

Office of Professional Responsibility

Saint Clair County Jail Inspection 2024-002-428

September 17-19, 2024



U.S. Immigration
and Customs
Enforcement



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

Office of Detention Oversight
Follow-Up Compliance Inspection
2024-002-428

Enforcement and Removal Operations
ERO Detroit Field Office

Saint Clair County Jail
Port Huron, Michigan

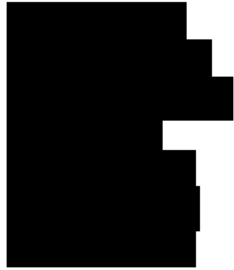
September 17-19, 2024

FOLLOW-UP COMPLIANCE INSPECTION
of the
SAINT CLAIR COUNTY JAIL
Port Huron, Michigan

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FOLLOW-UP COMPLIANCE INSPECTION TEAM MEMBERS



Team Lead	ODO
Senior Inspections and Compliance Specialist	ODO
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Contractor	Creative Corrections
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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 follow-up compliance inspection of the Saint Clair County Jail (SCCJ) in Port Huron, Michigan, from September 17 to 19, 2024.¹ This inspection focused on the standards found deficient during ODO’s last inspection of SCCJ from April 2 to 4, 2024. The facility opened in 2005 and is owned and operated by Saint Clair County Sheriff’s Office. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at SCCJ in 2007 under the oversight of ERO’s Field Office Director in Detroit (ERO Detroit). The facility operates under the National Detention Standards (NDS) 2019.

[REDACTED] An SCCJ jail administrator handles daily facility operations and manages [REDACTED] support personnel. Aramark provides food and commissary services, and YesCare Health provides medical care at the facility. The facility does not hold accreditations from any outside entities.

Capacity and Population Statistics	Quantity
ICE Bed Capacity ²	[REDACTED]
Average ICE Population ³	[REDACTED]
Adult Male Population (as of September 17, 2024)	[REDACTED]
Adult Female Population (as of September 17, 2024)	[REDACTED]

During its last rated inspection, in Fiscal Year (FY) 2024, ODO found 12 deficiencies in the following areas: Correspondence and Other Mail (2); Food Service (1); Law Libraries and Legal Material (1); Medical Care (2); Post Orders (1); Significant Self-Harm and Suicide Prevention and Intervention (2); and Voluntary Work Program (3).

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

² Data Source: ERO Custody Management Division Authorized Facility List as of September 16, 2024.

³ *Ibid.*

FOLLOW-UP COMPLIANCE INSPECTION PROCESS

ODO conducts biannual oversight inspections of ICE detention facilities with an average daily population (ADP) of 10 or more detainees, and where detainees are housed for longer than 72 hours, to assess compliance with ICE National Detention Standards. In FY 2021, to meet congressional requirements, ODO began conducting follow-up inspections at all over-72-hour ICE detention facilities with an ADP of 10 or more detainees that ODO conducted a full inspection of earlier in the FY. Follow-up inspections focus on facility compliance with detention standards that directly affect detainee life, health, safety, and/or well-being, and other standards ODO found deficient during the previous rated inspection to assess the facility's corrective actions taken to address those previously cited deficiencies.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.

While follow-up inspections are intended to focus on previously identified deficiencies, ODO will conduct a complete review of several core standards, which include but are not limited to Medical Care, Hunger Strikes, Suicide Prevention, Food Service, Environmental Health and Safety, Emergency Plans, Use of Force and Restraints/Use of Physical Control Measures and Restraints, Admission and Release, Classification, and Funds and Personal Property. ODO may decide to conduct a second full inspection of a facility in the same FY based on additional information obtained prior to ODO's arrival on-site. Factors ODO will consider when deciding to conduct a second full inspection will include the total number of deficiencies cited during the first inspection, the number of deficient standards found during the first inspection, the completion status of the first inspection's uniform corrective action plan (UCAP), and other information ODO obtains from internal and external sources ahead of the follow-up compliance inspection. Conditions found during the inspection may also lead ODO to assess new areas and identify new deficiencies or areas of concern should facility practices run contrary to ICE standards. Any areas found noncompliant during both the full and follow-up inspection are annotated as "Repeat Deficiencies" in this report.

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	0
Funds and Personal Property	0
Use of Force and Restraints	0
Special Management Units	0
Staff-Detainee Communication	0
Sub-Total	0
Part 4 – Care	
Food Service	0
Hunger Strikes	0
Medical Care	2
Significant Self-Harm and Suicide Prevention and Intervention	0
Sub-Total	2
Part 5 – Activities	
Correspondence and Other Mail	0
Telephone Access	0
Sub-Total	0
Part 6 – Justice	
Grievance System	0
Law Libraries and Legal Material	0
Sub-Total	0
Total Deficiencies	2

⁵ For greater detail on ODO’s findings, see the *Follow-up 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 RELATIONS

ODO interviewed seven detainees, who each voluntarily agreed to participate. ODO attempted to interview 11 additional detainees; however, the detainees declined ODO's request for an interview. None of the detainees made allegations of discrimination, mistreatment, or abuse. All detainees reported satisfaction with facility services.

FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

CARE

MEDICAL CARE (MC)

ODO reviewed █ detainee medical records and found in █ out of █ records, the facility did not complete a tuberculosis (TB) screening of the detainee prior to placing the detainee in general population (**Deficiency MC-18⁷**). **This is a repeat deficiency and a priority component.**

ODO reviewed █ detainee medical files and found in █ out of █ medical files, the facility did not provide the detainee with a detailed medical care summary upon release from ERO Detroit custody (**Deficiency MC-111⁸**).

CONCLUSION

During this follow-up inspection, ODO assessed the facility's compliance with 16 standards under NDS 2019 and found the facility in compliance with 15 of those standards. ODO found two deficiencies in the remaining standard. Since SCCJ's last full inspection in April 2024, the facility's compliance with the NDS 2019 has trended upward. SCCJ went from 7 deficient standards and 12 deficiencies, including 4 priority component deficiencies in April 2024, to 1 deficient standard and 2 MC deficiencies during this most recent inspection. One of the two MC deficiencies was also a priority component and repeat deficiency for not completing the TB screening of a detainee. ODO received a completed UCAP for its last inspection of SCCJ in April 2024 on October 23, 2024. ODO was not able to assess the effectiveness of that UCAP on this inspection but notes 10 out of 12 previously cited deficiencies appear to be resolved. ODO recommends ERO Detroit continue to work with the facility to resolve the deficiencies that remain outstanding in accordance with contractual obligations.

⁷ "All new arrivals shall receive tuberculosis (TB) screening in accordance with the most current Centers for Disease Control and Prevention (CDC) guidelines, including, but not limited to, CDC Guidelines for Correctional Facilities, prior to being placed in general population." See ICE NDS 2019, Standard, Medical Care, Section (II)(D)(1).

⁸ "Upon removal or release from ICE/ERO custody, the detainee shall be provided medication (in quantities specified below), referrals to community-based providers as medically appropriate, and a detailed medical care summary." See ICE NDS 2019, Standard, Medical Care, Section (II)(Q)(3)(b).

Compliance Inspection Results Compared	FY 2024 Full Inspection (NDS 2019)	FY 2024 Follow-Up Inspection (NDS 2019)
Standards Reviewed	24	16
Deficient Standards	7	1
Overall Number of Deficiencies	12	2
Priority Component Deficiencies	4	1
Repeat Deficiencies	1	1
Areas Of Concern	1	0
Corrective Actions	0	0
Facility Rating	Acceptable/Adequate	N/A



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