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Office of Professional Responsibility
ICE Inspections
Washington, DC 20536-5501

**Office of Detention Oversight
Follow-Up Compliance Inspection
2023-002-103**

**Enforcement and Removal Operations
ERO Dallas Field Office**

**Rolling Plains Detention Center
Haskell, Texas**

May 23-25, 2023

FOLLOW-UP COMPLIANCE INSPECTION
of the
ROLLING PLAINS DETENTION CENTER
Haskell, Texas

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FOLLOW-UP COMPLIANCE INSPECTION TEAM MEMBERS



Team Lead	ODO
Senior Inspections and Compliance Specialist	ODO
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FACILITY OVERVIEW

The U.S. Immigration and Customs Enforcement (ICE) Office of Professional Responsibility (OPR) Office of Detention Oversight (ODO) conducted a follow-up compliance inspection of the Rolling Plains Detention Center (RPDC) in Haskell, Texas, from May 23 to 25, 2023.¹ This inspection focused on the standards found deficient during ODO’s last inspection of RPDC from December 6 to 8, 2022. The facility reopened in 2018 and is owned by the City of Haskell and operated by LaSalle Corrections. ICE is an authorized user of RPDC 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 Facility List as of May 8, 2023. RPDC was inspected against NDS 2000.

ERO deportation officers are not assigned full-time to the facility but conduct weekly scheduled visits on Tuesdays and Thursdays, from 9 a.m. to 3 p.m. An RPDC jail administrator handles daily facility operations and manages [REDACTED] support personnel. LaSalle Corrections provides food services and medical care, and Correct Commissary provides commissary services at the facility. The facility was accredited by the Texas Commission on Jail Standards in August 2022.

Capacity and Population Statistics	Quantity
ICE Bed Capacity ²	[REDACTED]
Average ICE Population ³	[REDACTED]
Adult Male Population (as of May 23, 2023)	[REDACTED]
Adult Female Population (as of May 23, 2023)	[REDACTED]

During its last full inspection, in Fiscal Year (FY) 2023, ODO found 11 deficiencies in the following areas: Emergency Plans (1); Environmental Health and Safety (3); Food Service (6); and Transportation (Land Transportation) (1).

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

² Data Source: ERO Facility List as of May 8, 2023.

³ *Ibid.*

⁴ RPDC’s FY 2022 average daily population was 11, which is why ODO scheduled RPDC for biannual inspections in FY 2023.

FOLLOW-UP COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population (ADP) of 10 or more detainees, 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. In FY 2021, to meet congressional requirements, ODO began conducting follow-up inspections at all ICE ERO detention facilities, which ODO inspected earlier in the FY.

While follow-up inspections are intended to focus on previously identified deficiencies, ODO will conduct a complete review of several core standards, which include but are not limited to Medical Care, Suicide Prevention, Food Service, Environmental Health and Safety, Emergency Plans, Use of Force and Restraints/Use of Physical Control Measures and Restraints, Admission and Release, Classification, and Funds and Personal Property. ODO may decide to conduct a second full inspection of a facility in the same FY based on additional information obtained prior to ODO's arrival on-site. Factors ODO will consider when deciding to conduct a second full inspection will include the total number of deficiencies cited during the first inspection, the number of deficient standards found during the first inspection, the completion status of the first inspection's uniform corrective action plan (UCAP), and other information ODO obtains from internal and external sources ahead of the follow-up compliance inspection. Conditions found during the inspection may also lead ODO to assess new areas and identify new deficiencies or areas of concern should facility practices run contrary to ICE standards. Any areas found non-compliant during both inspections are annotated as "Repeat Deficiencies" in this report.

FINDINGS BY NATIONAL DETENTION STANDARDS 2000 MAJOR CATEGORIES

NDS 2000 Standards Inspected ^{5,6}	Deficiencies
Part 1 - Detainee Services	
Admission and Release	0
Detainee Classification System	0
Detainee Grievance Procedures	0
Food Service	0
Funds and Personal Property	0
Recreation	0
Staff-Detainee Communication	0
Telephone Access	0
Visitation	2
Sub-Total	2
Part 2 - Security and Control	
Emergency Plans	1
Environmental Health and Safety	6
Special Management Unit (Administrative Segregation)	0
Special Management Unit (Disciplinary Segregation)	0
Transportation (Land Transportation)	0
Use of Force	0
Sub-Total	7
Part 3 - Health Services	
Medical Care	0
Suicide Prevention and Intervention	0
Terminal Illness, Advanced Directives and Death	0
Sub-Total	0
Total Deficiencies	9

⁵ For greater detail on ODO's findings, see the *Follow-up Compliance Inspection Findings* section of this report.

⁶ 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 conducted no interviews due to a facility ICE detainee population count of zero during this inspection. Despite the facility housing no detainees during the inspection, the facility maintains an active contract to house ICE detainees and had an FY 2022 ADP of 11, meeting the ODO requirement for an ADP of 10 or more detainees for biannual inspections.

FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

DETAINEE SERVICES

VISITATION (V)

ODO reviewed the facility's detainee handbook and found it did not provide notification of visitation hours (**Deficiency V-2⁷**).

ODO reviewed the facility's legal visitation policy and found it did not specify procedures and standards for the following: legal assistants working under the supervision of an attorney; pre-representational meetings; Form G-28 requirements; confidential group legal meetings; nor detainee sign-up for meetings with pro bono representatives (**Deficiency V-117⁸**).

SECURITY AND CONTROL

EMERGENCY PLANS (EP)

ODO reviewed RPDC's ICE-approved individual contingency plans and found the facility did not compile the plans in the required order (**Deficiency EP-93⁹**). **This is a repeat deficiency.**

⁷ "The facility shall provide written notification of visitation rules and hours in the detainee handbook, or equivalent, given each detainee upon admittance." *See* ICE NDS 2000, Standard, Visitation, Section (III)(B).

⁸ "The site-specific policy shall specify visitation hours, procedures and standards, including, but not limited to, telephone inquiries; dress code; legal assistants working under the supervision of an attorney; pre-representational meetings; Form G-28 requirements; identification and search of legal representatives; identification of visitors; materials provided to detainees by legal representatives; confidential group legal meetings; and detainee sign-up." *See* ICE NDS 2000, Standard, Visitation, Section (III)(I)(16).

⁹ "All facilities will compile INS approved individual contingency plans, as needed, in the following order:

1. Fire
2. Work/Food Strike
3. Disturbance
4. Escape
5. Hostages (Internal)
6. Search (Internal)
7. Bomb Threat
8. Adverse Weather
9. Civil Disturbance
10. Environmental Hazard
11. Detainee Transportation System Emergency
12. Evacuation

Corrective Action: Prior to the completion of the inspection the facility initiated corrective action. ODO observed facility staff rearrange the individual contingency plans into the correct order (C-1).

ENVIRONMENTAL HEALTH AND SAFETY (EHS)

ODO inspected the barbershop and found the facility did not comply with national fire safety codes. Specifically, RPDC did not install a ground fault circuit interrupter on an outlet within 6 feet from a water source (the barbershop sink), contrary to national fire safety codes and National Fire Protection Association standards (**Deficiency EHS-57¹⁰**). **This is a priority component.**

ODO reviewed RPDC's EHS program, interviewed a facility compliance officer, and found the following deficiencies:

- No documentation showing a qualified departmental staff member conducted weekly fire and safety inspections from January 2023 through May 2023 (**Deficiency EHS-60¹¹**);
- No documentation showing maintenance (safety) staff conducted monthly inspections from January 2023 through May 2023 (**Deficiency EHS-61¹²**);
- No forwarding of written reports of weekly nor monthly fire and safety inspections to the facility director for review and, if necessary, corrective action determinations (**Deficiency EHS-62¹³**); and
- No filing of inspection reports and records of corrective action by the maintenance supervisor nor designee in the safety office (**Deficiency EHS-63¹⁴**).

ODO observed six housing units and found the facility did not maintain environmental health conditions at a level meeting recognized standard of hygiene. Specifically, ODO found the following items in housing units A-1, A-2, A-3, A-4, B-1, and B-2: soap scum and peeling paint on the walls and floor in the shower of B-1; photos taped to the shower wall in unit A-2; food splattered on the walls, dirt in the corners, and food trays from the breakfast service on the floor at

13. Service wide Lockdown

14. Site-specific concerns, if any."

See ICE NDS 2000, Standard, Emergency Plans, Section (III)(D).

¹⁰ "Every facility will comply with standards and regulations issued by the Environmental Protection Agency (EPA) and OSHA, the American Correctional Association's "mandatory" standards, local and national fire safety codes, and the applicable standards of the American Society for Testing and Materials, American National Standards Institute, and Underwriters' Laboratories or Factory Mutual Engineering Corporation." See ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(L)(1).

¹¹ "A qualified departmental staff member will conduct weekly fire and safety inspections; the maintenance (safety) staff will conduct monthly inspections." See ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(L)(2).

¹² "A qualified departmental staff member will conduct weekly fire and safety inspections; the maintenance (safety) staff will conduct monthly inspections." See ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(L)(2).

¹³ "Written reports of the inspections will be forwarded to the OIC for review and, if necessary, corrective action determinations." See ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(L)(2).

¹⁴ "The Maintenance Supervisor or designate [*sic*] will maintain inspection reports and records of corrective action in the safety office." See ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(L)(2).

the beginning of the lunch service in the sally port areas between units A-1 and A-2 and units A-3 and A-4; ceiling vents and light fixtures above the tables in the communal areas covered with paper and fabric; food splattered around trash cans near unit entrances; and two clothes lines tied to bunks in unit A-2 (**Deficiency EHS-127**¹⁵).

CONCLUSION

During this inspection, ODO assessed the facility’s compliance with 18 standards under NDS 2000 and found the facility in compliance with 15 of those standards. ODO found nine deficiencies in the remaining three standards. Since RPDC’s last full inspection in December 2022, the facility’s overall compliance with NDS 2000 has shown improvement. RPDC progressed from 4 deficient standards and 11 deficiencies in December 2022 to 3 deficient standards and 9 deficiencies during this most recent inspection. The facility’s improved performance was a result of correcting six deficiencies identified in the Food Service standard during the prior inspection. However, ODO noted deficiencies in the Environmental Health and Safety standard increased from three to six during this inspection. RPDC lost their safety manager during the review period and facility staff were unable to locate any documentation verifying the conduct of fire and safety inspections. This accounted for four of the six deficiencies identified. ODO has not received the UCAP for ODO’s last inspection of RPDC in December 2022. ODO recommends ERO Dallas continue to work with the facility to resolve the remaining deficiencies in accordance with contractual obligations.

Compliance Inspection Results Compared	FY 2023 Full Inspection (NDS 2000)	FY 2023 Follow-up Inspection (NDS 2000)
Standards Reviewed	23	18
Deficient Standards	4	3
Overall Number of Deficiencies	11	9
Priority Component Deficiencies	0	1
Repeat Deficiencies	1	1
Areas Of Concern	0	0
Corrective Actions	0	1
Facility Rating	Superior	N/A

¹⁵ “Environmental health conditions will be maintained at a level that meets recognized standards of hygiene.” See ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(R)(1).