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Office of Detention Oversight Special Review 2024-003-348

Enforcement and Removal Operations ERO Dallas Field Office

Dallas County Jail - Lew Sterrett Dallas, Texas

July 16-18, 2024

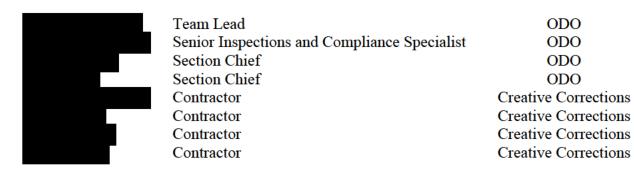
SPECIAL REVIEW of the DALLAS COUNTY JAIL - LEW STERRETT

Dallas, Texas

TABLE OF CONTENTS

FACILITY OVERVIEW	4	
SPECIAL REVIEW PROCESS		
FINDINGS BY NATIONAL DETENTION STANDARDS 2019 MAJOR CATEGORIES		
ETAINEE RELATIONS PECIAL REVIEW FINDINGS SAFETY ENVIRONMENTAL HEALTH AND SAFETY SECURITY SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION CARE FOOD SERVICE	7	
SPECIAL REVIEW FINDINGS	7	
SEXUAL ABUSE AND ASSAULT PREVENTION		
	9	
CONCLUSION	10	

SPECIAL REVIEW TEAM MEMBERS



FACILITY OVERVIEW

The U.S. Immigration and Customs Enforcement (ICE) Office of Professional Responsibility (OPR) Office of Detention Oversight (ODO) conducted a special review of the Dallas County Jail - Lew Sterrett (DCJ) in Dallas, Texas, from July 16 to 18, 2024. The facility opened in 1990 and is owned and operated by Dallas County. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at DCJ in 1990 under the oversight of ERO's Field Office Director in Dallas (ERO Dallas). 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 July 15, 2024. DCJ was inspected against the NDS 2019, and ODO's assigned rating is for ERO's informational purposes only..²

. A county sheriff handles daily facility operations and support personnel. Dallas County provides food and commissary services, and Parkland Hospital provides medical care at the facility. The facility does not hold any accreditations from any outside entities.

Capacity and Population Statistics	Quantity	
ICE Bed Capacity. ³		
Average ICE Population. ⁴		
Adult Male Population (as of July 16, 2024)		
Adult Female Population (as of July 16, 2024)		

During its last rated inspection, in Fiscal Year (FY) 2023, ODO found 13 deficiencies in the following areas: Environmental Health and Safety (11) and Food Service (2).

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

² For ODO inspections in FY 2024, ERO Custody Management Division requested ODO inspect all United States Marshals Service Intergovernmental Agreement facilities, not contractually obligated to an ICE NDS, to NDS 2019.

³ Data Source: ERO Custody Management Division Authorized Facility List as of July 15, 2024.

SPECIAL REVIEW PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population (ADP) 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.⁵

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.

In FY 2022, ODO began conducting special reviews of under 72-hour ICE detention facilities with an ADP of 1 or more detainees and over 72-hour ICE detention facilities with an ADP of 1 to 9 detainees. Additionally, ODO began conducting unannounced inspections of ICE detention facilities, regardless of ADP of detainees, as well as reviews of ICE special/emerging detention facilities/programs. As such, these facility inspections will result in an ODO Inspection Compliance Rating; however, for facilities that are not contractually obligated to an ICE NDS, those ratings will be for ERO's informational purposes. ODO will conduct a complete review of several core standards, in accordance with the facility's contractually required ICE NDS or in accordance with the ICE NDS listed in the current ERO Custody Management Division Authorized Facility List for facilities that are not contractually obligated to an ICE NDS, which may include but are not limited to Medical Care/Health Care, Medical Care (Women)/Health Care (Females), Significant Self-harm and Suicide Prevention and Intervention, Hunger Strikes, Food Service, Environmental Health and Safety, Special Management Units (SMU) or Hold Rooms (if the facility does not have an SMU), Use of Force and Restraints/Use of Physical Control Measures, and Sexual Abuse and Assault Prevention and Intervention.

Upon completion of each special review or unannounced 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 uniform corrective action plans (UCAPs); 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.

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

FINDINGS BY NATIONAL DETENTION STANDARDS 2019 MAJOR CATEGORIES

NDS 2019 Standards Inspected. ^{6,7,8}	Deficiencies
Part 1 - Safety	•
Environmental Health and Safety	4
Sub-Total	4
Part 2 - Security	
Use of Force and Restraints	0
Special Management Units	0
Sexual Abuse and Assault Prevention and Intervention	9
Sub-Total	9
Part 4 - Care	
Food Service	3
Hunger Strikes	1
Medical Care	0
Personal Hygiene	0
Significant Self-Harm and Suicide Prevention and Intervention	0
Sub-Total	4
Part 5 - Activities	
Recreation	0
Sub-Total	0
Total Deficiencies	17

•

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

⁷ 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.

⁸ During a special review, ODO will review a facility's compliance with at least 10 individual standards.

DETAINEE RELATIONS

The facility's ICE detainee population count was zero during the inspection; therefore, ODO did not conduct any detainee interviews. Despite the facility housing no detainees during the inspection, the facility maintains an active contract to house ICE detainees and had an ADP of 7 ICE detainees for FY 2023, meeting the ODO requirement for special reviews.

SPECIAL REVIEW FINDINGS

SAFETY

ENVIRONMENTAL HEALTH AND SAFETY (EHS)

ODO interviewed the facility fire warden, reviewed the master index, inspected the chemical storage areas of housing units seven and eight and the intake area of Tower West, and found:

- No documentation of a written hazardous communications program, outlining proper labeling, providing Safety Data Sheets (SDSs), and training for employees (**Deficiency EHS-1**⁹). This is a priority component;
- No master index compiled by the maintenance supervisor for all hazardous substances used at the facility nor master file of all SDSs including their locations (**Deficiency EHS-8**¹⁰);
- No documentation of reviews in the SDS master file (Deficiency EHS-9.11); and
- No master index to include a comprehensive, up-to-date list of emergency phone numbers (fire department, poison control center, etc.) (**Deficiency EHS-10**.12).

SECURITY

SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION (SAAPI)

ODO reviewed the facility's SAAPI program, interviewed a facility lieutenant, and found the facility did not have:

• Procedures for coordinating with ICE/ERO and other appropriate investigative agencies to ensure completion of administrative and criminal investigations for all

⁹ "In accordance with OSHA 29 CFR 1910.1200, Hazard Communication, each facility utilizing hazardous chemicals shall create a written hazardous communication program that outlines proper chemical labeling, providing Safety Data Sheets (SDS), and training for employees." *See* ICE NDS 2019, Standard, Environmental Health and Safety, Section (II)(A).

¹⁰ "The Maintenance Supervisor or facility designee will compile a master index of all hazardous substances in the facility, including their locations, along with a master file of SDSs. Documentation of reviews will be maintained in the SDS master file." *See* ICE NDS 2019, Standard, Environmental Health and Safety, Section (II)(A)(2).

¹¹ "Documentation of reviews will be maintained in the SDS master file." See ICE NDS 2019, Standard, Environmental Health and Safety, Section (II)(A)(2).

¹² "The master index will also include a comprehensive, up-to-date list of emergency phone numbers (fire department, poison control center, etc.)." *See* ICE NDS 2019, Standard, Environmental Health and Safety, Section (II)(A)(2).

- allegations of sexual abuse and assault (Deficiency SAAPI-9.13);
- Written procedures for coordination of internal administrative investigation with an assigned criminal investigative entity to ensure non-interference with criminal investigations, as well as coordination with ICE OPR (Deficiency SAAPI-11.14);
- Written procedures for disciplinary sanctions for staff, up to and including termination, when there is a substantiated allegation of sexual abuse and assault, or when staff has violated agency sexual abuse and assault policies (**Deficiency SAAPI-12**¹⁵);
- Written procedures for the facility's requirement to cooperate with all ICE/ERO audits and monitoring of facility compliance with sexual abuse and assault policies and standards (**Deficiency SAAPI-13**.16);
- Approval by ERO Dallas for the facility's written Prison Rape Elimination Act policy and procedures (Deficiency SAAPI-14¹⁷);
- Full compliance of the SAAPI program in place within 90 days of adopting the ICE NDS 2019 standards (**Deficiency SAAPI-15**.18);
- Posted protocols on the facility's website nor any protocols made available to the public by DCJ (**Deficiency SAAPI-16**.¹⁹);
- Postings of sexual abuse and assault awareness notices by ERO Dallas on all housing

5. Procedures for investigation and discipline of assailants, including:

a. Coordinating with ICE/ERO and other appropriate investigative agencies to ensure that an administrative and/or criminal investigation is completed for all allegations of sexual abuse and assault." See ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(A)(5)(a).

14 "This policy must mandate zero tolerance toward all forms of sexual abuse and assault, outline the facility's approach to preventing, detecting, and responding to such conduct, and include, at a minimum: ...

5. Procedures for investigation and discipline of assailants, including: ...

c. Procedures for coordination of internal administrative investigations with the assigned criminal investigative entity to ensure non-interference with criminal investigations, as well as coordination with the ICE Office of Professional Responsibility."

See ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(A)(5)(c). ¹⁵ "This policy must mandate zero tolerance toward all forms of sexual abuse and assault, outline the facility's approach to preventing, detecting, and responding to such conduct, and include, at a minimum: ...

- 5. Procedures for investigation and discipline of assailants, including: ...
 - c. Disciplinary sanctions for staff, up to and including termination, when there is a substantiated allegation of sexual abuse and assault, or when staff has violated agency sexual abuse and assault policies."

See ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(A)(5)(d). ¹⁶ "This policy must mandate zero tolerance toward all forms of sexual abuse and assault, outline the facility's approach to preventing, detecting, and responding to such conduct, and include, at a minimum: ...

- 6. Procedures for data collection and reporting; and
- 7. The facility's requirement to cooperate with all ICE/ERO audits and monitoring of facility compliance with sexual abuse and assault policies and standards."

See ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(A)(6-7) ¹⁷ "The facility's written policy and procedures must be reviewed and approved by ICE/ERO." See ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(A).

¹⁸ "The facility administrator shall ensure that, within 90 days of the adoption of this detention standard, written policy and procedures are in place and that the facility is in full compliance with its requirements and guidelines." *See* ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(A).

¹⁹ "Each facility shall also post its protocols on its website, if it has one, or otherwise make the protocols available to the public." See ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(A).

¹³ "This policy must mandate zero tolerance toward all forms of sexual abuse and assault, outline the facility's approach to preventing, detecting, and responding to such conduct, and include, at a minimum: ...

unit boards along with the name of the prevention of sexual assault compliance manager and information about local organizations that could assist detainees who had been victims of sexual abuse and assault, including mailing address and telephone numbers (i.e., toll free numbers), nor any distribution by the facility of the ICE/ERO "Sexual Assault Awareness Information" pamphlet (**Deficiency SAAPI-52**²⁰); nor

• Written procedures for administrative investigations, incorporating assessment of the credibility of an alleged victim, suspect, or witness, without regard to the individual's status as detainee, staff, or employee, nor polygraph requirement for a detainee alleging sexual abuse, nor methods to determine if actions or failures to act by the facility contributed to the abuse (**Deficiency SAAPI-137**.²¹).

CARE

FOOD SERVICE (FS)

ODO interviewed the food service director, observed all areas of FS operations, and found:

- No cleaning schedule for each FS area nor posted cleaning schedules in FS areas for easy reference (**Deficiency FS-96**²²);
- Multiple broken or missing ceiling tiles in the kitchen dish machine area (**Deficiency** FS-109.²³); and
- No protective shielding for two light covers in the kitchen washing area (Deficiency FS-110.²⁴).

Office of Detention Oversight July 2024

²⁰ "ICE/ERO will provide a sexual abuse and assault awareness notice to be posted on all housing-unit bulletin boards, as well as a "Sexual Assault Awareness Information" pamphlet to be distributed. The facility shall post with this notice the name of the facility PSA Compliance Manager and information about local organizations that can assist detainees who have been victims of sexual abuse and assault, including mailing addresses and telephone numbers (including toll-free hotline numbers where available)." *See* ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(F)(3).

²¹ "The facility shall develop written procedures for administrative investigations, including provisions requiring:

d. Assessment of the credibility of an alleged victim, suspect, or witness, without regard to the individual's status as detainee, staff, or employee, and without requiring any detainee who alleges sexual abuse and assault to submit to a polygraph;

e. An effort to determine whether actions or failures to act at the facility contributed to the abuse."

See ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(M)(3)(d-e).

²² "The FSA shall develop a cleaning schedule for each food service area and post it for easy reference." *See* ICE NDS 2019, Standard, Food Service, Section (II)(I)(6)(a).

²³ "Light fixtures, vent covers, wall-mounted fans, decorative materials, and similar equipment and materials attached to walls or ceilings shall be maintained in good repair." *See* ICE NDS 2019, Standard, Food Service, Section (II)(I)(10)(a).

²⁴ "Lights in food-production areas, utensil- and equipment-washing areas, and other areas displaying or storing food, equipment, or utensils shall be equipped with protective shielding." *See* ICE NDS 2019, Standard, Food Service, Section (II)(I)(10)(b).

HUNGER STRIKES (HS)

ODO reviewed non-medical and medical staff training records and found in out of training records, no documented hunger strike training at orientation and annually thereafter nor any training curriculum for hunger strikes (Deficiency HS-1.²⁵).

CONCLUSION

During this special review, ODO assessed the facility's compliance with 10 standards under NDS 2019 and found the facility in compliance with 6 of those standards. ODO found 17 deficiencies in the remaining 4 standards. Since its last rated inspection in November 2022, the facility has trended downward; however, this was ODO's first special review of DCJ against NDS 2019. DCJ went from 2 deficient standards and 13 deficiencies in November 2022 under NDS 2000 to 6 deficient standards and 17 deficiencies during this most recent special review, which includes 1 priority component deficiency in the EHS standard. DCJ completed its UCAP for its last inspection in November 2022, but DCJ's corrective actions may not have been effective in resolving its previous deficiencies cited by ODO. ODO recommends ERO Dallas work with the facility to resolve any remaining deficiencies in accordance with contractual obligations.

Compliance Inspection Results Compared	FY 2023 Special Review (NDS 2000/NDS 2019)	FY 2024 Special Review (NDS 2019)
Standards Reviewed	9/1	10
Deficient Standards	2	4
Overall Number of Deficiencies	13	17
Priority Component Deficiencies	0	1
Repeat Deficiencies	4	0
Areas Of Concern	15	0
Corrective Actions	0	0
Facility Rating	Good	Acceptable/Adequate

²⁵ "All staff shall be trained initially and annually thereafter to recognize the signs of a hunger strike, and to implement the procedures for referral for medical assessment and for management of a detainee on a hunger strike." *See* ICE NDS 2019, Standard, Hunger Strikes, Section (II)(A).