Office of Professional Responsibility

Miami Correctional Center

Inspection 2026-001-150

September 15-17, 2026

U.S. Immigration and Customs Enforcement

INSPECTION
of the
MIAMI CORRECTIONAL CENTER
Bunkerhill, Indiana

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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 an inspection of the Miami Correctional Center (MCC) in Bunkerhill, Indiana, from September 15 to 17, 2026..[1] The facility opened in 1998 and is owned and operated by Indiana Department of Correction. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at MCC in 2025 under the oversight of ERO's Field Office Director in Chicago (ERO Chicago). The facility is a non-dedicated ICE detention facility and operates under National Detention Standards (NDS) 2026 (Revised June 2026).

ERO Chicago deportation officers are not assigned full-time to the facility but conduct weekly scheduled visits on (b)(7)(e) A corrections administrator handles daily facility operations and manages (b)(7)(e) support personnel. Aramark provides food services, Centurion Health provides medical care, and Indiana Correctional Industries provides commissary services at the facility. The facility does not hold any accreditations from any outside entities. In September 2024, MCC was audited for the Department of Justice (DOJ) Prison Rape Elimination Act (PREA) and was found DOJ PREA compliant.

Capacity and Population Statistics	Quantity
ICE Bed Capacity.[2]	(b)(7)(e)
Average ICE Population.[3]	(b)(7)(e)
Adult Male Population (as of September 15, 2026)	(b)(7)(e)
Adult Female Population (as of September 15, 2026)	(b)(7)(e)

This is ODO's first inspection of MCC.

[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 10, 2026.
[3] *Ibid.*

INSPECTION PROCESS

ODO conducts the following annual and biennial oversight inspections of ICE detention facilities to assess and rate each facility's compliance with their contractually obligated detention standards as noted in the Facility Overview section above.

- Dedicated facility: ODO conducts annual on-site inspections of dedicated inter-governmental service agreement (IGSA) facilities, contract detention facilities (CDF), family residential centers, and service processing centers.

- Non-dedicated IGSA facility:
  - For facilities with an average daily population (ADP) of 50 or more, ODO conducts biennial on-site inspections.
  - For facilities with an ADP of 50 or less,
    - If the facility has not previously had a rated ODO inspection, then ODO conducts an initial on-site inspection, and
    - If the facility has had an ODO inspection, then the facility completes a biennial ODO-assisted self-inspection process (OASIP).

- U.S. Marshals Service (USMS): USMS CDF and intergovernmental agreement facilities complete biennial OASIPs.

In FY 2025, ODO implemented OASIPs, which replaced the annual Special Review inspections ODO conducted at most low ADP and/or short-term use facilities. This new inspection framework is more reflective of the actual operation demand of facilities with a low ADP and/or short-term use. OASIP inspections focus on facility compliance with detention standard requirements that directly affect detainee life, health, safety, and/or well-being. Facilities have 30 calendar days to complete the OASIP inspection and ODO staff will go on-site for 1 day towards the end of the 30-day inspection window to observe facility conditions, interview ICE detainees, and spot-check the facility's reported findings.[4]

ODO defines a "deficiency" as any violation of detention standards, policies, or operational procedures, as applicable. ODO highlights instances when the facility resolves deficiencies prior to the completion of the ODO inspection as corrective actions. Where applicable, these corrective actions are annotated with a "C" in the *Inspection Findings* section of the report.

Upon completion of each inspection, ODO conducts a closeout briefing with facility and local ERO officials to discuss preliminary findings. ODO shares a summary of these findings with ERO management officials. Thereafter, ODO provides ICE leadership with a final report to: (i) assist ERO in developing and initiating uniform corrective action plan (UCAP); 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] When ODO conducts on-site inspections for non-OASIP facilities, the facility is notified 4 weeks before the inspection and ODO is on-site for 2-3 business days conducting the inspection.

FINDINGS BY NATIONAL DETENTION STANDARDS 2026 MAJOR CATEGORIES

NDS 2026 Standards Inspected[5]	Deficiencies
Part 1 - Safety	
Language Assistance	0
Environmental Health and Safety	1
Sub-Total	**1**
Part 2 - Security	
Admission and Release	2
Custody Classification System	0
Facility Security and Control	0
Funds and Personal Property	1
Post Orders	0
Searches of Detainees	0
Use of Force and Restraints	1
Special Management Units	5
Staff-Detainee Communication	0
Sexual Abuse and Assault Prevention and Intervention	0
Sub-Total	**9**
Part 4 - Care	
Food Service	2
Hunger Strikes	0
Medical Care	1
Personal Hygiene	0
Significant Self-Harm and Suicide Prevention and Intervention	0
Sub-Total	**3**
Part 5 - Activities	
Correspondence and Other Mail	0
Religious Practices	0
Telephone Access and Advanced Communication Services	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
Detainee Transfers	0
Sub-Total	**0**
Total Deficiencies	**13**

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

DETAINEE RELATIONS

ODO interviewed 14 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. All detainees reported satisfaction with facility services.

INSPECTION FINDINGS

SAFETY

ENVIRONMENTAL HEALTH AND SAFETY (EHS)

ODO interviewed MCC staff, toured the facility and found 10 waste containers in 5 housing units did not comply with standards issued by the National Fire Protection Association (NFPA). Specifically, the waste containers were constructed of plastic and noncombustible approved materials that will contain a fire without contributing to a spread **(Deficiency EHS-33[6])**. **This is a priority component**.

SECURITY

ADMISSION AND RELEASE (AR)

ODO reviewed 28 detention files and found 25 out of 28 detainees were not afforded the opportunity to make a free telephone call during their intake processing. Specifically, 25 out of 28 files contained no documentation of made or declined phone calls **(Deficiency AR-6[7])**.

ODO reviewed 25 detention files and found in 3 out of 25 detention files; files did not contain an inventory form for funds, valuables or other personal property. Specifically, detainees arrive with no documented inventory or receipt for items discovered during the search for funds, valuables, or other personal property **(Deficiency AR-12[8])**.

[6] "The facility will comply with federal standards and regulations issued by the NFPA, EPA and OSHA, and the applicable standards of the American Society for Testing and Materials, American National Standards Institute, and Underwriters' Laboratories or Factory Mutual Engineering Corporation. Such topics will include, but are not limited to, fire safety codes; regular fire and safety inspections; a fire prevention, control and evacuation plan and fire drills." *See* ICE NDS 2026, Standard, Environmental Health and Safety, Section (II)(D).

[7] "Detainees will be afforded the opportunity to make a free telephone call. The facility staff shall document that the detainee made this phone call or declined the opportunity to make a call." *See* ICE NDS 2026, Standard, Admission and Release, Section (II)(A)(5).

[8] "All items discovered during the search will be identified as funds, valuables, or other personal property, to be kept in the detainee's possession or inventoried, receipted, and stored." *See* ICE NDS 2026, Standard, Admission and Release, Section (II)(B).

FUNDS AND PERSONAL PROPERTY (FPP)

ODO interviewed facility staff and reviewed 5 detainee files and found all five released detainees lacked signed receipts documenting the return of their funds and personal property **(Deficiency FPP-22[9])**.

USE OF FORCE AND RESTRAINTS (UOFR)

ODO reviewed 14 detention files and found in 6 out of 14 files the facility review team did not submit its report to the facility administrator within 5 working days after UOFR incidents, although the detainees were not placed in restraints at the conclusion of the UOFR incident **(Deficiency UOFR-89[10])**.

SPECIAL MANAGEMENT UNITS (SMU)

ODO reviewed eight detainee disciplinary segregation (DS) files for detainees placed in DS and found eight out of eight files did not include:

- Documented DS orders **(Deficiency SMU-33[10,11])**;
- Documented DS orders with all relevant documentation attached **(Deficiency SMU-34[12])**;
- Documentation indicating DS orders were provided to detainees **(Deficiency SMU-35[13])**;
- Releasing officer's signature and recorded date on the release orders **(Deficiency SMU-36[14])**; and
- Completed disciplinary detainee segregation orders in the detainee's detention files or stored in a retrievable electronic format **(Deficiency SMU-37[15])**.

[9] "Following a property check, the detainee must sign a receipt confirming the return of all funds and personal property due to them." *See* ICE NDS 2026, Standard, Funds and Personal Property, Section (II)(E).
[10] "The facility review team shall complete and submit its report to the facility administrator within five working days of the incident or the detainee's release from restraints." *See* ICE NDS 2026., Standard, Use of Force and Restraints (II0(J)(5).
[11] "A written order shall be completed and signed by the chair of the IDP (or equivalent) before a detainee is placed in disciplinary segregation." *See* ICE NDS 2026, Standard, Special Management Unit, (II)(B)(2).
[12] "Prior to placement, the IDP shall complete a disciplinary segregation order detailing the reasons for the segregation, with all relevant documentation attached." *See* ICE NDS 2026, Standard, Special Management Unit, (II)(B)(2)(a).
[13] "The completed order shall be immediately provided to the detainee and communicated in a language or manner they understand, unless doing so would compromise the facility's safety, security, or orderly operation." *See* ICE NDS 2026, Standard, Special Management Unit (II)(B)(2)(b).
[14] "Upon the detainee's release from disciplinary segregation, the releasing officer shall sign the order and record the date and time of release." *See* ICE NDS 2026, Standard, Special Management Unit (II)(B)(2)(c).
[15] "The completed order shall be included in the detainee's detention file or stored in a retrievable electronic format." *See* ICE NDS 2026, Standard, Special Management Unit (II)(B)(2)(c).

SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION (SAAPI)

ODO reviewed 25 training files and found initial SAAPI training was completed; however, the facility did not have documentation indicating biennial refresher training was completed. ODO noted this as an **Area of Concern.**[16]

CARE

FOOD SERVICE (FS)

ODO interviewed the facility chaplain and found the chaplain did not schedule ceremonial meals nor provide a subsequent calendar schedule **(Deficiency FS-54**[17]**)**.

ODO interviewed the facility chaplain and found the chaplain did not develop a ceremonial-meal schedule **(Deficiency FS-55**[18]**)**.

MEDICAL CARE (MC)

ODO reviewed 25 medical files and found 1 out of 25 detainees did not receive tuberculosis screening in accordance with the most current Centers for Disease Control and Prevention guidelines prior to being placed in general population **(Deficiency MC-19**[19]**)**. **This is a priority component**.

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 25 standards under NDS 2026 and found the facility in compliance with 17 of those standards. ODO found 13 deficiencies in 8 standards. This was ODO's first inspection of MCC so prior inspection data does not exist for ODO to perform a trend analysis. ODO recommends ERO Chicago continue to work with the facility to resolve the deficiencies that remain outstanding in accordance with contractual obligations.

[16] "…The facility must implement written policy and procedures and meet all requirements in this standard within 90 days of adopting this standard." *See* ICE NDS 2026, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(A)(7).

[17] "The chaplain, in consultation with local religious leaders, if necessary, shall develop the ceremonial-meal schedule for the subsequent calendar year, providing it to the facility administrator." *See* ICE NDS 2026, Standard, Food Service, Section (II)(F)(5).

[18] "This schedule shall include the date, religious group, estimated number of participants, and special foods required." *See* ICE NDS 2026, Standard, Food Service, Section (II)(F)(5).

[19] "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 2026, Standard, Medical Care, Section (II)(D)(3).

Inspection Results Compared	No Previous ODO Inspection	FY 2026 NDS 2026
Standards Reviewed	N/A	25
Deficient Standards	N/A	8
Overall Number of Deficiencies	N/A	13
Priority Component Deficiencies	N/A	2
Repeat Deficiencies	N/A	N/A
Areas Of Concern	N/A	1
Corrective Actions	N/A	0
Facility Rating	N/A	Acceptable/Adequate

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