

May 17, 2018

TO: [REDACTED]
Assistant Director for Detention Management

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

SUBJECT: **Annual Detention Inspection of the Grand Forks County Correctional Facility**

The Nakamoto Group, Inc. performed an annual inspection for compliance with the ICE National Detention Standards (NDS-Over 72 Hours) of the Grand Forks County Correctional Facility, Grand Forks, ND, during the period of May 15-17, 2018. This is an IGSA facility.

The annual 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]
Medical Care	[REDACTED]
Safety	[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. A previous inspection report was not available.

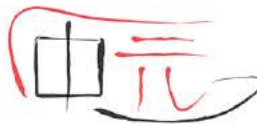
Inspection Summary

The Grand Forks County Correctional 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 2018 NDS annual inspection:



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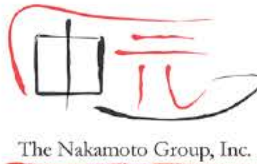
<i>2017 Annual Inspection</i>		<i>2018 Annual Inspection</i>	
Acceptable	N/A	Acceptable	35
Deficient	N/A	Deficient	2
Repeat Deficiency	N/A	Repeat Deficiency	0
Not Applicable	N/A	Not Applicable	2

The inspection team identified seventy-one (71) deficient components in the following twenty-six (26) standards:

Access to Legal Materials—1
Admission and Release—2
Classification System—2
Correspondence and Other Mail—3
Detainee Handbook—4
Food Service—3
Funds and Personal Property—2
Detainee Grievance Procedures—1
Issuance and Exchange of Clothing, Bedding, and Towels—2
Access to Telephones—2
Visitation—1
Access to Medical Care—2
Terminal Illness, Advanced Directives and Death—4
Detention Files—1
Emergency Plans—3
Environmental Health and Safety—10
Hold Rooms in Detention Facilities—1
Key and Lock Control—8
Post Orders—2
Special Management Unit (Administrative Segregation)—5
Special Management Unit (Disciplinary Segregation)—3
Tool Control—2
Transportation (Land)—1
Staff/Detainee Communications—1
Detainee Transfer Standard—4
Sexual Abuse and Assault Prevention and Intervention—1

Facility Snapshot/Description

The Grand Forks County Correctional Facility is located in Grand Forks, North Dakota. The facility is owned and operated by Grand Forks County. The facility opened in 2006 and has a rated capacity of [REDACTED]. The facility houses all custody levels of [REDACTED]. The facility does not house juveniles. On the first day of the inspection the total population at the facility was [REDACTED]. Three male ICE detainees were admitted to the facility overnight between the first and second day of the inspection. [REDACTED]



██████████. Female ICE detainees are infrequently housed at the facility. ICE utilizes the facility for short-term housing.

The facility is a one-level structure with the exception of one housing pod which has two levels. There are three housing pods containing cells and one dormitory style housing unit designated for non-ICE work release detainees. All housing units receive indirect supervision. When a detainee requires special housing for administrative or disciplinary segregation, the detainee is housed and managed in one of two housing units which may be used for general population and/or special management housing. ICE detainees are co-mingled with both USMS prisoners and local non-ICE detainees.

Each general population housing unit has a dayroom area with tables, chairs, a television, telephones and board games. Each of the three housing pods where an ICE detainee may be housed contains a large recreation area which provides both indoor and outdoor recreation access. Detainees are offered a minimum of one hour of daily access to the recreation area. Social visits are conducted via kiosks located in each housing unit. Detainees may also rent iPods on which they can send and receive text messages. Sanitation and cleanliness were observed to be average. ICE detainees do not participate in the voluntary work program.

Overall, the team found the atmosphere in the facility to be calm with no obvious indicators of high stress.

The three male ICE detainees who arrived at the facility during the inspection were interviewed. The detainees received a National Detainee Handbook from ICE upon arrival and were instructed as to how to access the local handbook on the kiosks located in the housing units. The detainees had no other comments.

Per written policy and confirmed by the OIC, any federal detainee housed at the facility for more than thirty days is subject to co-pays for medical services. The OIC and medical department were unable to confirm if any ICE detainees were charged a co-pay for medical services during the previous twelve months.

Food service is provided via a contract with Summit Food Service. Detainee telephone services are contracted with Reliance Telephone, Inc. Medical services are delivered pursuant to a contract with the Grand Forks City Health Department.

Areas of Concern/Significant Observations

Two deficient standards were identified during the inspection.

Environmental Health and Safety:

Every facility will control flammable, toxic, and caustic materials through a hazardous materials program. The program will include, among other things, the identification and labeling of hazardous materials in accordance with applicable standards (E.G., National Fire Protection Association [NFPA]); Identification of incompatible materials, and safe-handling procedures.

Finding:

The facility does not have a technically qualified officer conducting fire and safety inspections. A fire prevention, control and evacuation plan has not been developed and approved by the local fire authority. The local fire authority conducts annual inspections of the facility but there is no plan to be reviewed and approved. Fire drills have been conducted five of the last twelve months instead of monthly as required. Inventories of sharps and

needles in the medical department are not accurate as they do not reflect unopened boxes of these tools which are also stored in the cabinets. Pest control services are provided quarterly instead of monthly as required by the standard and the generator is tested monthly instead of bi-weekly.

Recommendation:

The OIC should identify and provide training so that a technically qualified officer conducts fire and safety inspections. A fire prevention, control and evacuation plan should be developed and approved by the local fire authority. Fire drills should be conducted monthly as required by the standard. Accurate inventories of sharps and needles in the medical department should be developed and maintained. Pest control services should be provided monthly and the emergency generator should be tested bi-weekly as required by the standard.

Key and Lock Control:

It is the policy of the ICE Service to maintain an efficient system for the use, accountability and maintenance of all keys and lock.

Finding:

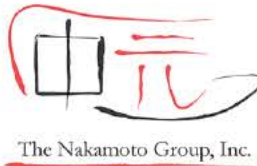
The maintenance manager, who has the responsibility for maintenance of keys, locks and locking mechanisms, has not attended an approved locksmith training program. Key rings are not identifiable and the facility does not maintain an accurate inventory of the number of keys on the individual key rings. Keys can be removed from the key rings. Keys are not counted daily. The facility does not perform preventative maintenance of keys, locks or locking mechanisms.

Recommendation:

The maintenance manager or other staff member designated by the OIC should attend an approved locksmith training program. A key accountability system should be developed so that key rings are identifiable and the number of keys on each ring are identified and counted daily. Key rings should be configured so that keys cannot be removed from the key rings. The OIC should develop a preventative maintenance program for keys, locks and locking mechanisms.

Recommended Rating and Justification

The Lead Compliance Inspector recommends that the facility receive a rating of Deficient. Two standards were found Deficient and two (2) standards were Not Applicable (N/A). All remaining thirty-five (35) standards were found to be in compliance. The facility does not comply with the ICE National Detention Standards (NDS) as evidenced by seventy-one (71) deficient components and the two standards which were found deficient; Environmental Health and Safety and Key and Lock Control. Additionally, the facility strip searches all detainees prior to housing them in the general population; depends primarily on self-reporting from detainees for classification decisions and co-mingles ICE detainees with non-ICE detainees; does not provide a complete physical examination within fourteen days of arrival by a nurse trained by a physician as required by the standard; and ICE detainees are charged medical co-pays if they are housed at the facility more than thirty days. It should be noted that the OIC initiated corrective action during the inspection for many of the identified deficiencies.



LCI Assurance Statement

The findings of compliance and non-compliance 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

May 17, 2018

Printed Name of LCI

Date