

December 12, 2019

TO: [REDACTED]
Assistant Director for Detention Management

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

SUBJECT: **Annual Detention Inspection of the Strafford County Corrections**

The Nakamoto Group, Inc. performed an annual inspection for compliance with the ICE Performance-Based National Detention Standards (PBNDS 2008 / SAAP1 2011) of the Strafford County Corrections in Dover, New Hampshire during the period of December 10-12, 2019. 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 PBNDS 2008 for Over 72 hour facilities. The facility received a previous rating of Meets Standards during the December 2018 inspection.

Inspection Summary

The Strafford County Corrections 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) - Yes

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 and 2019 PBNDS 2008 annual inspections:

2018 Annual Inspection	
Meets Standards	38
Does Not Meet Standards	0
Repeat Finding	0
Not Applicable	3

2019 Annual Inspection	
Meets Standards	38
Does Not Meet Standards	0
Repeat Finding	0
Not Applicable	3

The inspection team identified twelve (12) deficient components in the following six (6) standards:

Environmental Health and Safety – 1
 Post Orders – 1
 Special Management Units – 1, which is a repeat deficiency
 Food Service – 3, one of which is a repeat deficiency
 Suicide Prevention and Intervention – 4, two of which are priority components
 Detainee Handbook – 2, both of which are repeat deficiencies

Facility Snapshot/Description

The Strafford County Department of Corrections is located in Dover, New Hampshire approximately sixty miles northwest of Boston. The facility is owned by Strafford County and operated under the jurisdiction of Strafford County and the superintendent. [REDACTED]
 It currently houses adult male and female ICE, U.S. Marshal Service and Strafford and surrounding county detainees, State of New Hampshire inmates, Bureau of Prisons inmates from several areas and ICE Air Operations detainees awaiting transfer out of the country. The facility houses all classification levels. [REDACTED]
 [REDACTED]

The facility, constructed in 2004, is a two-story structure that houses the county jail. The exterior walls of the building comprise the perimeter security. There is no perimeter road encircling the compound but the building perimeter is foot patrolled by an unarmed officer each shift. The exterior doors of the building are alarmed and controlled by central control officers. The perimeter is only partially covered by monitored camera surveillance at this time. The facility surveillance network consists of 64 cameras that also monitor all housing units, common areas and movement corridors; there are some blind spots inside the facility. Detainee movement is authorized by a pass system or it is escorted.

ICE detainees are housed with other non-ICE detainees in the seven housing units, which are configured into one dormitory with 68 beds, and six housing units ranging in size from 4-36 cells; each cell is a two-bed design. The facility has two special management units: one four cell unit (two-beds each cell) for females, and one eight cell unit (two-beds each cell) for males. One ICE detainee was housed in disciplinary segregation status during the inspection.

Each of the housing units has a dayroom area equipped with one television, one information kiosk, telephone banks, table/chair units where detainees eat their meals, gather in conversation or participate in table games; and multiple tablets (enough for every detainee) that are capable of accessing movies, books and games, conducting video-visits, making telephone calls, ordering commissary, filing requests, partaking of educational/informational programs, sending e-mails to staff, viewing the LexisNexis collection and perusing local handbook content and informational postings. All general population detainees have

daily access to outdoor recreation for at least one hour each day; special management unit detainees receive outdoor recreation for at least one hour five days a week. Detainees are under constant monitored camera surveillance in their housing units and while using the recreation areas.

Numerous detainees were interviewed during the inspection in open and confidential settings. Interviews with LEP detainees were assisted by the use of the language line. The detainees voiced no concerns regarding life/safety issues. Detainees were generally satisfied with the interaction and responsiveness from facility staff and the deportation officers' attention to their requests. There were no substantive concerns registered regarding their treatment by staff, conditions of confinement, medical care, asylum requests, consulate/court access, ICE/ERO services, visiting privileges, law library access, food services, recreational opportunities or access to telephones.

Overall sanitation throughout the facility was adequate. The housing unit bathrooms, shower and wash basins are maintained at a good level of cleanliness. Medical care, food service and building maintenance are provided by Strafford County employees. Detainee telephone services, informational kiosks and the housing units' tablets are provided and managed by Global Tel-Link (telephone contractor). ICE detainees are not charged a medical co-payment.

Areas of Concern/Significant Observations

There were two priority components rated Does Not Meet Standard:

4-24 Suicide Prevention and Intervention

Component #5 – PRIORITY: Detainees who are identified as being “at risk” for suicide shall immediately be referred to the mental health provider or other appropriately trained medical staff member for evaluation. Appropriately trained and qualified medical staff shall evaluate the detainee within 24 hours of the referral, and re-evaluate any detainee placed on suicide watch on a daily basis. All evaluation is documented in the detainee’s medical record. Only the mental health professional, clinical medical authority, or designee may terminate a suicide watch after a current suicide risk assessment is completed.

Finding: The review of ICE detainee health records confirmed detainees who are at-risk for suicide are removed from the general population, placed on suicide watch and immediately referred to qualified health care personnel. Health record reviews showed mental health providers evaluate the detainees three days per week when they are on suicide precautions, but appropriately trained and qualified medical staff did not re-evaluate the detainee on a daily basis.

Recommendation: The facility should ensure appropriately trained and qualified medical staff evaluate detainees on suicide watch daily.

Component #8 – PRIORITY: Suicidal detainees should be housed in a room that has been made as suicide resistant as possible. Security staff shall ensure that the area for suicide observation is initially inspected so that there are no objects that pose a threat to the detainee’s safety.

Finding: The room designated for suicide observation has a wall that blocks the observing officer's view into the toilet area of the cell. The obstructed view poses as an obstacle that threatens the detainee's safety.

Recommendation: The facility should select another room for suicide observations or remove/alter the wall to allow better sight lines into the entire area of the cell.

No pledges were made by the OIC to fix either concern during this inspection.

Recommended Rating and Justification

The Lead Compliance Inspector recommends that the facility receive a rating of Meets Standards. The facility complies with the ICE Performance Based National Detention Standards (PBNDS) 2008. No (0) standards were found Does Not Meet Standards and three (3) standards were Not Applicable (N/A). All remaining thirty-eight (38) standards were found to Meet Standards.

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

December 12, 2019

Printed Name of LCI

Date