

### U.S. Department of Homeland Security

U.S. Immigration and Customs Enforcement Office of Professional Responsibility ICE Inspections Washington, DC 20536-5501

# Office of Detention Oversight Compliance Inspection 2024-001-221

# Enforcement and Removal Operations ERO Chicago Field Office

Boone County Jail Burlington, Kentucky

November 14-16, 2023

# COMPLIANCE INSPECTION of the BOONE COUNTY JAIL

Burlington, Kentucky

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## **COMPLIANCE INSPECTION TEAM MEMBERS**

Team Lead	ODO
Assistant Team Lead	ODO
Senior Inspections and Compliance Specialist	ODO
Senior Inspections and Compliance Specialist	ODO
Inspections and Compliance Specialist	ODO
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 14 to 16, 2023. The facility opened in 2005 and is owned by Boone County Fiscal Court and operated by Boone County. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at BCJ in 1994 under the oversight of ERO's Field Office Director in Chicago (ERO Chicago). ICE is an authorized user of this facility under a United States Marshals Service intergovernmental agreement contract, which does not specify an ICE National Detention Standard (NDS), and ODO inspected to the NDS listed on the ERO Custody Management Division Authorized Facility List as of November 6, 2023. BCJ was inspected against the NDS 2019, and ODO's assigned rating is for ERO's informational purposes only.

A county jailer handles daily facility operations and manages support personnel. Boone County Jail provides food services and medical care, and Combined Public Communications provides commissary services at the facility. In July 2020, BCJ was audited for the Department of Justice (DOJ) Prison Rape Elimination Act and was DOJ PREA certified.

Capacity and Population Statistics	Qu	antity
ICE Bed Capacity <sup>2</sup>		
Average ICE Population <sup>3</sup>		
Adult Male Population (as of November 14, 2023)		
Adult Female Population (as of November 14, 2023)	_	

During its last full inspection, in Fiscal Year (FY) 2023, ODO found 4 deficiencies in the following areas: Admission and Release (1); Correspondence and Other Mail (2); and Key and Lock Control (1).

<sup>&</sup>lt;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>&</sup>lt;sup>2</sup> Data Source: ERO Custody Management Division Authorized Facility List as of November 6, 2023.

#### COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population of 10 or more, and where detainees are housed for over 72 hours, to assess compliance with ICE national detention standards. While these inspections focus on facility compliance with detention standards that directly affect detainee life, health, safety, and/or well-being, in FY 2024 ODO added additional standards to the scope of each full inspection to ensure ODO inspects every standard at each facility at least once every other year.<sup>4</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.

<sup>&</sup>lt;sup>4</sup> ODO reviews the facility's compliance with selected standards in their entirety.

## FINDINGS BY NATIONAL DETENTION STANDARDS 2019 **MAJOR CATEGORIES**

NDS 2019 Standards Inspected <sup>5,6</sup>	Deficiencies
Part 1 - Safety	
Environmental Health and Safety	0
Sub-Total	0
Part 2 - Security	
Admission and Release	0
Custody Classification System	0
Facility Security and Control	0
Funds and Personal Property	1
Post Orders	1
Searches of Detainees	0
Special Management Units	0
Staff-Detainee Communication	2
Sexual Abuse and Assault Prevention and Intervention	0
Use of Force and Restraints	0
Sub-Total	4
Part 4 - Care	
Food Service	0
Hunger Strikes	0
Medical Care	5
Personal Hygiene	0
Significant Self-Harm and Suicide Prevention and Intervention	0
Sub-Total	5
Part 5 - Activities	
Correspondence and Other Mail	0
Religious Practices	0
Telephone Access	0
Voluntary Work Program	0
Sub-Total	0
Part 6 - Justice	
Grievance System	0
Law Libraries and Legal Material	0
Sub-Total	0
Part 7 - Administration and Management	

<sup>&</sup>lt;sup>5</sup> For greater detail on ODO's findings, see the *Compliance Inspection Findings* section of this report.
<sup>6</sup> Beginning in FY 2024, ODO instituted a process of rotating all standards every other year. As a result, some standards may not be present in all inspections.

Detention Files	0
Detainee Transfers	0
Sub-Total	0
Total Deficiencies	9

#### DETAINEE RELATIONS

ODO interviewed 47 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.

#### COMPLIANCE INSPECTION FINDINGS

#### **SECURITY**

#### STAFF-DETAINEE COMMUNICATION (SDC)

ODO interviewed a facility captain and found the facility's protocol is for facility staff to read a detainee's submitted request form in its entirety prior to forwarding the request to ERO Chicago (**Deficiency SDC-12**<sup>7</sup>).

ODO observed facility common areas and found the facility did not post the Department of Homeland Security Office of Inspector General poster in the law library (Deficiency SDC-218).

#### FUNDS AND PERSONAL PROPERTY (FPP)

ODO reviewed five files of released detainees, observed a detainee release, and found detainees did not sign a receipt, indicating return of all funds to detainees prior to release (**Deficiency FPP-24**<sup>9</sup>).

#### POST ORDERS (PO)

ODO reviewed the facility control center POs and found the POs did not instruct facility staff that any staff member taken hostage is under duress and to disregard the orders staff members under duress issue (**Deficiency PO-12**<sup>10</sup>).

Corrective Action: On November 14, 2023, the facility staff updated their electronic jail

<sup>&</sup>lt;sup>7</sup> "Detainee request forms shall be delivered to ICE/ERO staff without reading, altering, or delaying such requests." See ICE NDS 2019, Standard, Staff-Detainee Communication, Section (II)(C).

<sup>&</sup>lt;sup>8</sup> "The facility administrator shall ensure that all ICE/ERO posters or other information are provided in every housing unit and in appropriate common areas (e.g., recreation areas, dining areas, processing areas)." *See* ICE NDS 2019, Standard, Staff-Detainee Communication, Section (II)(C)(3).

<sup>&</sup>lt;sup>9</sup> "After a property check, the detainee will then sign a receipt for the property, indicating his or her receipt of all funds and personal property due him or her." *See* ICE NDS 2019, Standard, Funds and Personal Property, Section (II)(E). <sup>10</sup> "Any order/directive issued by such a person, regardless of his or her position of authority, is to be disregarded." *See* ICE NDS 2019, Standard, Post Orders, Section (II)(D).

management system, accessible to all staff via facility-issued handheld devices, and ODO observed a hostage situation checklist, to include removal of all authority from a hostage (C-1).

#### **CARE**

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

ODO observed a refrigerator facility medical staff used to store temperature-sensitive pharmaceuticals and found no means to monitor and ensure the proper temperature of the refrigerator (Deficiency MC-10<sup>11</sup>).

ODO reviewed detainee medical records and found in out of records, no documented comprehensive health assessment exams for detainees and facility medical staff completed a health assessment for detainee 34 days after the detainee's arrival to BCJ (Deficiency MC-27 12). This is a priority component.

ODO reviewed detainee medical records and found in out of records, no documented initial dental screening exams for detainees and facility medical staff completed a dental screening for detainee 34 days after the detainee's arrival to BCJ (Deficiency MC-43 <sup>13</sup>).

ODO reviewed from mental health records of detainees facility medical staff treated with psychotropic medications and found in out of records, no documented informed consent prior to administering the medications (Deficiency MC-93<sup>14</sup>). This is a priority component.

ODO reviewed female detainee medical records and found in out of medical records, no documented pregnancy testing of detainees between age 18 and 56 (Deficiency MC-138<sup>15</sup>).

<sup>&</sup>lt;sup>11</sup> "All pharmaceuticals will be stored in a secure area and temperature controlled to ensure no alteration in potency." *See* ICE NDS 2019, Standard, Medical Care, Section (II)(B).

<sup>&</sup>lt;sup>12</sup> "The facility will conduct and document a comprehensive health assessment, including a physical examination and mental health screening, on each detainee within 14 days of the detainee's arrival at the facility." *See* ICE NDS 2019, Standard, Medical Care, Section (II)(E).

<sup>&</sup>lt;sup>13</sup> "An initial dental screening exam shall be performed within 14 days of the detainee's arrival." *See* ICE NDS 2019, Standard, Medical Care, Section (II)(H).

<sup>&</sup>lt;sup>14</sup> "Prior to the administration of psychotropic medications, a separate documented informed consent, that includes a description of the medications side effects, shall be obtained." *See* ICE NDS 2019, Standard, Medical Care, Section (II)(O).

<sup>&</sup>lt;sup>15</sup> "In addition to the criteria listed on the health assessment form, the evaluation shall inquire about and perform the following:

a. Pregnancy test for detainees aged 18-56 and deliver to the detainee and document the results;" See ICE NDS 2019, Standard, Medical Care, Section (II)(U)(1)(a).

#### CONCLUSION

During this compliance inspection, ODO assessed the facility's compliance with 24 standards under NDS 2019 and found the facility in compliance with 20 of those standards. ODO found nine deficiencies in the remaining four standards. Since BCJ's last full inspection in November 2022, the facility changed standards from NDS 2000 to NDS 2019 and a comparative performance trend analysis is unavailable. ODO has not received the uniform corrective action plan for ODO's last inspection of BCJ in May 2023; however, this was likely due to facility changing from NDS 2000 to NDS 2019 at the end of FY 2023. ODO recommends ERO Chicago continue to work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations.

Compliance Inspection Results Compared	FY 2023 Full Inspection (NDS 2000/ NDS 2019)	FY 2024 Full Inspection (NDS 2019)
Standards Reviewed	22/2	24
Deficient Standards	3	4
Overall Number of Deficiencies	4	9
Priority Component Deficiencies	0	2
Repeat Deficiencies	0	N/A
Areas Of Concern	2	0
Corrective Actions	1	1
Facility Rating	Superior	Good 16

<sup>&</sup>lt;sup>16</sup> ODO revised their rating system at the end of FY 2023 and beginning in FY 2024, facilities rated as "Superior" will have no or very minimal deficiencies, and will have no repeat or priority component deficiencies.