

Office of Detention Oversight Compliance Inspection

Enforcement and Removal Operations ERO Dallas Field Office

Johnson County Corrections Center Cleburne, Texas

January 11-14, 2021

COMPLIANCE INSPECTION of the JOHNSON COUNTY CORRECTIONS CENTER

Cleburne, Texas

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COMPLIANCE INSPECTION TEAM MEMBERS

Contractor



Acting Team Lead ODO
Senior Compliance and Inspection Specialist ODO
Inspections and Compliance Specialist ODO
Contractor Contractor Creative Corrections
Contractor Creative Corrections
Contractor Creative Corrections

FACILITY OVERVIEW

The U.S. Immigration and Customs Enforcement (ICE) Office of Professional Responsibility (OPR) Office of Detention Oversight (ODO) conducted a compliance inspection of the Johnson County Corrections Center (JCCC) in Cleburne, Texas, from January 11 to 14, 2021. The facility opened in 1989 and is owned and operated by LaSalle Corrections. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at JCCC in 1998 under the oversight of ERO's Field Office Director (FOD) in Dallas (ERO Dallas). The facility operates under the Performance-Based National Detention Standards (PBNDS) 2011 (2013 Errata).

ERO has assigned deportation officers and a detention services manager assigned to the facility. A JCCC warden handles daily facility operations and is supported by personnel. The JCCC provides food services, medical care, and commissary services at the facility. The facility does not hold any accreditations from any outside entities. In September 2019, JCCC was audited for the Department of Homeland Security (DHS) Prison Rape Elimination Act (PREA) and was DHS PREA Certified.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity ³	84
Average ICE Detainee Population ⁴	
Male Detainee Population (as of 1/11/2021)	
Female Detainee Population (as of 1/11/2021)	N/A

During its last inspection, in Fiscal Year (FY) 2020, ODO found 28 deficiencies in the following areas: Admission and Release (1); Custody Classification System (1); Use of Force and Restraints (1); Medical Care (13); Grievance System (1); Law Libraries and Legal Material (1); Significant Self-harm and Suicide Prevention and Intervention (4); Disability Identification, Assessment, and Accommodation (1); Staff-Detainee Communication (1); and Visitation (4).

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

² The facility has not signed the contract modification for PBNDS 2011 (Revised 2016). ODO inspected JCCC against PBNDS 2011 (Revised 2016) and all findings were verified against the PBNDS 2011 (2013 Errata) prior to being cited as a deficiency.

³ Data Source: ERO Facility List Report as of January 11, 2021.

⁴ Ibid.

COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population greater than ten, and where detainees are housed for longer than 72 hours, to assess compliance with ICE national detention standards. These inspections focus solely on facility compliance with detention standards that directly affect detainee life, health, safety, and/or well-being.⁵

ODO identifies violations of ICE detention standards, ICE policies, or operational procedures as "deficiencies." ODO also highlights instances in which 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.

Upon completion of each inspection, ODO conducts a closeout briefing with facility and local ERO officials to discuss preliminary findings. A summary of these findings is shared with ERO management officials. Thereafter, ODO provides ICE leadership with a final compliance inspection report to: (i) assist ERO in developing and initiating corrective action plans; 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.

ODO was unable to conduct an on-site inspection of this facility, as a result of the COVID-19 pandemic, and instead, conducted a remote inspection of the facility. During this remote inspection, ODO interviewed facility staff, ERO field office staff, and detainees, reviewed files and detention records, and was able to assess compliance for at least 90 percent or more of the ICE national detention standards reviewed during the inspection.

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⁵ ODO reviews the facility's compliance with selected standards in their entirety.

FINDINGS BY PERFORMANCE-BASED NATIONAL DETENTION STANDARDS 2011 (2013 ERRATA) MAJOR CATEGORIES

PBNDS 2011 (2013 Errata) Standards Inspected ⁶	Deficiencies
Part 1 – Safety	•
Emergency Plans	0
Environmental Health and Safety	0
Sub-Total	0
Part 2 – Security	
Admission and Release	0
Custody Classification System	1
Facility Security and Control	1
Funds and Personal Property	0
Population Counts	1
Sexual Abuse and Assault Prevention and Intervention	0
Special Management Units	0
Staff-Detainee Communication	0
Use of Force and Restraints	0
Sub-Total	3
Part 4 – Care	
Food Service	0
Hunger Strikes	0
Medical Care	1
Significant Self-harm and Suicide Prevention and Intervention	0
Disability Identification, Assessment, and Accommodation	0
Sub-Total	1
Part 5 – Activities	
Religious Practices	0
Telephone Access	1
Sub-Total	1
Part 6 – Justice	
Grievance Systems	0
Law Libraries and Legal Material	0
Sub-Total	0
Total Deficiencies	5

⁶ For greater detail on ODO's findings, see the Compliance Inspection Findings section of this report.

DETAINEE RELATIONS

ODO interviewed 12 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 and made no specific complaints to ODO. ODO attempted to conduct detainee interviews via video teleconference; however, the ERO field office and facility were not able to accommodate this request due to technology issues. As such, the detainee interviews were conducted via telephone.

COMPLIANCE INSPECTION FINDINGS

SECURITY

CUSTODY CLASSIFICATION SYSTEM (CCS)

ODO reviewed the facility's classification procedures and found their classification procedures permitted the classification officer five-business days to respond to classification appeals instead of within 72-hours of receipt, as required by the standard (**Deficiency CCS-56**⁷).

FACILITY SECURITY AND CONTROL (FS&C)

ODO reviewed the facility's vehicle control log and found the vehicle control officer did not log the driver's name for each vehicle that entered the facility (**Deficiency FS&C-598**).

POPULATION COUNTS (PC)

ODO reviewed JCCC's PC procedures and found both officers conducting the PC did not sign the count slips (**Deficiency PC-33**⁹).

CARE

MEDICAL CARE (MC)

ODO interviewed the facility's health service administrator (HSA) and found JCCC was not

⁷ "... A detainee may request reclassification in writing by submitting a detainee request form... The classification officer shall ordinarily respond in person or in writing as soon as possible and practicable, but no later than within 72 hours of receipt." *See* ICE PBNDS 2011 (2013 Errata), Standard, Custody Classification System, Section (V)(H)(3). ⁸ "The post officer shall log the following information regarding every vehicle: tag number, driver's name, firm represented, purpose of the visit, (e.g., repairs, delivery, etc.), vehicle contents, date, time in, time out and facility employee responsible for the vehicle on-site..." *See* ICE PBNDS 2011 (2013 Errata), Standard, Facility Security and Control, Section (V)(C)(2)(b).

^{9 &}quot;... A formal count shall be conducted at least once every eight hours, with a shift supervisor verifying its accuracy.
... 5. All detainee units/areas shall be counted simultaneously. ... The counting officer from each location shall report his/her count to the facility control officer, who is responsible for collecting and maintaining the count. ...

c. Both officers conducting the count must sign the count slip." See ICE PBNDS 2011 (2013 Errata), Standard, Population Counts, Section (V)(A)(5)(c).

National Commission on Correctional Health Care (NCCHC) accredited (Deficiency MC-10¹⁰).

ACTIVITIES

TELEPHONE ACCESS (TA)

ODO reviewed pictures of the facility's housing unit postings and found the facility did not place a notice at each monitored detainee telephone, which informed the detainees their calls were subject to monitoring, nor the procedure for obtaining an unmonitored legal call (**Deficiency TA-20**¹¹).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 20 standards under PBNDS 2011 (2013 Errata) and found the facility in compliance with 15 of those standards. ODO found five deficiencies in the remaining five standards. JCCC was contractually obligated to comply with PBNDS 2011 (2013 Errata) and ODO verified each finding against the PBNDS 2011 (2013 Errata) standards, prior to citing the findings as deficiencies in this report. ODO commends facility staff for their responsiveness during this inspection. ODO recommends ERO work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations.

Compliance Inspection Results Compared	FY 2020 (PBNDS 2011) (Revised 2016)	FY 2021 (PBNDS 2011) (2013 Errata)
Standards Reviewed	18	20
Deficient Standards	10	5
Overall Number of Deficiencies	28	5
Repeat Deficiencies	5	0
Corrective Actions	4	0

¹⁰ "Medical facilities within the detention facility shall achieve and maintain current accreditation with the National Commission on Correctional Health Care (NCCHC) and shall maintain compliance with those standards." *See* ICE PBNDS 2011 (2013 Errata), Standard, Medical Care, Section (V)(A).

¹¹ "If telephone calls are monitored, the facility shall, at each monitored telephone, place a notice that states the following: a. that detainee calls are subject to monitoring; and b. the procedure for obtaining an unmonitored call to a court, a legal representative or for the purposes of obtaining legal representation." *See* ICE PBNDS 2011 (2013 Errata), Standard, Telephone Access, Section (V)(B)(3)(a) and (b).