



**Homeland
Security**

July 15, 2021

MEMORANDUM FOR: Corey A. Price
Acting Executive Associate Director
Enforcement and Removal Operation
U.S. Immigration and Customs Enforcement

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SUBJECT: Stewart Detention Center
Complaint Nos. 21-01-ICE-0048, 20-08-ICE-0712,
20-11-ICE-0943, 21-04-ICE-0186, 21-06-ICE-0299,
21-04-ICE-0187, 21-04-ICE-0188, 21-04-ICE-0189,
and 21-04-ICE-0190

On March 22-25, 2021, the U.S. Department of Homeland Security (DHS), Office for Civil Rights and Civil Liberties (CRCL) conducted a virtual onsite at the Stewart Detention Center (SDC) in Lumpkin, Georgia to review the conditions of detention for U.S. Immigration and Customs Enforcement (ICE) detainees. Specifically, CRCL investigated four COVID-19 related deaths and reviewed additional allegations concerning medical and mental health care and conditions of detention received since March 2020.

We greatly appreciate the cooperation and assistance provided by ICE and SDC personnel before and during the review. As part of the review, CRCL engaged the assistance of four subject-matter experts in the following areas: medical care, mental health care, corrections, environmental health and safety. As a result of detainee and staff interviews, document reviews, and direct observation, the subject-matter experts identified concerns in these four areas.

On March 25, 2021, as part of the out-briefing for SDC, CRCL and the subject-matter experts discussed our preliminary findings with ICE ERO field office management personnel, personnel from ICE ERO headquarters, and SDC management. During these discussions, the subject-matter experts provided recommendations to address some of the major concerns identified. Additionally, shortly following the out-briefing, CRCL sent an email to ICE on April 12, 2021, summarizing these initial recommendations, to ensure ICE had sufficient information to initiate the proposed changes.

Enclosed with this memorandum are the reports prepared by our subject-matter experts. They have been divided into priority and non-priority recommendations. Priority recommendations are listed in

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the body of this memorandum, and CRCL requests that ICE formally concur or non-concur with these recommendations and provide an implementation plan for all accepted recommendations. Non-priority recommendations are contained in a separate attachment to this memorandum. Although CRCL is not requesting formal responses to these, we encourage ICE to consider and implement these recommendations to the fullest extent possible.¹


With this memorandum, and consistent with our standard practice, we request that ICE indicate whether it concurs with the expert recommendations, and that for those agreed to, ICE provide an action plan within 60 days.

Medical

During CRCL's onsite at SDC in March 2021, CRCL's medical expert made the following priority recommendations regarding medical care at SDC. The medical recommendations all relate to the PBNDS 2011 Medical Care Standard, which requires access to appropriate and necessary medical, dental and mental health care, including emergency services.

1. SDC's Pandemic COVID-19 plan is outdated and has not integrated current recommendations of the ICE ERO COVID-19 Pandemic Response Requirements (ICE/ERO PRR) and the Centers for Disease Control and Prevention (CDC). SDC's Pandemic COVID-19 plan was not only outdated, it was also not comprehensive and failed to address the management of infectious and communicable diseases, including screening, prevention, education, identification, monitoring and surveillance, immunization (when applicable), treatment, follow-up, isolation and reporting to local, state and federal agencies. CRCL recommends that SDC revise its COVID-19 response plan to align with the current ICE/ERO PPR and CDC guidelines and ensure that they are applied operationally throughout the facility. (ICE/ERO PRR, version 6; CDC Interim Guidance on the Management of COVID-19 in Correctional and Detention Facilities [CDC Guidelines])
2. SDC's quarterly Infection Prevention and Control minutes are insufficiently detailed and do not reflect effective management of the COVID-19 pandemic over the past year. Therefore, CRCL recommends that SDC develop a more robust Infection Prevention and Control program with substantive quarterly meetings that meet the requirements of the PBNDS 2011 standard and track the implementation of the SDC COVID-19 pandemic response plan and the management of related outbreaks. (PBNDS 2011, 4.3. V. EE. Administration of the Medical Department)

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¹ CRCL's experts also provided best practice recommendations, which may be found in their respective reports.

² On March 16, 2021, ICE released a revised version of the PRR

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4. While SDC has implemented a plan for vaccinating detainees for COVID-19, ensuring that all detainees and staff are vaccinated is important to minimizing the spread of COVID-19. SDC should expedite COVID-19 vaccination of detainees and correctional staff and should periodically reoffer the vaccine to detainees and correctional staff who initially declined. ICE should ensure vaccine supply is available to SDC should vaccines be unavailable from the local or state health departments. (ICE/ERO PRR, version 6)

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7. When reviewing the medical files, CRCL identified diabetes-related concerns, specifically concerns with poorly controlled blood sugar of some detainees. As a result, CRCL recommends SDC convene a multi-disciplinary, intradepartmental team to assess the management of patients with diabetes as part of its continuous quality improvement process. Team members should include, in part, health care administrative staff, clinicians, nursing leadership, the contract dietician, food services staff, recreation staff, and security staff. Implementation of the team's recommendations for improving diabetes care at SDC should also be tracked by the facility's quality assurance program. (PBNDS 2011, 4.3. V. EE. Administration of the Medical Department)

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Mental Health

CRCL's mental health expert made the following priority recommendations regarding mental health care at SDC. The medical recommendations all relate to the PBNDS 2011 Medical Care Standard, which requires access to appropriate and necessary mental health care:

9. CRCL recommends SDC develop and maintain a robust mental health quality improvement (QI) program that includes a structured plan for both routine auditing and targeted initiatives and is sustainable over time. (PBNDS 2011, 4.3. V. EE. Administration of the Medical Department) SDC's documentation detailing the QI program did not present a picture of a thorough, well-planned, coordinated and documented system of service review. CRCL recommends SDC's quality improvement process include regular evaluation of quality and timeliness of all facets of care. Additionally, the QI process should include after action reviews or sentinel event reviews, and corrective action plans that detail actions to be taken, by whom, and in what timeframes as well as regular follow up on those projects at CQI meetings detailed in the minutes. (PBNDS 2011, 4.3. V. EE. Administration of the Medical Department)


Conditions of Detention

CRCL's conditions of detention expert made the following priority recommendations related to general conditions of detention at SDC in accordance with PBNDS 2011:

10. CRCL observed that SDC did provide detainees with limited English proficiency (LEP) a written grievance response in their preferred language. CRCL recommends that the responsible SDC official provide the detainee with a written grievance response in the detainee's preferred language or use the language line to explain the grievance response, if necessary. (6.2. Grievance System. II. Expected Outcomes)
11. Detainees receiving a disciplinary report and diagnosed with mental illness or mental disability, or that demonstrate symptoms of mental illness or mental disability are not reviewed by medical/mental health prior to a disciplinary hearing to determine if the detainee's mental health was a factor in the reported rule violation. CRCL recommends SDC ensure that medical/mental health staff evaluate detainees receiving a disciplinary report prior to a hearing to determine if their mental health issue was a factor in the reported rule violation. (3.1. Disciplinary System. P. Health Care)
12. During the staff and detainee interviews, CRCL learned that SDC does not provide LEP detainees facility information and orientation in their preferred language. CRCL recommends SDC develop and implement procedures to ensure all LEP detainees receive facility information and orientation in a language or manner they understand as required by PBNDS 2011. Additionally, SDC should ensure the interpretative services provided are properly documented. (2.1. Admission and Release; 2.13. Staff Detainee Communication. II. Expected Outcomes)
13. During the staff and detainee interviews, CRCL learned that the Prison Rape Elimination Act (PREA) screenings are conducted during admission in stations that do not provide the detainee privacy and confidentiality. CRCL recommends SDC staff conduct PREA screenings in a private area providing detainees confidentiality. (PBNDS 2011, 4.3, Medical Care, II. Expected Outcomes; ICE Sexual Abuse and Assault Prevention and Intervention (SAAPI)

14. During the staff and detainee interviews, CRCL learned that the Detainee Handbook is not always provided to detainees with LEP in a language or manner they understand as required by PBNDS 2011. CRCL recommends that SDC ensures that detainees with LEP receives the facility information, that is provided in the Detainee Handbook, in a language they understand and ensure the translating or interpretive service is documented. (6.1. Detainee Handbook. II. Expected Outcomes)
15. Many detainees stated that they were not receiving four hours of outdoor recreation, seven days a week, as required by the PBNDS 2011. Due to COVID-19, SDC has had to adjust the outdoor recreation schedule to one hour per day/seven days a week to minimize the spread of COVID-19. To keep detainees informed of the updated schedule, due to COVID-19, CRCL recommends a revision or addendum to the SDC Facility Handbook to reflect the changes to the outdoor recreation schedule. (5.4. Recreation. B. Recreation Schedule)
16. Through detainee and staff interviews, CRCL learned that the ICE staff, who are currently responsible for direct contact with detainees to address their issues and concerns, do not often communicate with the detainees with LEP in a manner they fully understand. CRCL recommends that staff use and document interpretive services when communicating with detainees with LEP. (2.13. Staff-Detainee Communication. II. Expected Outcomes)
17. After reviewing detainee files, CRCL observed some detainees were not receiving reclassification assessments within the 90-120-day intervals. CRCL recommends SDC ensure responsible SDC staff conduct required detainee reclassification within 90-120 days and special reclassification assessment prior to release from the Special Management Unit. (2.2. Classification. H. Reclassification)
18. CRCL observed that detainees in cohort status due to COVID-19 were unaware of how to obtain legal access nor were they provided meaningful access to law libraries, legal materials, and related materials no less than five (5) hours per week. CRCL recommends SDC develop and implement written procedures to ensure detainees who are in cohort status have law library access. (PBNDS 2011, 6.3. Law Libraries and Legal Material. II. Expected Outcomes)
19. Detainees assigned Housing Unit 7B on Cohort Status enter Special Management Unit 7A for access to the Special Management Unit Law Library, resulting in incidental contact and possible exposure to COVID-19 between cohort and non-cohort detainees. CRCL recommends that SDC find an alternative means for Housing Unit 4A and 4C detainees on cohort status to access the law library to prevent incidental contact between cohort and non-cohort detainees. (ICE/ERO PRR, version 6; CDC Guidelines)

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Environmental Health and Safety

CRCL's environmental health and safety expert made the following priority recommendation related to requirements in accordance with PBNDS 2011:

23. SDC issues jackets in August and collects them in March and stores them until they are issued again the following August. However, most detainees report that the air-conditioned temperatures are uncomfortably cool, especially those who do not have a jacket or additional clothing to provide an extra layer of warmth when needed. Therefore, it is recommended that the facility review and revise the policy on the issuance of jackets and issue a jacket or additional warm clothing, such as a sweatshirt, year-round to comply with PBNDS 2011. (4.5. Personal Hygiene. V. Expected Outcomes. B. Issuance of Clothing)

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General Environmental Health)

27. The Igloo style water coolers, ice chests, and ice storage bins were being cleaned and sanitized in a sink that was too small to properly clean and sanitize these items. Therefore, it is recommended that the water coolers, ice chests, and ice storage bins be taken to the kitchen, to be washed and sanitized at least daily, in compliance with PBNDS 2011. (4.1. Food Service, J. Safety and Sanitation)

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30. Detainees and some SDC employees were not aware of the contact/dwell time in accordance with the manufacturer's label directions for the chemical disinfectant used at the facility. Town hall meetings and pre-recorded videos, in various languages, shown in the housing units are recommended to disseminate information and educate detainees on cleaning and the proper use of chemicals. Failing to use disinfectants in accordance with the manufacturer's label directions, places detainees at risk of infection and disease, including COVID-19. Thus, to safeguard that chemical disinfectants are used safely and effectively, SDC should ensure that all employees that use or oversee detainees using disinfectants utilize them according to the manufacturer's directions, as specified by the PBNDS 2011. (1.2. V. Expected Practices, A. Environmental Health and Safety, 3. General Housekeeping; ICE/ERO PRR, version 6)

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The complete expert reports and recommendations are contained in the enclosed expert reports.

It is CRCL's statutory role to advise department leadership and personnel about civil rights and civil liberties issues, ensuring respect for civil rights and civil liberties in policy decisions and

implementation of those decisions. We look forward to working with ICE to determine the best way to resolve these complaints. We request that ICE provide a response to CRCL 60 days whether it concur or non-concur with these recommendations. If you concur, please include an action plan. You can send your response by email. If you have any questions, please contact Senior Policy Advisor (b)(6) by telephone at (b)(6) or by email at (b)(6).

Enclosures

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