

10 West Jackson Boulevard, Room 553 Chicago, IL 60604



March 14, 2007

MEMORANDUM FOR:

John P. Torres

Director

Office of Detention and Removal

FROM:

Deportation Officer Chicago Field Office

(b)(6), (b)(7)c

SUBJECT:

Tri-County Detention Center Annual Detention Review

The Chicago Field Office, Office of Detention and Removal conducted a detention review of the Tri-County Detention Center on March 6<sup>th</sup> and 7<sup>th</sup>, 2007. Deportation Officer and Immigration Enforcement Agent conducted this review. This facility is used for detainees requiring housing over 72 hours.

## Type of Review:

This review is a scheduled Operational Review to determine general compliance with established Immigration and Customs Enforcement (ICE) National Detention Standards. The last review of this facility was on April 4<sup>th</sup> and 5<sup>th</sup>, 2006.

#### **Review Summary:**

This facility was last inspected by the State of Illinois in July 2006, and received an acceptable rating. The next scheduled state inspection will be in July 2007. The facility was last inspected by ICE in April 2006, and received an acceptable rating at that time.

## **Review Findings:**

The following information summarizes those standards <u>not</u> in compliance. Each standard is identified and a short summary provided regarding standards or procedures not currently in compliance.

Compliant - 37
Deficient - 0
At-Risk - 0
Non-Applicable - 1



## Standards Summary Findings:

No standards were found to be deficient.

### **RIC Observations:**

BEST PRACTICE: The facility encourages their staff to informally resolve any issues before taking official action. This results in a more efficient and effective way to handle most grievances and complaints presented to the jail staff. They also have an excellent work program that reimburses the detainees a dollar a day towards their commissary accounts or calling cards. The detainees are very happy with this arrangement because they are not even allowed to participant in any type of work related programs at other facilities.

Direct supervision has been recently implemented when twenty-four or more detainees are housed in the pods. This facilitates communication between the staff and detainees as well as closely observing the atmosphere and behaviors being exhibited by the detainees.

The facility often receives detainees without being classified by ICE for several days. These detainees are usually BOP releases, anti-smuggling, worksite and fugitive cases. As a result, the facility temporarily classifies these detainees upon arrival for placement in general population. Their classification levels mirror ICE policy and adjustments are made, if necessary, after ICE classification is received. Their policies are presently being revised to reflect this change.

STAFF: The Staff was extremely helpful and attentive to suggestions and open to any new ideas to assist their facility operate more efficiently. The facility contract was recently acquired by the GEO Group Inc., and the staff feels they are finally getting the support and attention they need to carry out their duties.

COMMUNICATION: There are no significant concerns or issues as a result of this review. The facility has a full-time contract monitor employed by the county to manage and handle any issues between the facility and ICE.

#### RIC Issues and Concerns:

ICE needs to make a better effort in classifying detainees that arrive at this facility as soon as possible to insure they are properly classified. At present, the facility reports it takes between two to seven days before they receive a classification level from ICE. There may be other pertinent or crucial information that is not available to this facility to properly classify a detainee as they temporarily assign classification levels based entirely on their criminal history.

# Recommended Rating and Justification:

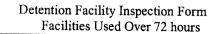
It is the Reviewer in Charge recommendation that the facility receive a rating of "Acceptable".

### **RIC Assurance Statement:**

All findings of this review have been documented on Form G-324A and are supported by the written documentation contained in the review file.

# **BEST COPY AVAILABLE**





Immigration and Customs Enforcer	nent
mingration and Customs Enforcer	IICIII
A. Type of Facility Reviewed	
ICE Service Processing Cen	. 4
ICE Contract Detention Fa	
	~
ICE Intergovernmental Ser	vice Agreement
B. Current Inspection	
Type of Inspection	
Field Office HQ Inspection	
Date[s] of Facility Review	
March 6 <sup>th</sup> & 7 <sup>th</sup> , 2007	
Water 6 & 7, 2007	
C. Previous/Most Recent Facility F	Review
Date[s] of Last Facility Review	
April 4 <sup>th</sup> & 5th, 2006	
Previous Rating	
☐ Superior ☐ Good ☒ Acceptable	☐ Deficient ☐ At-Risk
D. Name and Location of Facility	
Name	
Tri-County Detention Center	
Address (Street and Name) 1027 Shawnee College Road	
City, State and Zip Code	
Ullin, Illinois 62992	
County	
Pulaski	7-1-10100
Name and Title of Chief Executive Officer (W	arden/OIC/Superintendent)
Telephone # (Include Area Code)	
618-845- (b)(6)	
Field Office / Sub-Office (List Office with ove	rsight responsibilities)
Chicago Field Office Distance from Field Office	
365 miles	
E. ICE Information	
Name of Inspector (Last Name, Title a	nd Duty Station)
(b)(6). (b)(7)c / Deportation Officer / Chica	
Name of Team Member / Title / Duty l	ocation
(b)(6). (b)(7)c / Immigration Enforcement	t Agent / St Louis
MO Sub Office	origine / St. Douis,
Name of Team Member / Title / Duty I	ocation
/ /	
Name of Team Member / Title / Duty I	ocation
/ /	
,	
F. CDF/IGSA Information Only	
	of Contract or IGSA
25-99-0135 Date 6	
Basic Rates ner Man-Day	4UU7

48.60

48,900

Transportation;;;

Estimated Man-days Per Year

Other Charges: (If None, Indicate N/A)

G. Accreditation						
List all State or N	lation	al Acc	redita	tion[s] rece	ived:	
Check box if	facili	ty has	no ac	creditation[	s]	
H. Problems / C	Comp	laints	(Cor	oies must b	e attached)	
The Facility is un Court Order	der C			or Class Act s Action Oi		
The Facility has S	Signif	icant I	itigat	ion Pending	3	
Major Litigati	on		Life	Safety Issu	es	
Check if Non	е.			1,000		
I. Facility Hist	ory					
Date Built						
January 1999				·		
Date Last Remod	eled o	or Upg	raded			
Date New Constr	uction	1 / Dad	C***	. Addad		
N/A	uctioi	17 Deu	space	Added		
Future Constructi	on Pl	anned				
☐ Yes ⊠ No						
Current Bedspace	: [	Future	Bed	space (# Ne	w Beds only)	
226		Numb	er:	Date:	,	
Total Facility Inta 40,000 Total ICE Manday 48,913	ys for	Previo	ous 12	! months		
K. Classification	n Lev					
Adult Male		L-		L-2	L-3	
Adult Female	-+	15,9 10		20,261		
1 Idan I Omaio			,	<u> </u>	0	
L. Facility Capa	acity					
	Rated Operational Emergency					
Adult Male	22	226		226	226	
Adult Female	0			0	0	
☐ Facility holds J	uveni	les Offe	ender	s 16 and olde	er as Adults	
M. Average Dail	v Por	nulatio	m			
	ICE USMS Other					
Adult Male		150		20	20	
Adult Female		8		0	0	
N. Facility Staffing Level						
Security:	<u> </u>	Support:				
34			6	•		







## Significant Incident Summary Worksheet

For ICE to complete its review of your facility, the following information <u>must be completed</u> prior to the scheduled review dates. The information on this form should contain data for the past twelve months in the boxes provided. The information on this form is used in conjunction with the ICE Detention Standards in assessing your Detention Operations against the needs of the ICE and its detained population. This form should be filled out by the facility prior to the start of any inspection. Failure to complete this section will result in a delay in processing this report and the possible reduction or removal of ICE' detainees at your facility.

Incidents	Description	Jan – Mar	Apr – Jun	Jul - Sept	Oct - Dec
<b>.</b>	7 (7 12 12 11 11 11 11 11 11 11 11 11 11 11	2-Physical	1-Physical	0	3-Physical
Assault: Offenders on	Types (Sexual <sup>2</sup> , Physical, etc.)				
Offenders of	With Weapon	0	0	0	0
	Without Weapon	2	1	0	3
Assault:	Types (Sexual Physical, etc.)	1 - Physical	0	0	0
Detainee on Staff	With Weapon	0	0	0	0
	Without Weapon	1	0	0	0
Number of Forced Moves, incl. Forced Cell moves <sup>3</sup>		0	0	0	0
Disturbances <sup>4</sup>		0	0	0	0
Number of Times Chemical Agents Used		0	0	1	2
Number of Times Special Reaction Team Deployed/Used		0	0	0	0
# Times Four/Five Point	Number/Reason (M=Medical, V=Violent Behavior, O=Other)	0	0	0	0
Restraints applied/used	Type (C=Chair, B=Bed, BB=Board, O=Other)	0	0	0	0
Offender / Detainee Medical Referrals as a result of injuries sustained.		1	0	1	1
Escapes	Attempted	0	0	0	0
	Actual	0	0	0	0
Grievances:	# Received	1	1	0	2
	# Resolved in favor of Offender/Detainee	1	1	0	0
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)	0	0	0	0
	Number	0	0	0	0
Psychiatric / Medical Referrals	# Medical Cases referred for Outside Care	1	0	0	1
	# Psychiatric Cases referred for Outside Care	1	1	1	1

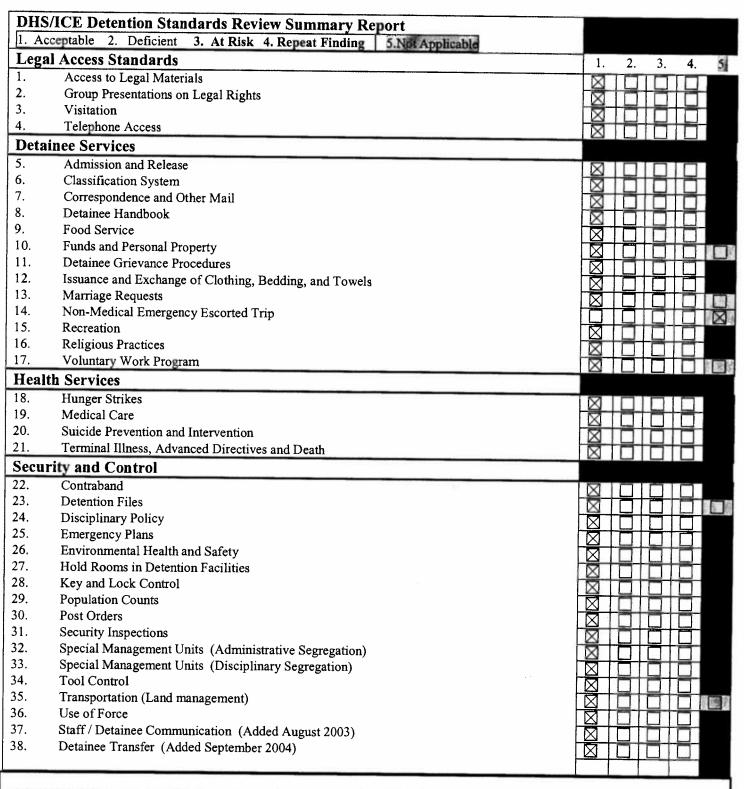
Any attempted physical contact or physical contact that involves two or more offenders

Oral, anal or vaginal penetration or attempted penetration involving at least 2 parties, whether it is consenting or non-consenting

Routine transportation of detainees/offenders is not considered "forced"

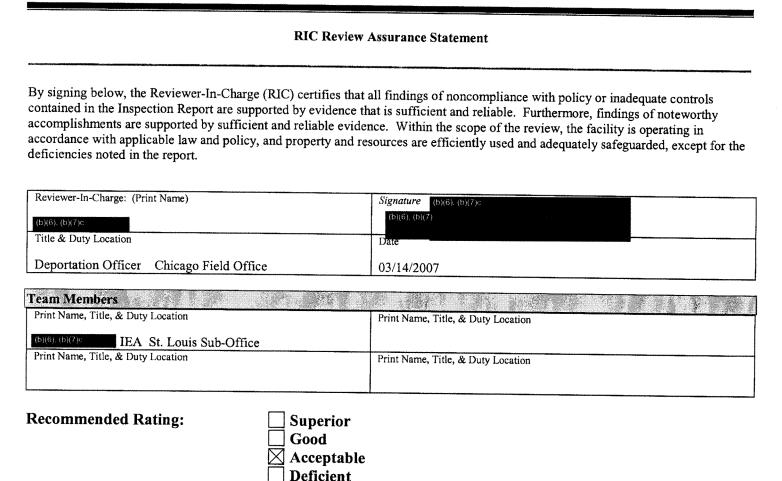
Any incident that involves four or more detainees/offenders, includes gang fights, organized multiple hunger strikes, work stoppages, hostage situations, major fires, or other large scale incidents.

#### **BEST COPY AVAILABLE**



All findings (Deficient and At-Risk) require written comment describing the finding and what is necessary to meet compliance.





#### Comments:

Tri-County Detention is under new management by the GEO Group, Inc. and has corrected their deficient catagories during the last ICE inspection in April 2006. They were rated deficient in the Hold Rooms in Detention Facilities along with Environmental Health and Safety. As a result, they no longer accept female detainees to maximize their housing capabilities. During the last inspection, the facility kept the female detainees in their holding rooms instead of placing them in the pods due to their small numbers and their pods have a capacity of fifty. Secondly, they have added exit signs and directional floor escape routes where they are needed to facilitate an emergency exit or evacuation.

At-Risk





Review Autho	rity		
The signature b	pelow constitutes review of this report at report to respond to all findings and i	nd acceptance by the Review Authority. OIC/CEO will have 30 day recommendations.	s from
HQDRO EXECU	JTIVE REVIEW: (Please Print Name)	Signature	
(b)(6). (b)(7)c			
Title		Date	<del></del>
Chief-DSCU		- S/9/27	
Final Rating:	Superior	, ,	<del></del>
_	Good		
	Acceptable		
	☐ Deficient		
	At-Risk		
Comments:	The Review Authority concurs with has justified the rating.	the recommended rating of "Acceptable". The Reviewer-In-Charge	