

Summary of Conference Call

U.S. Immigration and Customs Enforcement
Advisory Committee on Family Residential Centers
Subcommittee on Medical and Mental Health
September 6, 2016

The U.S. Immigration and Customs Enforcement (ICE) Advisory Committee on Family Residential Centers (ACFRC), Subcommittee on Medical and Mental Health convened for its weekly meeting on Tuesday, September 6, 2016, via teleconference from 1:30 P.M. to approximately 2:40 P.M.

Attendance:

Subcommittee Members Present for the Teleconference:

- Leslye Orloff
- Judith Dolins
- Dr. Andres Pumariega
- Dr. William Arroyo

Others Present:

- John Amaya, Deputy Chief of Staff, ICE; Designated Federal Officer (DFO), ACFRC
- Andrea Washington, Special Assistant, ICE

Opening Remarks:

Chair Leslye Orloff conducted the roll call of the subcommittee members, noting that Dr. William Arroyo would be dialing in later. She also acknowledged ICE staff on the line.

General Meeting:

Chair Orloff began the meeting by telling the subcommittee that Special Assistant Andrea Washington would have the first few minutes of the call to provide an update to members.

Ms. Washington informed subcommittee members that they would receive a finalized date for the full Committee public meeting by close of business, and she thanked everyone for their patience throughout the process of solidifying the meeting date. Chair Orloff thanked Ms. Washington for the update.

The Chair then transitioned the discussion to the group's recommendations, stating that she wanted to go through the remarks members made in the draft document. The subcommittee talked about and resolved differences on the following topics:

- Mental health evaluations;
- Developmental screening;
- Screening for Zika in relation to CDC guidelines;
- Ensuring CDC guidelines are followed for applicable communicable diseases for the population at the family residential centers (FRCs);

- Off-site rape kit testing; and
- Having test results provided to detainees in a manner that complies with the Health Insurance Portability and Accountability Act.

Subcommittee members then briefly discussed the use of “must” versus “should.” Chair Orloff said she was going through the document changing many of the “shoulds” to “musts” to clarify what recommendations absolutely need to be implemented at the FRCs.

Chair Orloff also brought up where and how to pull in standards from the Performance-Based National Detention Standards (PBNDS) because they are substantially better than the Family Residential Standards (FRS). She also talked about how to note when best practices in the field are better than both the PBNDS and the FRS, and each standard needs to be changed to reflect such. Vice Chair Judith Dolins said this information was essentially outlined in the draft introduction, but stated that perhaps the introduction needs to be tighter to make this clearer. The Vice Chair added that in the materials provided to members by ICE, it is stated that the agency is already supposed to follow the PBNDS where it is better than the FRS. Chair Orloff asked Ms. Washington if the subcommittee could use this point in their document, and Ms. Washington answered that the group is free to cite from materials ICE has given to members. The Chair said doing so would make many of the recommendations easier, though it would also mean having to do a more robust comparison of the two standards in the next round of editing and review.

The subcommittee then shifted back to discussing issues, including:

- Referral of detainees for comprehensive evaluation;
- Formularies of psychiatric medications, in particular use of the Texas Medication Algorithm Project as a guide/standard;
- Citations for best practices related to credentials for mental health professionals;
- Access to resources such as health insurance and/or affordable medical and mental health services in the communities families move to after release;
- A database of community-based mental health resources;
- Ensuring detainees have a clear understanding of the American mental health system, particularly intake and enrollment procedures;
- Making the FRC environment as much of a non-institutionalized environment as possible;
- Providing support for trauma victims in an environment that fosters and encourages self-care; and
- What staff with the Department of Homeland Security Office for Civil Rights and Civil Liberties should be looking for during on-site inspections.

Vice Chair Dolins, having found the language regarding the FRCs and the PBNDS, told the group that the text states that family residential centers also adhere to applicable sections of the PBNDS, if those standards provide a higher level of care for the families. Chair Orloff said she would take on the task of going through the subcommittee’s document and finding where the PBNDS would fit as a higher standard. Dr. William Arroyo, expressing his dislike for all of the current standards, said he would like for the group to promote healthcare standards beyond the PBNDS.

Chair Orloff then moved to wrap up the call. She tabled the issue regarding the title of the subcommittee's section. She also reminded subcommittee members that she would be sharing the group's draft recommendations with the broader Committee, and they should expect feedback by close of business on September 12.

Chair Orloff thanked members for participating in the call and adjourned the meeting.

Adjournment:

The subcommittee adjourned at approximately 2:40 P.M.