

October 4, 2018

TO: [REDACTED]  
Assistant Director for Detention Management

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

SUBJECT: **Annual Detention Inspection of the Okmulgee County Jail–Moore Detention Facility**

The Nakamoto Group, Inc. performed an annual inspection for compliance with the ICE Performance-Based National Detention Standards (PBNDS 2011) of the Okmulgee County Jail-Moore Detention Facility in Okmulgee, OK, during the period of October 2-4, 2018. 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]
Medical Care	[REDACTED]
Safety	[REDACTED]

### **Type of Inspection**

This is a scheduled annual inspection, which is performed to determine overall compliance with the ICE PBNDS 2011 for Over 72 hour facilities. The facility received a previous rating of Acceptable during the October 2017 NDS inspection.

### **Inspection Summary**

The Okmulgee County Jail-Moore 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 2017 NDS and 2018 PBNDS 2011 annual inspections:

<b>2017 NDS Annual Inspection</b>	
Acceptable	37
Deficient	0
At Risk	0
Repeat Deficiency	0
Not Applicable	2

<b>2018 PBNDS Annual Inspection</b>	
Meets Standards	39
Does Not Meet Standard	0
At Risk	0
Repeat Finding	0
Not Applicable	3

The inspection team identified twenty-six (26) deficient components in the following fourteen (14) standards:

- Environmental Health and Safety – 4, one of which is a Priority component
- Transportation – 1
- Custody Classification System – 1
- Funds and Property - 1
- Special Management Units - 2
- Staff Detainee Communication – 2
- Disciplinary System - 1
- Food Service - 2, one of which is a priority component
- Terminal Illness, Advance Directives and Death – 4
- Telephone Access – 3
- Detainee Handbook - 1, which is a Priority component
- Grievance System – 1, which is a Priority component
- Law Libraries and Legal Material - 1
- Staff Training - 2

### **Facility Snapshot/Description**

The Okmulgee County Jail-Moore Detention Facility is located in Okmulgee, Oklahoma. The facility is owned by Okmulgee County and operates under the jurisdiction of the Okmulgee County Criminal Justice Authority. The [REDACTED] indirect supervision facility was built in 2016 and began housing detainees in 2017. The facility houses adult male ICE detainees of all custody levels and male non-ICE detainee workers. The 2017 annual inspection was completed using the ICE National Detention Standards (NDS). In August 2018 the facility signed a new contract and this inspection was done to determine compliance with the Performance Based National Detention Standards (PBNDS) 2011. During this inspection the facility was housing adult male ICE detainees only. [REDACTED]

The facility is a two-story structure which contains four general population housing units and one special management unit (SMU). Three of the four general population units are dormitory style and one contains 27 double cells. Bed capacities range from fifty-one to sixty beds. The SMU contains ten cells, each with two beds. No detainees were housed in the SMU during the inspection. All housing units are located on the first level of the building. Central control, administrative offices and the property room are located on the second level. Indirect supervision from central control is provided for all general population housing units.

Each housing unit has a dayroom area with table, chairs, a television, a microwave, telephones and a sufficient number of showers and wash basins. Three of the housing units have a computer equipped with LexisNexis available for detainee use during facility waking hours. Detainees in general population have access to the outdoor recreation area four hours per day, seven days a week. The facility does not currently offer a voluntary work program.

The housing units provide adequate open space and detainees were observed socializing in the dayrooms and watching television. The atmosphere was relaxed and detainees were observed interacting with facility staff and other detainees. They approached the inspection team without hesitation.

The Language Line was used to conduct three interviews of LEP detainees from China, Nepal and India. None of the three detainees voiced any complaints. One detainee requested to be moved to a different housing unit so that he could be with a family member. This request was relayed to facility and ICE staff.

Sixteen LEP detainees were interviewed individually, in Spanish, by a bilingual inspector. A detainee who had arrived on a transport the previous evening complained that his restraints were too tight and the officers laughed at him when he complained and threatened him with pepper spray. He also stated that the officers were texting while driving and when he complained they drove erratically. The detainee also stated that the officers stopped to smoke and went into a convenience store and stayed a long time. Other detainees who arrived on the same transport were interviewed and they stated that they did not witness any of the actions that the detainee was complaining about. They did state that the officers stopped once for fuel. The complaints were relayed to facility staff for follow-up.

The inspection team visited the housing units several times during the inspection and conducted numerous group and confidential interviews. Complaints were voiced about receiving too much bread and not having shower shoes. The menus were checked and found to be in accordance to menus approved by the dietician. The chief of security provided documentation indicating that shower shoes have been ordered and should be arriving soon. Several detainees complained about batteries and radios not being available from the commissary. A check of the commissary order form indicated that batteries and radios are listed. The chief of security stated that they have a contract with a small, local company and they run out of items quite often and it will take a week or two for the items to be delivered. Several detainees complained about the lack of recreation equipment. This information was also discussed with the chief of security and she stated that after the new contract was signed many items had been ordered and they should be arriving soon. There were no complaints regarding access to medical care, telephone access or access to the law library. All of the detainees interviewed stated that they felt safe in the facility.

All areas of the facility were visited during the inspection and it was noted that sanitation is average throughout. Graffiti was noted in the showers and other areas in the housing units. It was noted that the noise level in the housing units makes it difficult to hear on the telephones.

Food service, medical care and maintenance services are operated by the facility. The doctor and mental health services are provided via contracts with local providers. Detainee telephone services are provided via a contract with NCIC Inmate Communications. The facility does not charge co-pays for medical, mental health or dental care.

## **Areas of Concern/Significant Observations**

The inspection team identified four (4) deficient priority components:

### **Environmental Health and Safety**

*Component #11-*A qualified departmental staff member shall conduct weekly fire and safety inspections.

*Finding:* Weekly fire and safety inspections are not conducted by a qualified departmental staff member.

*Recommendation:* The staff member conducting weekly fire and safety inspections should be provided with formal training that qualifies him to conduct the inspections.

## **Food Service**

*Component #10-* Before and during the display, service and transportation of food, sanitary guidelines are observed, with hot food maintained at a temperature of at least 140 F degrees (120 degrees in food trays) and foods that require refrigeration maintained at 41 F degrees or below.

*Finding:* Temperatures are logged on the production sheets reflecting both a preparation and serving temperature. Documentation of temperature checks for several months was reviewed during the inspection. There were several instances where food temperatures were not taken and documented in accordance with the Standard.

*Recommendation:* Food service staff should ensure all food temperatures are taken and documented during each meal.

## **Detainee Handbook**

*Component #7-*The detainee handbook (local supplement) address the following issues:

- The rules, regulations, policies and procedures with which every detainee must comply
- Detainee rights and responsibilities
- Procedures for requesting interpretive services for essential communication
- The facility's services and programs
- The facility's classification system
- Medical care
- The facility's zero tolerance policy for all forms of sexual abuse and assault
- The facility's rules of conduct and prohibited acts, the disciplinary scale, the sanctions imposed for violations of the rules, the disciplinary process, the procedure for appealing disciplinary findings, and detainees' rights in the disciplinary system (as required by Standard 3.1)
- Information about the facility's grievance system, including medical grievances (as required by Standard 6.2)
- The facility's policies on telephone access and on the monitoring of telephone calls, if telephone calls are monitored
- The facility's visitation rules and hours
- Rules and procedures governing access to the law library (as required by Standard 6.3) and to legal counsel
- Content and procedures of the facility's rules on legal rights group presentations, and the availability of legal orientation programs
- The facility's rules on correspondence and other mail (including information on correspondence procedures as required by Standard 5.1)
- The facility's policies and procedures related to personal property (as required by Standard 2.5)
- The facility's marriage request procedures
- Contact information for the ICE/ERO Field Office and the scheduled hours and days that ICE/ERO staff is available to be contacted by detainees at the facility

- Procedures to submit written questions, requests, or concerns to ICE/ERO staff, as well as the availability of assistance to prepare such requests.

*Finding:* All the bulleted items listed in this component are addressed in the site-specific handbook except for contact information for the ICE/ERO Field Office and the scheduled hours and days that ICE/ERO staff is available to be contacted by detainees.

*Recommendation:* Include the contact information for the ICE/ERO Field Office and the scheduled hours and days that ICE/ERO staff is available to be contacted by detainees.

## **Grievance System**

*Component #11-*Each facility shall maintain a Detainee Grievance Log. The documentation shall include: the date the grievance was filed, the name of the detainee that filed the grievance, the nature of the grievance, the date the decision was provided to the detainee, and the outcome of the adjudication. A copy of the grievance disposition shall be placed in the detainee's detention file and provided to the detainee. Medical grievances are maintained in the detainee's medical file.

*Finding:* The grievance officer maintains an electronic grievance log of grievances. The health services administrator maintains a log of all medical grievances. A review of both grievance logs indicated they include the documentation listed in this component. During the inspection it was discovered that the medical grievance log was inaccurate as it reflected no medical grievances and there were three medical grievances filed. Policy states a copy of the grievance disposition is given to the detainee and another copy placed in the detainee's detention or medical file. The three medical grievances could not be found in the detainee's medical file.

*Recommendation:* Medical grievances should be maintained in the detainee's medical file.

## **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) 2011 for Over 72 hour facilities. No (0) standards were found Does Not Meet Standards and three (3) standards were Not Applicable (N/A). All remaining thirty-nine (39) standards were found to Meet Standards.

## **LCI Assurance Statement**

The findings of compliance and non-compliance are accurately and completely documented on the G-324 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] (telephonically)
- Facility Staff [REDACTED] and numerous other facility staff



[REDACTED], Lead Compliance Inspector

October 4, 2018

Printed Name of LCI

Date