



**Homeland
Security**

October 24, 2017

MEMORANDUM FOR: Matthew Albence
Executive Associate Director
Enforcement and Removal Operation
U.S. Immigration and Customs Enforcement

FROM: Dana Salvano-Dunn (b) (6)
Acting Deputy Officer for Programs and Compliance
Office for Civil Rights and Civil Liberties

SUBJECT: Atlanta City Detention Center
Recommendations on Complaint Nos. (b) (6)
(b) (6)

The U.S. Department of Homeland Security's (DHS) Office for Civil Rights and Civil Liberties (CRCL) is conducting an investigation into conditions of detention for U.S. Immigration and Customs Enforcement (ICE) detainees at the Atlanta City Detention Center (ACDC) in Atlanta, Georgia. CRCL's onsite investigation which occurred May 25-26, 2017, was in response to allegations received in 2016 reporting civil rights and civil liberties violations of persons detained at ACDC in the following areas: medical care, segregation, legal access, and the detainee grievance system.

We greatly appreciate the cooperation and assistance provided by ICE and ACDC personnel before and during the review. As part of the review, CRCL engaged the assistance of four subject-matter experts: a medical consultant, a mental health consultant, a corrections consultant and an environmental health and safety consultant. As a result of detainee and staff interviews, document reviews, and direct observation, the subject-matter experts identified concerns regarding the medical and mental health care, environmental health and safety, and the overall conditions at the facility.

On May 26, 2017, at the close of the onsite investigation, CRCL and the subject-matter experts discussed the general concerns found in the investigation with ICE ERO field office management, personnel from the ICE Office of Diversity and Civil Rights (ODCR) and ACDC senior management. During the discussions, the subject-matter experts also provided recommendations to address the concerns identified.¹

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

¹ In general, CRCL's experts relied on the applicable National Detention Standards (NDS 2000) for the ACDC onsite as they were the standards the facility is contractually obligated to implement.

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.²

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

Medical

CRCL's medical expert made the following priority recommendations regarding medical care at ACDC. All of these recommendations relate to the NDS Medical Care Standard, which requires timely access to medical services that promote detainee health and general well-being:

1. CRCL found medical staffing at ACDC to be inadequate. To address staffing inadequacies, ACDC should:
 - a. Add an additional licensed provider at between 0.5-1.0 FTE (20-40 hours weekly), in addition to the current full time physician, who also serves as the Clinical Medical Authority (CMA). It is further recommended that this position be scheduled to provide on-site care on Saturdays and Sundays at least 4 hours per day;
 - b. (b) (5) [Redacted]
 - c. (b) (5) [Redacted]
2. (b) (5) [Redacted]
3. (b) (5) [Redacted]

² CRCL's experts also provided best practice recommendations, which may be found in their respective reports.

identify problem areas, provide leadership with data in which to assess the problem, and objectively measure the success of interventions deployed to address the problem.

4. ACDC's medical program does not have timely access to sub-specialty care for podiatry or orthopedics. ACDC should work with ICE to secure community providers who are able to provide needed subspecialty services in areas not adequately serviced by the existing contract with Grady Hospital.
5. Currently, there appears to be no clear guidance for nurses to notify a physician for detainees with disabilities or other chronic medical problems, and for detainees with abnormal vital signs. ACDC should ensure policies and procedures are modified to require notification of the on-call physician of incoming detainees with chronic medical conditions. In addition, such detainees should be prioritized to be seen by the physician or other licensed practitioner within 24 hours. Nursing protocols should also be developed to provide clear guidelines for when to call the on-call physician with abnormal vital signs.

Mental Health

CRCL's mental health expert made the following recommendations regarding mental health care at ACDC. These recommendations relate to the NDS Medical Care Standard, which requires timely access to medical services that promote detainee health and general well-being:

6. (b) (5)
[Redacted]
7. (b) (5)
[Redacted]
 - a. (b) (5)
[Redacted]
 - b. (b) (5)
[Redacted]
 - c. (b) (5)
[Redacted]

8. (b) (5)

[Redacted]

a. (b) (5)

[Redacted]

b. (b) (5)

[Redacted]

Environmental Health and Safety

CRCL's environmental health and safety expert made the following recommendations regarding ACDC. All of these recommendations relate to the NDS Environmental Health and Safety Standard:

9. There were instances, particularly in the barber operations area, where the walls and floors were not properly cleaned. ACDC should ensure that walls and floors in the barber operations areas are cleaned regularly and scrubbed periodically to ensure that they are kept clean. (P. Guidelines for Specific Areas of the Facility: Barber Operations)
10. Sanitation in a barber service area is essential due to possible transfer of disease through direct contact with equipment, clippers, towels, combs, etc., but detainees were not trained on the proper use of equipment and proper cleaning and sanitizing procedures. ACDC should train the detainees and use a log for documenting cleaning/sanitizing processes between each detainee visit. (P. Guidelines for Specific Areas of the Facility: Barber Operations)
11. While in the medical unit, dust and debris was observed to have accumulated on the air conditioner (A/C) vents. Dust, debris and possible bacteria create opportunities for the spread of germs, viruses, and infections, and risk the health and safety of both staff and detainees. ACDC should review their housekeeping plan and provide more detailed information on cleaning and maintaining A/C vents. This plan should outline equipment and supplies to be used and exact steps to be taken to properly clean A/C vents and how to protect detainees and staff from inhaling dust and debris during the cleaning process. ACDC also should develop a schedule for ensuring that A/C vents are cleaned at regular intervals. (R. General Environmental Health Guidelines, 2. Housekeeping)

Corrections

CRCL's corrections expert made the following priority recommendation related to general conditions of detention at ACDC:

12. ACDC is not logging or reporting all allegations of staff misconduct to ICE. ICE and ACDC should develop a tracking system for all staff misconduct allegations, and ensure that each allegation is reported to ICE. (NDS, Detainee Grievance Procedures)

13. (b) (5)
14. ACDC detainees report fear of retaliation for filing grievances. ACDC should provide additional training to staff and ensure detainees are not subject to retaliation for filing grievances. (NDS, Detainee Grievance Procedures)
15. ICE's failure to replace or repair a broken printer timely for detainees to print legal documents prevents access to legal material needed for immigration proceedings. ICE should provide to ACDC a back-up printer for when the printer breaks to eliminate long periods during which detainees cannot print legal documents (NDS, Access to Legal Material)
16. (b) (5)
17. ACDC records indicate that language access resources are not frequently used to assist Limited English Proficient (LEP) detainees. ACDC should provide training to its staff on their obligations to provide meaningful access to LEP detainees and the resources that are available to assist them meet this obligation, and should document provision of this training. (DHS and ICE Language Access Plans) (PBNDS 2011, Multiple NDS Standards)
18. (b) (5)
19. ACDC records indicate that language access resources are not frequently used to assist LEP detainees, and forms and other materials contained in detainee files are written in English without any translation notation. To ensure that ACDC complies with the arrival screening requirements in the Admission and Release standard, ACDC should ensure the use of qualified interpreters or professionally translated forms to ensure meaningful access for LEP detainees. (PBNDS 2011, Admission and Release)
20. ACDC records indicate that language access resources are not frequently used to assist LEP detainees, and forms and other materials contained in detainee files are written in English. ACDC should ensure forms and informational posters for detainees are professionally translated or detainees are provided with qualified interpreters to assist with providing meaningful access to LEP detainees. (DHS and ICE Language Access Plans) (PBNDS 2011, Multiple NDS Standards)

21. ACDC's current SA-API (PREA) Program Coordinator has not received formal training regarding the role and responsibility of the position. ACDC should provide formal training to the SA-API (PREA) Program Coordinator to ensure SA-API Program mandates are in compliance with Standard mandates. (PBND 2011, SA-API)
22. ACDC does not provide accurate contact information on SA-API posters. The contact person on the SA-API posters should be updated to reflect the current SA-API Program Coordinator's name and contact information. (PBND 2011, SA-API)
23. (b) (5)
24. (b) (5)
25. (b) (5)
26. ACDC is not providing detainees in the SMU, Administrative Segregation, with NDS-required due process rights. ACDC should ensure the mandated 72 hour review is conducted when a detainee is housed in the SMU and the regular reviews are conducted within the mandated timeframes. (NDS, SMU, Administrative and Disciplinary Segregation)
27. (b) (5)

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 Policy Advisor (b) (6) by telephone at (b) (6) or by email at (b) (6)

Copies to:

Claire Trickler-McNulty
Acting Assistant Director
Agency Prevention of Sexual Assault (PSA) Coordinator
Office of Detention Policy and Planning
U.S. Immigration and Customs Enforcement
(b) (6), (b) (7)(C)

Dr. Luzviminda Peredo-Berger
Assistant Director
Enforcement and Removal Operations/ICE Health Service Corps
U.S. Immigration and Customs Enforcement
(b) (6), (b) (7)(C)

CAPT Esan O. Simon
Associate Medical Director
ICE Health Service Corps
Enforcement & Removal Operations
U.S. Immigration & Customs Enforcement
(b) (6), (b) (7)(C)

(b) (6), (b) (7)(C)

(b) (6), (b) (7)(C)

Enclosures

Appendix A – Non-Priority Recommendations
Appendix B – Medical Expert Report
Appendix C – Mental Health Expert Report
Appendix D – Environmental Health and Safety Expert Report
Appendix E – Corrections Expert Report