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Office of Detention Oversight Compliance Inspection 2024-001-335

Enforcement and Removal Operations ERO Atlanta Field Office

Alamance County Detention Facility Graham, North Carolina

April 2-4, 2024

COMPLIANCE INSPECTION of the ALAMANCE COUNTY DETENTION FACILITY

Graham, North Carolina

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COMPLIANCE INSPECTION TEAM MEMBERS

Team Lead	ODO
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FACILITY OVERVIEW

The U.S. Immigration and Customs Enforcement (ICE) Office of Professional Responsibility (OPR) Office of Detention Oversight (ODO) conducted a compliance inspection of the Alamance County Detention Facility (ACDF) in Graham, North Carolina, from April 2 to 4, 2024... The facility opened in 2007 and is owned and operated by the Alamance County Sheriff's Department. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at ACDF in 2019 under the oversight of ERO's Field Office Director in Atlanta (ERO Atlanta). The facility operates under the National Detention Standards (NDS) 2019.

An ACDF major handles daily facility operations and manages support personnel. Skillet provides food services, Southern Health Partners provides medical care, and Kimbles provides commissary services at the facility. The facility does not hold any accreditations from any outside entities.

Capacity and Population Statistics	Qua	antity
ICE Bed Capacity. ²		
Average ICE Population. ³		
Adult Male Population (as of April 2, 2024)		
Adult Female Population (as of April 2, 2024)		

During its last rated inspection, in Fiscal Year (FY) 2023, ODO found 4 deficiencies in the following areas: Medical Care (2); Recreation (1); and Significant Self-Harm and Suicide Prevention and Intervention (1).

¹ This facility holds male detainees with low, medium-low, and high security classification levels for periods greater than 72 hours.

² Data Source: ERO Custody Management Division Authorized Facility List as of March 25, 2024.

COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population of 10 or more, and where detainees are housed for over 72 hours, to assess compliance with ICE national detention standards. While these inspections focus on facility compliance with detention standards that directly affect detainee life, health, safety, and/or well-being, in FY 2024 ODO added additional standards to the scope of each full inspection to ensure ODO inspects every standard at each facility at least once every other year..⁴

ODO identifies violations of ICE detention standards, ICE policies, or operational procedures, as "deficiencies." ODO highlights instances when the facility resolves deficiencies prior to completion of the ODO inspection. Where applicable, these corrective actions are annotated with "C" under the *Compliance Inspection Findings* section of this report.

Upon completion of each inspection, ODO conducts a closeout briefing with facility and local ERO officials to discuss preliminary findings. A summary of these findings is shared with ERO management officials. Thereafter, ODO provides ICE leadership with a final compliance inspection report to: (i) assist ERO in developing and initiating corrective action plans; and (ii) provide senior executives with an independent assessment of facility operations. ODO's findings inform ICE executive management in their decision-making to better allocate resources across the agency's entire detention inventory.

⁴ ODO reviews the facility's compliance with selected standards in their entirety.

FINDINGS BY NATIONAL DETENTION STANDARDS 2019 MAJOR CATEGORIES

NDS 2019 Standards Inspected. ⁵ ,. ⁶	Deficiencies
Part 1 - Safety	•
Environmental Health and Safety	0
Sub-Total	0
Part 2 - Security	
Admission and Release	0
Custody Classification System	0
Facility Security and Control	1
Funds and Personal Property	0
Hold Rooms in Detention Facilities	0
Post Orders	0
Searches of Detainees	0
Use of Force and Restraints	0
Staff-Detainee Communication	0
Sexual Abuse and Assault Prevention and Intervention	0
Sub-Total	1
Part 4 - Care	•
Food Service	0
Hunger Strikes	0
Medical Care	0
Personal Hygiene	0
Significant Self-Harm and Suicide Prevention and Intervention	2
Sub-Total	2
Part 5 - Activities	•
Correspondence and Other Mail	0
Religious Practices	0
Telephone Access	0
Voluntary Work Program	0
Sub-Total	0
Part 6 - Justice	
Grievance System	0
Law Libraries and Legal Materials	0
Sub-Total	0
Part 7 - Administration and Management	•
Detention Files	0

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

⁶ Beginning in FY 2024, ODO instituted a process of rotating all standards every other year. As a result, some standards may not be present in all inspections.

Detainee Transfers	0
Sub-Total	0
Total Deficiencies	3

DETAINEE RELATIONS

ODO interviewed two detainees, who each voluntarily agreed to participate. The remaining detainees declined ODO's request for an interview. None of the detainees made allegations of discrimination, mistreatment, or abuse. Both detainees reported satisfaction with facility services.

COMPLIANCE INSPECTION FINDINGS

SECURITY

FACILITY SECURITY AND CONTROL (FSC)

ODO interviewed a facility major and found the facility did not conduct an annual staffing analysis (**Deficiency FSC-5**.⁷).

CARE

SIGNIFICANT SELF-HARM AND SUICIDE PREVENTION AND INTERVENTION (SSHSPI)

ODO reviewed 1 detainee medical file for a detainee on suicide status for 21 hours and found no documented 15-minute monitoring (Deficiency SSHSPI-21.8). This is a priority component.

ODO reviewed 1 medical file for a detainee on suicide status for 21 hours and found the mental health provider checked the detainee every 9 hours and 15 minutes instead of every 8 hours (Deficiency SSHSPI-22.9). This is a repeat deficiency.

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 24 standards under NDS 2019 and found the facility in compliance with 22 of those standards. ODO found three deficiencies in the remaining two standards. ACDF's last ODO rated inspection was a special review in September 2023, and since that inspection, the facility's compliance with NDS 2019 has trended

⁷ "The facility shall develop and document comprehensive detainee supervision guidelines, as well as a comprehensive staffing analysis and staffing plan, to determine and meet the facility's detainee supervision needs; these shall be reviewed and updated at least annually." *See* ICE NDS 2019, Standard, Facility Security and Control, Section (II)(A).
⁸ "The monitoring must be documented every 15 minutes or more frequently if necessary." *See* ICE NDS 2019, Standard, Significant Self-harm and Suicide Prevention and Intervention, Section (II)(F).

⁹ "A mental health provider will perform welfare checks every 8 hours." *See* ICE NDS 2019, Standard, Significant Self-harm and Suicide Prevention and Intervention, Section (II)(F).

upward...¹⁰ ACDF went from 3 deficient standards and 5 deficiencies in September 2023 to 2 deficient standards and 3 deficiencies during this most recent full inspection, which includes one priority component for not documenting a detainee on suicide status every 15-minutes and one repeat deficiency for not performing welfare checks every 8 hours. The facility's improved performance was likely the result of completing a uniform corrective action plan for their last inspection; however, the corrective action for SSHSPI-22 did not prevent a reoccurrence of that deficiency. ODO recommends ERO Atlanta continue to work with the facility to resolve the remaining deficiencies in accordance with contractual obligations.

Compliance Inspection Results Compared	FY 2023 Special Review (NDS 2019)	FY 2024 Full Inspection (NDS 2019)
Standards Reviewed	10	24
Deficient Standards	3	2
Overall Number of Deficiencies	5	3
Priority Component Deficiencies	1	1
Repeat Deficiencies	0	1
Areas Of Concern	0	0
Corrective Actions	0	0
Facility Rating	Good	Good

¹⁰ ACDF's FY 2022 ADP was 7 ICE detainees, which is why ODO conducted a special review of ACDF in FY 2023 instead of biannual inspections. The facility's FY 2023 ADP was 17, returning ACDF to biannual inspections in FY