



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

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Office of Detention Oversight  
Compliance Inspection

Enforcement and Removal Operations  
ERO Chicago Field Office  
Boone County Jail  
Burlington, Kentucky

March 20 - 22, 2018

**COMPLIANCE INSPECTION  
for the  
BOONE COUNTY JAIL  
Burlington, Kentucky**

**TABLE OF CONTENTS**

**OVERVIEW**

Facility Overview ..... 1  
Findings by National Detention Standards (NDS) 2000 Major Categories..... 2

**COMPLIANCE INSPECTION PROCESS**..... 3

**DETAINEE RELATIONS** ..... 4

**COMPLIANCE INSPECTION FINDINGS** ..... 5

**DETAINEE SERVICES**..... 5  
Detainee Grievance Procedures..... 5  
Funds and Personal Property ..... 5

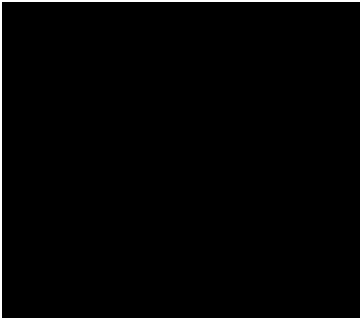
**SECURITY AND CONTROL** ..... 5  
Environmental Health and Safety..... 5

**HEALTH SERVICES** ..... 6  
Medical Care..... 6

**CONCLUSION** ..... 6

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**COMPLIANCE INSPECTION TEAM MEMBERS**



Lead Inspections and Compliance Specialist	ODO
Inspections and Compliance Specialist	ODO
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Unit Chief	ODO
Contractor	Creative Corrections
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## FACILITY OVERVIEW

The Office of Detention Oversight (ODO) conducted a compliance inspection of the Boone County Jail (BCJ), in Burlington, Kentucky, from March 20-22, 2018<sup>1</sup>. BCJ opened in 2005 and is owned by the Boone County Fiscal Court and operated by the Boone County Jail. The Office of Enforcement and Removal Operations (ERO) began housing detainees at BCJ in 2005 under the oversight of ERO's Field Office Director (FOD) in Chicago. The facility operates under the National Detention Standards (NDS) 2000.

No Detention Services Manager (DSM) or ERO Deportation Officers (DO) are assigned to the facility. An elected jailer is responsible for daily facility operations and is supported by █ personnel. BCJ provides food services and medical care is provided by Southern Health Partners. BCJ is not contractually obligated to comply with the ICE Performance-Based National Detention Standards (PBNDS) 2011 Sexual Abuse and Assault Prevention and Intervention Standard<sup>2</sup>. The facility does not hold any accreditations.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity <sup>3</sup>	150
Average ICE Detainee Population <sup>4</sup>	146
Male Detainee Population (as of 03/20/2018)	133
Female Detainee Population (as of 03/20/2018)	5

In FY 2014, ODO conducted an inspection of BCJ and found 20 deficiencies in the following areas: Access to Legal Material (2 deficiencies), Detainee Classification System (1), Detainee Grievance Procedures (2), Environmental Health and Safety (2), Funds and Personal Property (3), Medical Care (4), Recreation (1), Staff-Detainee Communication (1), Suicide Prevention and Intervention (3), and Telephone Access (1).

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<sup>1</sup> This facility holds male and female detainees with low, medium low, medium high, and high security classification levels for periods greater than 72 hours.

<sup>2</sup> BCJ completed a Department of Justice (DOJ) Prison Rape Elimination Act (PREA) audit in September 2016. The facility has a zero-tolerance policy acknowledged by all staff members and detainees. Additionally, BCJ Inmate Rules and Regulations Manual, dated January 2018, includes the zero-tolerance policy statement and other information on PREA that can provide PREA related support to the detainees. BCJ had zero PREA/SAAPI incidents involving ICE detainees in the 12 months preceding the inspection.

<sup>3</sup> Data Source: ERO Facility List Report as of March 19, 2018.

<sup>4</sup> *Ibid.*

## FINDINGS BY NATIONAL DETENTION STANDARDS (NDS) 2000 MAJOR CATEGORIES

NDS 2000 STANDARDS INSPECTED <sup>5</sup>	DEFICIENCIES
<b>Part 1 – Detainee Services</b>	
Access to Legal Material	0
Admission and Release	0
Detainee Classification System	0
Detainee Grievance Procedures	0
Detainee Handbook	0
Food Service	0
Funds and Personal Property	1
Staff-Detainee Communication	0
Telephone Access	0
Use of Force and Restraints	0
<b>Sub-Total</b>	<b>1</b>
<b>Part 2 – Security and Control</b>	
Environmental Health and Safety	2
Special Management Unit (Administrative Segregation)	0
Special Management Unit (Disciplinary Segregation)	0
Use of Force	0
<b>Sub-Total</b>	<b>2</b>
<b>Part 3 – Health Services</b>	
Medical Care	1
Suicide Prevention and Intervention	0
<b>Sub-Total</b>	<b>1</b>
<b>Total Deficiencies</b>	<b>4</b>

<sup>5</sup> For greater detail on ODO’s findings, see the *Inspection Findings* section of this report.

## COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspection of ICE detention facilities with an average daily population greater than ten and where detainees are housed for over 72 hours to assess compliance with ICE National Detention Standards (NDS) 2000, or the Performance-Based National Detention Standards (PBNDS) 2008 or 2011, as applicable. These inspections focus solely on facility compliance with detention standards that directly affect detainee life, health, safety, and/or well-being<sup>6</sup>. ODO identifies violations linked to ICE detention standards, ICE policies, or operational procedures as *deficiencies*. ODO also highlights instances when the facility resolves deficiencies prior to completion of the ODO inspection – these corrective actions are annotated with “C” under the Inspection Findings section of this report.

At the conclusion of each inspection, ODO hosts a closeout briefing with facility and local ERO officials to discuss preliminary findings. A summary of these findings is also shared with ERO management officials. Thereafter, ODO provides ICE leadership with a final compliance inspection report to: (i) assist ERO develop and initiate corrective action plans; and (ii) provide senior executives with an independent assessment of facility operations. Additionally, ODO findings inform ICE executive management decision making in better allocating resources across the agency’s entire detention inventory.

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<sup>6</sup> ODO reviews the facility’s compliance with selected standards in their entirety.

## DETAINEE RELATIONS

Fifteen detainees voluntarily agreed to be interviewed by ODO. Most detainees reported satisfaction with facility services except for the concerns listed below.

*Medical Care:* One detainee complained he requested a medical diet due to high blood pressure; however, he did not receive an answer from medical staff.

- Action Taken: ODO found the detainee was medically screened during intake on March 1, 2018 and reported a history of hypertension. However, he did not know the name of the medication he was prescribed. An initial physical was completed on March 2, 2018 and he was prescribed two medications for hypertension. He was then seen by a physician during a chronic care assessment on March 6, 2018 and counseled on diet. Medical staff indicated they did not receive a request for a special diet from the detainee, and ODO was unable to locate a request in his medical records. The regular BCJ menu meets the American Heart Association requirements for daily sodium intake for adults and is reviewed and certified by a licensed dietician. However, per ODO's request, medical personnel informed the detainee he can submit a request for a special diet.

*Telephone Access:* One detainee complained the pin number for his telephone account did not work.

- Action Taken: ODO spoke with facility staff regarding the detainee's complaint. Facility staff issued the detainee a new pin number and resolved the detainee's complaint prior to the completion of the inspection.

# COMPLIANCE INSPECTION FINDINGS

## DETAINEE SERVICES

### DETAINEE GRIEVANCE PROCEDURES (DGP)

ODO's review of detainee grievance procedures found detainees may request a grievance form from the housing unit officer. Completed forms are placed in the door slot on the housing unit door where officers collect the forms. This practice does not prevent the unauthorized reading or possible delay in delivery of grievance forms. ODO notes this practice as an **Area of Concern** and would recommend grievance forms be submitted into a collection box that is secured and accessed by only authorized personnel.

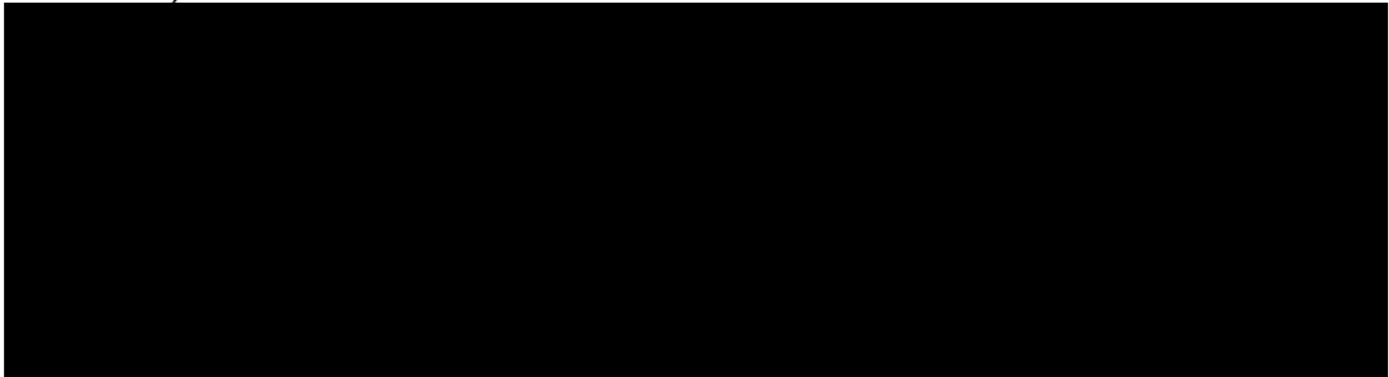
### FUNDS AND PERSONAL PROPERTY (F&PP)

Upon arrival at BCJ, property and valuables are searched and inventoried in the detainee's presence and the detainee and staff sign an inventory form. A signed receipt is placed in the detention file, one is retained with the property, and a copy is provided to the detainee upon request. BCJ does not have a dedicated safe for securing small valuable property envelopes accessible to designated supervisory staff only (**Deficiency F&PP-1<sup>7</sup>**).

## SECURITY AND CONTROL

### ENVIRONMENTAL HEALTH AND SAFETY (EH&S)

ODO reviewed documentation of weekly and monthly fire and safety inspections. Inspections are completed as required, allowing identification and correction of potential problems before they become life-safety issues. ODO's inspection of facility exit diagrams and other facility postings found evacuation diagrams are not posted in each area required by the standard (**Deficiency EH&S-1<sup>8</sup>**).



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<sup>7</sup> "Each facility, without a commissary, will have the following:

...3. A dedicated safe for the cash box and property envelopes." See ICE NDS 2000, Standard, Funds and Personal Property, Section (III)(A)(3). **This is a repeat deficiency.**

<sup>8</sup> "Every institution will develop a fire prevention, control, and evacuation plan to include, among other things, the following: conspicuously posted exit diagrams conspicuously posted for and in each area." See ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(L)(3)(h). **This is a repeat deficiency.**

<sup>9</sup> "Monthly fire drills will be conducted and documented separately in each department. Emergency key drills will be included in each fire drill, and timed. [Redacted]

[Redacted] See ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(L)(4)(c). **This is a repeat deficiency.**

ODO observed one or two mattresses placed directly on the floor in 22 of the 44 housing unit pods. While ODO notes only county inmates were assigned to the floor mattresses during the inspection, as all ICE detainees were assigned a regular bed, overcrowding and use of none permanent fixtures to expand capacity beyond intended limits poses a potential safety and security risk. ODO brought this concern to the attention of ERO and facility staff who indicated the additional mattresses are intended as a temporary measure to accommodate a larger than expected population. ODO notes this as an **Area of Concern**.

## **HEALTH SERVICES**

### **MEDICAL CARE (MC)**

Detainees may submit written sick call requests to the officer assigned to the detainee’s housing unit any time of the day. The officer enters the request into the facility’s Jail Management System (JMS) for retrieval electronically by medical staff up to four times daily. This allows nursing staff to expeditiously triage and address health care requests; however, the involvement of officers in the process for non-emergent requests violates patient confidentiality (**Deficiency MC-1<sup>10</sup>**).

Medications are administered on a dose basis and accurate medical administration records (MAR) are maintained by medical staff. An officer observes detainees to ensure they swallow their medications and confirms the detainee’s receipt of medication in the JMS by scanning a bar code which tracks the time medication was received. The bar coding procedures used at BCJ were cited as a best practice in the 2014 ODO inspection and this continues to be identified as a **Best Practice**.

## **CONCLUSION**

During this inspection, ODO reviewed the facility’s compliance with fifteen (15) standards under the NDS 2000. In all, ODO found the facility compliant with twelve (12) standards and found four (4) deficiencies in the remaining three (3) standards. This is a significant reduction in deficiencies identified in our last inspection. ODO commends facility staff for operating an exceptional clean and well-run facility. The JMS system described above is very impressive and provides facility staff with a wealth of data regarding detainee/inmate movements and is an exceptional example of the facility’s focus on accountability and its record keeping practices. ODO recommends ERO work with the facility to remedy all remaining deficiencies, as applicable and in accordance with contractual obligations.

<b>Compliance Inspection Results Compared</b>	<b>FY 2014</b>	<b>FY 2018</b>
Standards Reviewed	16	15
Deficient Standards	10	3
Overall Number of Deficiencies	20	4
Deficient Priority Components	N/A	N/A
Corrective Action	4	0

<sup>10</sup> “All medical providers shall protect the privacy of detainee’s medical information to the extent possible while permitting the exchange of health information required to fulfill program responsibilities and to provide for the well-being of detainees.” See ICE NDS 2000, Standard, Medical Care, Section (III)(M). **This is a repeat deficiency.**