



U.S. Department of Homeland Security
Immigration and Customs Enforcement
Office of Professional Responsibility
Inspections and Detention Oversight Division
Washington, DC 20536-5501

Office of Detention Oversight Compliance Inspection

Enforcement and Removal Operations
ERO Miami Field Office
Broward Transitional Center
Pompano Beach, FL

March 8–10, 2016

**COMPLIANCE INSPECTION
for the
BROWARD TRANSITIONAL CENTER
Pompano Beach, Florida**

TABLE OF CONTENTS

EXECUTIVE SUMMARY

Overall Findings2
 Findings by Performance-Based National Detention Standards (PBNS) 2011 Major
 Categories3

INSPECTION PROCESS4

DETAINEE RELATIONS5

INSPECTION FINDINGS

SECURITY

Custody Classification System7
 Funds and Personal Property7
 Staff-Detainee Communication7

CARE

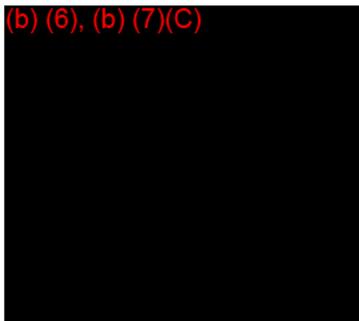
Food Service7
 Medical Care8

JUSTICE

Grievance System8

* * * * *

INSPECTION TEAM MEMBERS



Lead Inspections and Compliance Specialist	ODO
Inspections and Compliance Specialist	ODO
Inspections and Compliance Specialist	ODO
Inspections and Compliance Specialist	ODO
Contractor	Creative Corrections

EXECUTIVE SUMMARY

The Office of Detention Oversight (ODO) conducted a compliance inspection of the Broward Transitional Center (BTC), in Pompano Beach, Florida, from March 8 to 10, 2016.¹ BTC opened in 1998 and is owned and operated by the GEO Group, Inc. The Office of Enforcement and Removal Operations (ERO) began using BTC to house detainees in 2002 as a Contract Detention Facility (CDF) under the oversight of ERO’s Field Office Director (FOD) in Miami, FL.

ERO staff members are assigned to the facility. A Detention Services Manager provides full-time coverage at the facility. A GEO Warden is responsible for oversight of daily facility operations and is supported by (b) (7) personnel. BTC staff provides medical and food services. The facility held accreditations with the American Correctional Association and the National Commission on Correctional Health Care at the time of inspection.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity ²	700
Average ICE Detainee Population ³	589
Male Detainee Population (as of 03/08/2016)	615
Female Detainee Population (as of 03/08/2016)	64

OVERALL FINDINGS

In February 2012, ODO conducted an inspection of the BTC under the Performance-Based National Detention Standards (PBNDS) 2008. ODO reviewed the facility’s compliance with 23 standards and found the facility compliant with 13 standards. ODO found 16 deficiencies in the remaining 10 standards.

Inspection Results Compared	FY 2012 (PBNDS 2008)	FY2016 (PBNDS 2011)
Standards Reviewed	23	16
Deficient Standards	10	5
Overall Number of Deficiencies	16	6
Deficient Priority Components	N/A	1
Corrective Actions Initiated	N/A	4
Best Practices	0	1

In FY 2016, ODO conducted an inspection of the BTC under the PBNDS 2011. ODO reviewed the facility’s compliance with 16 standards and found the facility compliant with 11 standards. ODO found six deficiencies in the remaining five standards, one of which was a priority component. Finally, ODO identified four instances in which the facility initiated corrective action during the course of the inspection.⁴

¹ Male and female detainees with low, medium and high security classification levels are detained at the facility for longer than 72 hours.

² Data Source: ERO Facility List Report as of March 8, 2016.

³ *Ibid.*

⁴ Corrective actions, where immediately implemented, best practices and ODO recommendations, as applicable, have been identified in the *Inspection Findings* section and annotated with a “C”, “BP” or “R”, respectively.

FINDINGS BY PBNDS 2011 MAJOR CATEGORIES

PBNDS 2011 STANDARDS INSPECTED ⁵	DEFICIENCIES
Part 1 - Safety	
1.2 - Environmental Health and Safety	0
Sub-Total	0
Part 2 - Security	
2.1 - Admission and Release	0
2.2 - Custody Classification System	1
2.5 - Funds and Personal Property	1
2.11 - Sexual Abuse and Assault Prevention and Intervention	0
2.12 - Special Management Units	0
2.13 - Staff-Detainee Communication	2
2.15 - Use of Force and Restraints	0
Sub-Total	4
Part 4 - Care	
4.1 - Food Service	1
4.3 - Medical Care	0
4.4 - Medical Care (Women)	0
4.6 - Significant Self-Harm and Suicide Prevention and Intervention	0
Sub-Total	1
Part 5 - Activities	
5.6 - Telephone Access	0
Sub-Total	0
Part 6 - Justice	
6.1 - Detainee Handbook	0
6.2 - Grievance System	1
6.3 - Law Libraries and Legal Materials	0
Sub-Total	1
Total Deficiencies	6

⁵ For greater detail on ODO's findings, see the *Inspection Findings* section of this report.

INSPECTION PROCESS

Every fiscal year, the Office of Detention Oversight (ODO), a unit within U.S. Immigration and Customs Enforcement's (ICE) Office of Professional Responsibility (OPR), conducts compliance inspections at detention facilities in which detainees are accommodated for periods in excess of 72 hours and with an average daily population greater than ten to determine compliance with the ICE National Detention Standards (NDS) 2000, or the Performance-Based National Detention Standards (PBNDS) 2008 or 2011, as applicable.

During the compliance inspection, ODO reviews each facility's compliance with those detention standards that directly affect detainee health, safety, and/or well-being.⁶ Any violation of written policy specifically linked to ICE detention standards, ICE policies, or operational procedures that ODO identifies is noted as a deficiency. ODO also highlights any deficiencies found involving those standards that ICE has designated under either the PBNDS 2008 or 2011, to be "priority components."⁷ Priority components have been selected from across a range of detention standards based on critical importance, given their impact on facility security and/or the health and safety, legal rights, and quality of life of detainees in ICE custody.

Immediately following an inspection, ODO hosts a closeout briefing in person with both facility and ERO field office management to discuss their preliminary findings, which are summarized and provided to ERO in a preliminary findings report. Thereafter, ODO provides ERO with a final compliance inspection report to: (i) assist ERO in working with the facility to develop a corrective action plan to resolve identified deficiencies; and (ii) provide senior ICE and ERO leadership with an independent assessment of the overall state of ICE detention facilities. The reports enable senior agency leadership to make decisions on the most appropriate actions for individual detention facilities nationwide.

⁶ ODO reviews the facility's compliance with selected standards in their entirety.

⁷ Priority components have not been identified for the NDS.

DETAINEE RELATIONS

ODO interviewed 26 detainees, each of whom volunteered to participate. None of the detainees made allegations of mistreatment, abuse, or discrimination. The majority of detainees reported being satisfied with facility services, with the exception of the allegations below:

Admission and Release: Three detainees stated they were strip searched during the intake process.

- Action Taken: ODO reviewed the facility policy on strip searching and interviewed staff regarding strip search procedures. ODO determined the facility had not performed a strip search in eight years, and ERO had no record of any detainee reporting a strip search.

Food Service: Six detainees complained that food is served in very small portions, has a foul taste, and is typically served cold.

- Action Taken: ODO observed meal preparation and determined the food portions were adequate, and used a food thermometer to verify that the food was served at appropriate temperatures. ODO also verified that all meals are certified by a nutritionist, and the appropriate cyclic menu is used.

Staff-Detainee Communication: One detainee complained he does not know the status of his asylum case because his Deportation Officer (DO) has not been in contact with him.

- Action Taken: ODO reviewed the detainee's file and found one request from mid-November of 2015, for an interview with his DO. As documented in the BTC detainee request log, the DO responded to the detainee the next day that he would follow up on the status of the detainee's asylum interview. The detainee's file did not contain any additional requests, and no communication between the detainee and the DO was documented between November 2015 and ODO's inspection. ODO notified ERO of the detainee's complaint, and the detainee met with his DO during ODO's inspection.

Staff-Detainee Communication: One detainee complained he was not told why his scheduled removal in early March of 2016, did not occur, and that he was unable able to contact his family regarding his changed removal date because he is indigent and cannot afford a telephone call.

- Action Taken: ODO discussed the detainee's removal with ERO staff who indicated that the detainee was scheduled for removal the day prior to the first day of ODO's inspection, his removal was delayed to later that week, and the detainee was notified by facility staff of the delay. ODO confirmed with ERO that the detainee's DO met with him to discuss the delayed removal and advise him of his new removal date. ODO also confirmed with ERO that arrangements were made for the detainee to place a telephone call to his family, and that the call was placed prior to the conclusion of ODO's inspection.

Medical Care: One detainee complained he has issues with his eyes and needs to be seen by an off-site optometrist.

- Action Taken: ODO reviewed the detainee's medical file and determined he submitted a request in mid-February of 2016, regarding his eyes, and was seen by medical services the next day. Five days later the detainee had a consult with the facility medical doctor, and an optometrist appointment was scheduled for mid-March, 2016.

Medical Care: One detainee stated he submitted several requests for dental and vision issues but was not receiving proper treatment.

- Action Taken: ODO reviewed the detainee's medical file and determined he submitted a request in February of 2016, regarding his dental issue. He was seen by medical staff the next day, and was prescribed oral antibiotics for his dental issue. The detainee's medical file also documented that BTC medical staff provided the detainee reading glasses in late February of 2016, and scheduled an optometry appointment for early April of 2016.

Telephone Access: Several detainees stated multiple telephones in their housing units do not work.

- Action Taken: ODO tested all telephones in detainee housing units and verified four of the 86 telephones installed throughout the facility were not working properly. The facility was aware of the telephone outages and initiated work orders prior to the inspection with a scheduled repair date in mid-March, 2016.

INSPECTION FINDINGS

SECURITY

CUSTODY CLASSIFICATION SYSTEM (CCS)

ODO reviewed the detention files of 29 current and 11 former detainees and found the facility failed to administer any reclassification assessments for one current detainee who was admitted in July of 2015, including an initial reclassification assessment at 60-90 days following admission, and subsequent reclassification assessments at 90-120 day intervals thereafter (**Deficiency CCS-1⁸**).

Corrective Action: BTC completed a reclassification assessment for the subject detainee during the inspection (**C-1**).

FUNDS AND PERSONAL PROPERTY (F&PP)

ODO observed the detainee admission process and found that the facility does not issue a locking device to detainees during admission to secure their personal property storage bins (**Deficiency F&PP-1⁹**).

STAFF-DETAINEE COMMUNICATION (SDC)

ODO reviewed 40 detainee requests and found copies of three requests submitted between December 2015 and March 2016, were not placed in the respective detainee detention files. (**Deficiency SDC-1¹⁰**). ODO observed that ICE officials record detainee requests in an electronic log and forward the completed request to facility staff to place a copy in the detainee's detention file and to return a copy to the detainee.

Corrective Action: ODO observed the facility initiated corrective action during the inspection by placing copies of completed detainee request forms in the detainees' detention files (**C-2**).

⁸ "All facility classification systems shall ensure that a detainee may be reassessed and/or reclassified. Staff shall record whether a classification process is being conducted for an initial classification or subsequent reclassification: 1. The first reclassification assessment shall be completed in 60 to 90 days after the date of initial classification. 2. Subsequent reclassification assessments shall be completed at 90 to 120 day intervals." *See* ICE PBNDS 2011, Standard, Custody Classification System, Section (V)(H)(1)(2).

⁹ "Every housing area shall have a locker or other securable space for storing detainees' authorized property." *See* ICE PBNDS 2011, Standard, Funds and Personal Property, Section (V)(E).

¹⁰ "A copy of each completed detainee request shall be filed in the detainee's detention file and be retained there for three years at minimum." *See* ICE PBNDS 2011, Standard, Staff-Detainee Communication, Section, (V)(B)(2).

ODO reviewed Telephone Serviceability Worksheets to verify weekly checks are completed and records maintained and found that the telephone serviceability tests are not documented on a form provided by ERO (**Deficiency SDC-2¹¹**).

CARE

FOOD SERVICE (FS)

ODO inspected sack meals for detainees being transported from the facility and found they contained two cheese sandwiches, a dessert, and an extra item; however, no sandwiches contained meat, and the sack meals lacked a fruit item as required by the standard (**Deficiency FS-1¹²**).

Corrective Action: The facility initiated corrective action by incorporating a non-pork meat sandwich and fruit item to the sack lunches (**C-3**).

JUSTICE

GRIEVANCE SYSTEM (GS)

ODO reviewed BTC's grievance logs and found 16 formal grievances were filed by detainees between March 2015 and March 2016. Of those 16, one formal grievance was not placed in the respective detainee's detention file (**Deficiency GS-1¹³**).

Corrective Action: The facility initiated corrective action during the inspection by placing a copy of the formal grievance form in the detainee's detention file (**C-4**).

¹¹ "Staff shall document each serviceability test on a form that has been provided by ERO...." See ICE PBNDS 2011, Standard, Staff-Detainee Communication, Section, (V)(C).

¹² "Each sack shall contain at least two sandwiches, of which at least one shall be meat (non-pork)...In addition, each sack shall include: 1) one piece of fresh fruit, or properly packaged canned fruit..." See ICE PBNDS 2011, Standard, Food Service, Section, (V)(I)(6)(c)(1).

¹³ "A copy of the grievance disposition shall be placed in the detainee's detention file and provided to the detainee within five days." See ICE PBNDS 2011, Standard, Grievance System, Section (V)(D). **This is a priority component.**