregation pending an investigation. There were four incidents where the detainee moved aggressively towards staff and had to be taken to the floor and placed in restraints. In five incidents, two detainees were fighting in the housing units and staff ordered them to stop and then placed them in restraints. In two incidents, the detainees refused orders to stop unacceptable behavior and after orders were ignored the detainees were placed in restraints. There were no staff or detainee injuries as a result of these thirteen incidents. A review of documentation and video recordings confirmed that all use-of-force incidents were conducted in accordance with policy. As required by policy, all incidents were reviewed by senior management.

There were no escapes or escape attempts during this inspection period.