



**U.S. Department of Homeland Security**  
U.S. Immigration and Customs Enforcement  
Office of Professional Responsibility  
ICE Inspections  
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**

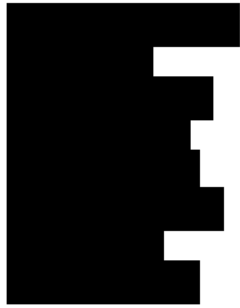
**November 29-December 1, 2022**

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

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## COMPLIANCE INSPECTION TEAM MEMBERS



Team Lead	ODO
Senior Inspections and Compliance Specialist	ODO
Inspections and Compliance Specialist	ODO
Inspections and Compliance Specialist	ODO
Contractor	Creative Corrections
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 Boone County Jail (BCJ) in Burlington, Kentucky, from November 29 to December 1, 2022.<sup>1</sup> The facility opened in 2005 and is owned by Boone County Fiscal Court and operated by Boone County Jail. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at BCJ in 2005 under the oversight of ERO’s Field Office Director in Chicago (ERO Chicago). The facility operates under the National Detention Standards (NDS) 2000.<sup>2</sup>

ERO does not have any staff assigned to the facility. A facility administrator handles daily operations and manages [REDACTED] support personnel. Boone County Jail provides food services and medical care, and Combined Public Communications provides commissary services at the facility. The facility does not hold any accreditations from any outside entities.

Capacity and Population Statistics	Quantity
ICE Bed Capacity <sup>3</sup>	[REDACTED]
Average ICE Population <sup>4</sup>	[REDACTED]
Adult Male Population (as of November 29, 2022)	[REDACTED]
Adult Female Population (as of November 29, 2022)	[REDACTED]

During its last inspection, in Fiscal Year (FY) 2022, ODO found three deficiencies in the following areas: Emergency Plans (1); Food Service (1); and Staff-Detainee Communication (1).

<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> ICE is an authorized user of this facility under a United States Marshals Service intergovernmental agreement contract, which does not specify an ICE NDS, and ODO inspected to the NDS listed on the ERO Facility List as of November 28, 2022.

<sup>3</sup> Data Source: ERO Facility List as of November 28, 2022.

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

## COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population greater than 10, and where detainees are housed for over 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.<sup>5</sup>

ODO identifies violations of ICE detention standards, ICE policies, or operational procedures, as “deficiencies.” ODO highlights instances when 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.

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<sup>5</sup> ODO reviews the facility’s compliance with selected standards in their entirety.

## FINDINGS BY NATIONAL DETENTION STANDARDS 2000 MAJOR CATEGORIES

NDS 2000 Standards Inspected <sup>6,7</sup>	Deficiencies
<b>Part 1 - Detainee Services</b>	
Admission and Release	1
Correspondence and Other Mail	2
Detainee Classification System	0
Detainee Handbook	0
Food Service	0
Funds and Personal Property	0
Recreation	0
Visitation	0
<b>Sub-Total</b>	<b>3</b>
<b>Part 2 - Security and Control</b>	
Contraband	0
Disciplinary Policy	0
Emergency Plans	0
Environmental Health and Safety	0
Hold Rooms in Detention Facilities	0
Key and Lock Control (Security, Accountability, and Maintenance)	1
Special Management Unit (Administrative Segregation)	0
Special Management Unit (Disciplinary Segregation)	0
Tool Control	0
Transportation (Land Transportation)	0
Use of Force	0
<b>Sub-Total</b>	<b>1</b>
<b>Part 3 - Health Services</b>	
Medical Care	0
Suicide Prevention and Intervention	0
Terminal Illness, Advance Directives and Death	0
<b>Sub-Total</b>	<b>0</b>
<b>Other Standards Reviewed</b>	
NDS 2019 Sexual Abuse and Assault Prevention and Intervention	0
NDS 2019 Disability Identification, Assessment, and Accommodation	0
<b>Sub-Total</b>	<b>0</b>
<b>Total Deficiencies</b>	<b>4</b>

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

<sup>7</sup> Beginning in FY 2022, ODO instituted a process of rotating all standards on a 3-year basis. As a result, some standard components may not be present in all standards.

## DETAINEE RELATIONS

ODO interviewed 24 detainees who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. Most detainees reported satisfaction with the facility services except for the concerns listed below.

*Funds and Personal Property:* One detainee stated his money has not transferred from his account at the previous facility to his account at BCJ.

- Action Taken: ODO notified ERO Chicago to contact the detainee's previous facility for the transfer of funds to BCJ. Fayette County Jail staff confirmed following the detainee's request and sent a check for \$302 on September 28, 2022, to the detainee's family at the address on file. ERO Chicago notified the detainee about the status of his money on November 30, 2022, and the detainee acknowledged he understood.

*Medical Care:* One detainee stated he has not received dental care after submitting a sick call request for tooth pain in September 2022.

- Action Taken: ODO reviewed the detainee's medical file with the health services administrator (HSA) and found no sick call request for dental or medical care. The HSA provided the detainee with a sick call request form and advised him to submit it for dental or medical issues. The HSA placed the detainee on the dental list to be examined by a dentist on December 15, 2022. The detainee did not keep this appointment due to a scheduling conflict with his hearing before the immigration judge. The HSA was unable to get a rescheduled appointment as the detainee was released from the facility on January 6, 2023, under an order of supervision.

*Medical Care:* One detainee stated she must go through the food door, known as "the shoe," to receive her insulin from facility nurses during the morning and afternoon shifts. She also reported bruises on her stomach from the shot whenever nurses gave it to her at the food door.

- Action Taken: ODO notified the HSA of the complaint and observed facility nursing staff. ODO observed no irregularities with how the nurses administered insulin during the inspection and the HSA reminded all nurses of the proper procedure to administer insulin. The HSA provided ODO with an email copy to confirm sending the reminder to all facility nurses of the proper procedures for administering insulin. The HSA stated she will monitor the day and afternoon shift nurses to verify they are following procedures for insulin injections. The HSA informed the detainee of the actions taken and informed her easy bruising is due to the diabetes medical condition and small blood vessels at the injection site.

# COMPLIANCE INSPECTION FINDINGS

## DETAINEE SERVICES

### ADMISSION AND RELEASE (AR)

ODO interviewed █ detainees and found █ out of █ detainees did not receive the site-specific detainee handbook upon their admission to the facility (**Deficiency AR-65<sup>8</sup>**).

### CORRESPONDENCE AND OTHER MAIL (COM)

ODO reviewed the detainee handbook and found no mention of identity documents, such as passports, birth certificates, etc., as contraband and ICE/ERO possibly using them as evidence or as otherwise appropriate. Additionally, the handbook did not state the facility will provide a copy of the identity document, certified by an ICE/ERO officer if the facility does not allow a detainee to keep the document (**Deficiency COM-5<sup>9</sup>**).

ODO interviewed a facility captain, reviewed the facility mail rejection notice, and found no A-number nor the name of the sender on the notice (**Deficiency COM-32<sup>10</sup>**).

*Corrective Action:* Prior to the conclusion of the inspection, the facility updated the mail rejection notice to include the A-number and name of the sender (**C-1**).

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<sup>8</sup> “Upon admission every detainee will receive a detainee handbook.” See ICE NDS 2000, Standard, Admission and Release, Section (III)(K).

<sup>9</sup> “The facility shall notify detainees of its policy on correspondence and other mail through the detainee handbook or equivalent provided to each detainee upon admittance. At a minimum, the notification shall specify: ...

7. A description of mail which may be rejected by the facility and which the detainee will not be permitted to keep in his/her possession (for additional information refer to Section III.G., below). The notification will state that identity documents, such as passports, birth certificates, etc., are contraband and may be used by the INS as evidence or as otherwise appropriate. The notification will state that if detainees are not allowed to keep an identity document in their possession, they will be provided with a copy of the document, certified by an INS officer to be a true and correct copy;”

See ICE NDS 2000, Standard, Correspondence and Other Mail, Section (III)(B)(7).

<sup>10</sup> “When an officer finds an item that must be removed from a detainee’s mail, he/she shall make a written record. This shall include:

1. The detainee’s name and A-number;
2. The name of the sender and recipient...

See ICE NDS 2000, Standard, Correspondence and Other Mail, Section (III)(H)(1-2).



## **SECURITY AND CONTROL**

### **HOLD ROOMS IN DETENTION FACILITIES (HRDF)**

ODO interviewed facility admissions staff, observed the hold room for compliance, and found the facility provided each detainee with a mat for sitting, resting, or sleeping since there are no benches or chairs in the room. ODO noted this as an **Area of Concern**.

ODO interviewed facility admissions staff, observed the hold room at intake, and found no benches nor chairs. The facility provided each detainee a mat for sitting, resting, or sleeping prior to entering. ODO noted this as an **Area of Concern**.

### **KEY AND LOCK CONTROL (SECURITY, ACCOUNTABILITY, AND MAINTENANCE) (KLC)**

ODO interviewed the key and lock control officer and found none of the security officers (key control officers) successfully completed an approved locksmith-training program (**Deficiency KLC-12<sup>11</sup>**).

## **CONCLUSION**

During this inspection, ODO assessed the facility's compliance with 22 standards under NDS 2000 and 2 standards under NDS 2019 and found the facility in compliance with 21 of those standards. ODO found four deficiencies in the remaining three standards. ODO recommends ERO work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations. ERO provided ODO with the uniform corrective action plan for ODO's last inspection of BCJ on October 18, 2022.

<b>Compliance Inspection Results Compared</b>	<b>FY 2022 (NDS 2000)/(NDS 2019)</b>	<b>FY 2023 (NDS 2000)/(NDS 2019)</b>
Standards Reviewed	17/1	22/2
Deficient Standards	3	3
Overall Number of Deficiencies	3	4
Priority Component Deficiencies	N/A	0
Repeat Deficiencies	0	0
Areas of Concern	0	2
Corrective Actions	0	1
Facility Rating	N/A	Superior

<sup>11</sup> "All security officers shall successfully complete an approved locksmith-training program." See ICE NDS 2000, Standard, Key and Lock Control (Security, Accountability, and Maintenance), Section (III)(A)(2) .