



October 25, 2018

TO: [REDACTED]
Assistant Director for Detention Management

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

SUBJECT: **Annual Detention Inspection of the Marshall County Jail**

The Nakamoto Group, Inc. performed an annual inspection for compliance with the ICE National Detention Standards (NDS 2000) of the Marshall County Jail in Marshalltown, IA during the period of October 23-25, 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 NDS 2000 for Over 72 hour facilities. The facility received a previous rating of Acceptable during the October 2017 inspection.

Inspection Summary

The Marshall County Jail 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 and 2018 annual inspections:



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2017 Annual Inspection	
Acceptable	36
Deficient	0
At Risk	0
Repeat Deficiency	0
Not Applicable	3

2018 Annual Inspection	
Acceptable	33
Deficient	3
At-Risk	0
Repeat Finding	0
Not Applicable	3

The inspection team identified sixty-four (64) deficient components in the following nineteen (19) standards:

- Admission and Release – 3
- Classification System – 5
- Correspondence and Other Mail – 4, two of which are repeat deficiencies
- Detainee Handbook – 7, one of which is a repeat deficiency
- Food Service – 14, three of which are repeat deficiencies
- Funds and Personal Property – 1, which is a repeat deficiency
- Detainee Grievance Procedures – 1
- Issuance and Exchange of Clothing, Bedding and Towels – 2, one is a repeat deficiency
- Hunger Strikes – 1
- Access to Medical Care – 1, which is a repeat deficiency
- Emergency Plans – 1
- Environmental Health and Safety – 5, four of which are repeat deficiencies
- Hold Rooms in Detention Facilities – 1
- Key and Lock Control – 1
- Post Orders - 4
- Special Management Units (Administrative) - 4, one of which is a repeat deficiency
- Special Management Units (Disciplinary) - 3, one of which is a repeat deficiency
- Tool Control - 2, one of which is a repeat deficiency
- Sexual Abuse and Assault Prevention and Intervention – 4

Facility Snapshot/Description

The Marshall County Jail is located in a rural area approximately six miles east of downtown Marshalltown, IA. The [REDACTED] facility houses male and female local detainees and male and female ICE detainees of all classification levels using both direct and indirect supervision. [REDACTED]

ICE detainees are housed with local detainees in dormitories or celled units. Housing units provide adequate open space for recreation and social activities. Detainees have access to television, telephones, cards and various board games. Leisure library books are available in all housing units. Outdoor recreation is offered in excess of one hour a day, seven days a week. Outdoor activities include handball, walking and calisthenics.

Inspectors visited the housing units several times during the inspection and found the atmosphere to be calm and detainees were observed socializing in the dayrooms. It was noted that it was often difficult to hear in the dormitories due to the noise levels. ICE detainees were interviewed in groups and individually. All detainees stated they felt safe in the facility and were treated with respect by staff. They all stated that



ICE officers visit the facility on a regular basis and are responsive to their requests and questions. There were numerous complaints about the food, mostly portion sizes and blandness. The Safety SME observed the food being served and checked the menus that were approved by the dietician and found no discrepancies during the inspection. One detainee noted that the meals served when the inspectors were there were the best that he has seen during his stay.

Detainees had no complaints regarding telephones other than some of them felt the rates were too high. One detainee stated that he did not know how to contact his consulate. Inspectors advised him to use the speed dial numbers that are available on the kiosk in the housing unit. Upon reviewing the information that is available on the kiosk it was noted that the screen is very small and it is difficult to read most of the information. This information is also shown on a large screen in the dayroom but detainees complained that they have to watch a long time to obtain the information they are looking for as the handbook and other information is on the loop in several languages. Several detainees stated that they have never watched long enough to know what information is included. The ICE DO was advised of the issue and he stated that he would provide an updated list to be placed in the information notebook available at the officer's desk. There were no complaints regarding medical care or access to the law library.

Five LEP confidential interviews were conducted with randomly selected detainees. All five spoke Spanish. When asked how staff communicated with them during admission, most said through a Spanish speaking officer or another detainee. Orientation to the facility was a conversation with an officer going down the hallway to the assigned housing unit. It was noted that the facility does not have an orientation video and intake officers acknowledged that normally they communicate with detainees using a Spanish speaking officer or another detainee. Officers stated that a telephonic translation service is available. Detainees are provided some written orientation material including a "short version" of the facility rules that is available in English and Spanish.

Several detainees complained about one officer who they stated was rude and unprofessional. Facility supervisors were advised of this and they were aware of the complaints against the officer and they stated that he is "by the book" and is often perceived as being rude.

Inspectors found it difficult to find information on facility policy and it was determined that the facility is changing to an electronic system and not all of the information has been transferred. The paper copy of the policies could not be located during the inspection. What policies were presented to the inspectors were found to be a copy of the standard with no facility specific information or procedures. Facility supervisors were visible in the facility but always seemed too busy to carry on conversations or answer questions.

Sanitation throughout the facility, with the exception of food service, was average. Sanitation in the food service area was unacceptable. Food service is provided under contract by Consolidated Management Company (CMC). All other services are provided by Marshall County employees. There is no medical copayment for ICE detainees.

Areas of Concern/Significant Observations

The inspection team identified three (3) deficient Standards:

Classification System



Policy: All facilities will develop and implement a system according to which ICE detainees are classified, the classification system will ensure that each detainee is placed in the appropriate category, physically separated from detainees in other categories.

Finding: ICE provides the facility with a Risk Classification Assessment (RCA) with a classification designation for each detainee. The facility classification officers classify and house detainees using the facility classification system. It was noted that numerous detainees classified as High custody by ICE had been classified as Low custody by facility staff and housed with other Low custody detainees, resulting in Low custody detainees being housed with and recreating with detainees with a history of convictions of offenses listed under the highest section of severity of offense guideline or a history of violent assaults. The classification officer also stated that sex offenders and “snitches” are often housed with Low custody detainees as they “get along better in that setting”.

Recommendation: ICE detainees should be classified according to the criminal history information provided by ICE and housing assignments should be based upon classification designations.

Food Service

Policy: Every facility will provide detainees in its care with nutritious and appetizing meals prepared in accordance with the highest sanitary standards.

Finding: A review of records indicates that food service staff do not receive any type of medical clearance prior to, or during their employment. A weekly inspection of the food service area is not conducted and/or documented by anyone. Sanitation was observed at unacceptable levels. Food debris was observed on the floor throughout the kitchen. The dishwasher had excessive amounts of food in the trap area. Dishwashing machine racks were broken with a slimy film on the bottoms. Dirty water was observed in mop buckets and the buckets utilized to sanitize the serving lines. Bags of cake mix were observed opened while on the shelves with the cake mix spilling out onto the shelves and floor inviting pest infestation. There was a greasy build-up on equipment throughout the kitchen. Knives were not identified or inventoried. Chemicals stored in the kitchen were not inventoried. Training is not provided to food service staff that specifically addresses detainee related issues and a review of the ICE food service standard. Responsibilities of the food service cooks are not in writing. Searches and/or shakedown of the food service area is not conducted or documented daily. Non-ICE detainee worker job descriptions are not reviewed and updated annually or as needed. A cook has the authority to change menu items if necessary; however, substitutions are not approved and are not documented with any justification. The FSD is not notified of substitutions. The common fare/religious diet menu has not been certified by a dietitian to ensure nutritional recommended daily allowances are achieved. The FSD had not been provided a schedule of ceremonial meals for the following calendar year. The facility was unable to provide any documentation of dishwashing machine temperatures during the inspection period. The facility was only able to provide refrigerator/freezer temperature check logs for seven weeks. All storage areas were unsecured during the inspection.

Recommendation: The OIC should ensure that all food service personnel receive a pre-employment physical as required. A weekly inspection should be developed that focuses on safety, security and sanitation of the kitchen. Knives should be identified and inventoried. The chemical storage room should have perpetual inventories maintained. The food service director (FSD) should provide all food service staff with written job descriptions and the responsibilities of their position. Food service employees should receive training that specifically addresses detainee related issues and the ICE food service standard. The training should be documented. Operating procedures should be developed, and implemented to ensure daily searches of work areas are con-



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ducted and documented. Non-ICE detainee worker job descriptions should be reviewed and updated annually by the FSD. A form should be implemented to document menu substitutions and the justification for the substitution. Facility staff should develop a ceremonial meal schedule and provide it to the FSD. All menus should be certified by a registered dietitian. Dishwashing machine temperatures should be taken and documented after each meal. Refrigeration and freezer temperatures should be documented twice daily and reviewed for accuracy by the FSD. All storage areas should be secured when not in use.

Sexual Abuse and Assault Prevention and Intervention

Policy: This detention standard requires that facilities that house ICE/ERO detainees affirmatively act to prevent sexual assaults on detainees, provide prompt and effective intervention and treatment for victims of sexual abuse and assault and control, discipline, and prosecute the perpetrators of sexual abuse and assault.

Finding: The facility does not have a local policy and procedure for Sexual Abuse and Assault Prevention and Intervention consistent with the ICE Zero Tolerance Policy. The medical staff is not included in annual refresher training in prevention and intervention areas required by the standard. A review of the electronic questionnaire completed by the intake officer does not contain enough information to screen for “high risk” sexual assaultive and sexual victimization potential. The SAAPI coordinator has not conducted an annual review of aggregate data regarding incidents of sexual abuse or assault. There were no tracking statistics or reports available for review by inspectors.

Recommendation: The facility should develop a local SAAPI policy and procedure consistent with the ICE Zero Tolerance Policy. All detainees should be screened for “high risk” sexual assaultive and sexual victimization potential upon arrival and housed and counselled accordingly. Medical staff should be included in the annual refresher training. An annual review should be conducted and the findings presented to the Field Office Director and ICE/ERO HQ in accordance with the requirements of the standard. Tracking statistics and reports should be readily available for inspectors.

Recommended Rating and Justification

The Lead Compliance Inspector recommends that the facility receive a rating of Deficient. The facility does not comply with the ICE National Detention Standards (NDS) for Over 72 hour facilities. Three (3) standards were found Deficient and three (3) standards were Not Applicable (N/A). All remaining thirty-three (33) standards were found to be Acceptable.

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]
- Facility Staff [REDACTED] and various other staff



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[REDACTED], Lead Compliance Inspector
Printed Name of LCI

October 25, 2018
Date

