



**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  
Special Review  
2023-003-085**

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

**Randall County Jail  
Amarillo, Texas**

**February 14-16, 2023**

**SPECIAL REVIEW  
of the  
RANDALL COUNTY JAIL  
Amarillo, Texas**

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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 compliance inspection of the Randall County Jail (RCJ) in Amarillo, Texas, from February 14 to 16, 2023.<sup>1</sup> The facility opened in 2007 and is owned and operated by the Randall County Sheriff's Office. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at RCJ in 2007 under the oversight of ERO's Field Office Director in Dallas (ERO Dallas). ICE is an authorized user of RCJ 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 February 6, 2023. RCJ was inspected against the NDS 2019, and ODO's assigned rating is for ERO's informational purposes only.

ERO has no staff assigned to RCJ. A Randall County Sheriff's Office (RCSO) captain handles daily facility operations and manages [REDACTED] support personnel. The RCSO provides food services and medical care, and Keefe Commissary provides commissary services at the facility. The facility was accredited by the Texas Corrections Accreditation Commission and the National Commission on Correctional Health Care in December 2022.

Capacity and Population Statistics	Quantity
ICE Bed Capacity <sup>2</sup>	[REDACTED]
Average ICE Population <sup>3</sup>	[REDACTED]
Adult Male Population (as of February 14, 2023)	[REDACTED]
Adult Female Population (as of February 14, 2023)	[REDACTED]

This was ODO's first compliance inspection of the Randall County Jail.

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

<sup>2</sup> Data Source: ERO Facility List as of February 6, 2023.

<sup>3</sup> *Ibid.*

## SPECIAL REVIEW 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 over 72 hours, to assess compliance with ICE NDS. These inspections focus on facility compliance with detention standards that directly affect detainee life, health, safety, and well-being.<sup>4</sup>

ODO identifies violations of ICE detention standards, ICE policies, or operational procedures as “deficiencies.” ODO 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 *Special Review Findings* section of this report.

In fiscal year (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 Facility List Report for facilities that are not contractually obligated to an ICE NDS, which include but are not limited to Medical Care/Health Care, Medical Care (Women)/Health Care (Females), 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 Restraints, 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 corrective action plans; and (ii) provide senior executives with an independent assessment of facility operations. ODO’s findings inform ICE executive management in its decision-making to better allocate resources across the agency’s entire detention inventory.

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<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
<b>Part 1 – Safety</b>	
Environmental Health and Safety	1
<b>Sub-Total</b>	<b>1</b>
<b>Part 2 – Security</b>	
Hold Rooms in Detention Facilities	3
Use of Force and Restraints	1
Sexual Abuse and Assault Prevention and Intervention	39
<b>Sub-Total</b>	<b>43</b>
<b>Part 4 – Care</b>	
Food Service	1
Medical Care	0
Significant Self-Harm and Suicide Prevention and Intervention	0
Terminal Illness and Death	0
<b>Sub-Total</b>	<b>1</b>
<b>Part 5 – Activities</b>	
Recreation	1
<b>Sub-Total</b>	<b>1</b>
<b>Part 6 – Justice</b>	
Detainee Handbook	1
<b>Sub-Total</b>	<b>1</b>
<b>Total Deficiencies</b>	<b>47</b>

<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 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 did not conduct any detainee interviews since the facility detainee population remained at zero throughout the inspection. Despite a zero-detainee population count, the facility has an active contract to house ICE detainees and an ADP of four ICE detainees for FY 2022, meeting ODO's inspection criteria to conduct special reviews of over 72-hour ICE detention facilities with an ADP of one-to-nine detainees.

## SPECIAL REVIEW FINDINGS

### SAFETY

#### ENVIRONMENTAL HEALTH AND SAFETY (EHS)

ODO reviewed the facility's EHS policy, toured their food service area, observed the facility's chemical storage area, and found facility staff left toxic chemicals unsecured under a table next to the dishwasher machine in the main kitchen (**Deficiency EHS-20<sup>7</sup>**).

### SECURITY

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

ODO interviewed a facility lieutenant, observed the facility's hold rooms, and found the facility did not post signage outside the hold room, indicating the room's maximum capacity (**Deficiency HRDF-5<sup>8</sup>**).

ODO reviewed the facility's booking policy, interviewed a facility lieutenant, and found the facility staff members did not record when they provided food to the detainees in the hold rooms (**Deficiency HRDF-36<sup>9</sup>**).

ODO reviewed the detention log, interviewed a facility corporal, and found officers completed 30-minute irregular visual checks instead of the 15-minute check required by the standard (**Deficiency HRDF-37<sup>10</sup>**). **This is a priority component.**

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<sup>7</sup> "All toxic and caustic materials must be stored in secure areas, in their original containers, with the manufacturer's label intact on each container." See ICE NDS 2019, Standard, Environmental Health and Safety, Section (II)(A)(5)(a).

<sup>8</sup> "Hold rooms will contain sufficient seating for the maximum room capacity, which shall be posted outside the hold room." See ICE NDS 2019, Standard, Hold Rooms in Detention Facilities, Section (II)(A)(4).

<sup>9</sup> "The facility will record when food is provided." See ICE NDS 2019, Standard, Hold Rooms in Detention Facilities, Section (II)(D)(3).

<sup>10</sup> "Officers shall closely supervise the hold rooms through direct supervision, which involves irregular visual monitoring not to exceed 15 minutes between checks (each time recording the time and officer's name or identifier in the detention log)." See ICE NDS 2019, Standard, Hold Rooms in Detention Facilities, Section (II)(D)(4).

## USE OF FORCE AND RESTRAINTS (UOFR)

ODO reviewed the facility's security and control policy, interviewed a facility lieutenant, and found the facility did not have written procedures to govern mandatory after-action review for use-of-force incidents (whether calculated or immediate) and for the application of restraints (**Deficiency UOFR-94**<sup>11</sup>).

## SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION (SAAPI)

ODO reviewed facility policies and procedures, interviewed a facility lieutenant, and found the facility did not have:

- Written policy nor procedures for a SAAPI program that reflects the unique characteristics of the facility (**Deficiency SAAPI-1**<sup>12</sup>);
- Written policy nor procedures for a SAAPI program (**Deficiency SAAPI-2**<sup>13</sup>);
- Written SAAPI policy that mandates zero tolerance toward all forms of sexual abuse or assault and outlines the facility's approach to preventing, detecting, and responding to such conduct (**Deficiency SAAPI-3**<sup>14</sup>);
- Written policy that mandates zero tolerance towards all forms of sexual abuse and assault, nor the facility's approach to prevent, detect, and respond to sexual assault (**Deficiency SAAPI-4**<sup>15</sup>);
- Written SAAPI policy nor procedures for immediate reporting of sexual abuse allegations including procedures for immediate reporting of sexual abuse and assault allegations through the facility's chain of command to the highest facility official, including notifying ERO Dallas, responsibility of all staff to report allegations, referrals

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<sup>11</sup> "Written procedures shall govern the mandatory after-action review for use-of-force incidents (whether calculated or immediate), and for the application of restraints." *See* ICE NDS 2019, Standard, Use of Force and Restraints, Section (II)(K).

<sup>12</sup> "The facility's policy and procedures shall reflect the unique characteristics of the facility, including factors such as the availability of specialized community-based services, including rape crisis/trauma units in local medical centers, clinics, and hospitals." *See* ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(A).

<sup>13</sup> "The facility shall have written policy and procedures for a Sexual Abuse and Assault Prevention and Intervention Program." *See* ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(A).

<sup>14</sup> "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." *See* ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(A).

<sup>15</sup> "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:

1. Procedures on preventing sexual abuse and assault, including:
  - a. Procedures for assessing all detainees for their risk of sexual abusiveness or victimization;
  - b. Procedures for housing detainees in accordance with their classification assessment;
  - c. Training of all employees, contractors, and volunteers on the agency's and facility's zero tolerance policies and their responsibilities under those policies; and
  - d. Notification to detainees of the facility's Sexual Abuse and Assault Prevention and Intervention Program."

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*See* ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(A)(1)(a-d).



- to law enforcement, written documentation and a method to receive third party reporting with the information available to the public (**Deficiency SA-API-5<sup>16</sup>**);
- Written policy and procedures for a SA-API program including procedures for prompt and effective intervention to address the safety and treatment needs of detainee victims if an allegation or an assault occurs and procedures for offering immediate protection, including prevention of retaliation and medical and mental health referrals (**Deficiency SA-API-6<sup>17</sup>**). **This is a priority component;**
  - Written SA-API policy addressing procedures that include victim advocate services in SA-API programs (**Deficiency SA-API-7<sup>18</sup>**);
  - Written SA-API policy nor procedures for the investigation and discipline of assailants (**Deficiency SA-API-8<sup>19</sup>**);
  - Written SA-API policy nor procedures for investigation and discipline of assailants, including coordinating with ERO Dallas and other appropriate investigative agencies

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<sup>16</sup> “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: ...

2. Procedures for immediate reporting of sexual abuse and assault allegations, including:
  - a. Procedures for immediate reporting of sexual abuse and assault allegations through the facility’s chain of command, from the reporting official to the highest facility official, including also procedures for notifying ICE/ERO (this notification must be sent directly to the FOD) and a method by which staff can report outside the chain of command;
  - b. Responsibility of all staff to report allegations or suspicions of sexual abuse and assault;
  - c. Referrals to law enforcement agencies;
  - d. Written documentation requirements to ensure that each allegation or suspicion is properly reported and addressed; and
  - e. A method to receive third-party reports of sexual abuse and assault in its facility, with information made available to the public regarding how to report sexual abuse and assault on behalf of a detainee.”

*See ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(A)(2)(a-e).*

<sup>17</sup> “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: ...

3. Procedures for prompt and effective intervention to address the safety and treatment needs of detainee victims if an allegation is made or an assault occurs, including:
  - a. Procedures for offering immediate protection, including prevention of retaliation and medical and mental health referrals;
  - b. Plan to coordinate actions taken by staff first responders, medical and mental health practitioners, investigators, and facility leadership in response to an incident of sexual abuse and assault; and
  - c. Methods for addressing the alleged victim’s future safety, medical, and mental health needs.”

*See ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(A)(3)(a-c).*

<sup>18</sup> “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: ...

4. Procedures to include victim advocate services in sexual abuse and assault prevention and intervention programs, if such resources are available.”

*See ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(A)(4).*

<sup>19</sup> “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.”

*See ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(A)(5).*

- for completion of administrative/criminal investigations (**Deficiency SAAPI-9**<sup>20</sup>);
- Written SAAPI policy nor procedures for investigation and discipline of assailants, including following a uniform evidence protocol for accessing a forensic medical exam, which maximizes the potential for obtaining usable, physical evidence for administrative proceedings and criminal prosecutions (**Deficiency SAAPI-10**<sup>21</sup>);
- Written SAAPI policy nor procedures for investigation and discipline of assailants including procedures for coordination of internal administrative investigations with the assigned criminal investigative entity to ensure non-interference with criminal investigations, as coordinating with ICE OPR (**Deficiency SAAPI-11**<sup>22</sup>);
- Written policy nor procedures for investigation and discipline of assailants, including disciplinary sanctions for staff, up to termination when there is a substantiated allegation of sexual abuse and assault, or when staff violated agency sexual abuse and assault policies (**Deficiency SAAPI-12**<sup>23</sup>);
- Written policy nor procedures for data collection, reporting, and cooperating with ERO Dallas audits for monitoring compliance with the standard (**Deficiency SAAPI-13**<sup>24</sup>);

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<sup>20</sup> “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:
  - 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).*

<sup>21</sup> “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: ...
  - b. Following a uniform evidence protocol, including access to a forensic medical exam, which maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions.”

*See ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(A)(5)(b).*

<sup>22</sup> “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).*

<sup>23</sup> “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: ...
  - d. 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).*

<sup>24</sup> “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).*

- A written SAAPI policy nor procedures that ERO Dallas reviewed and approved (**Deficiency SAAPI-14**<sup>25</sup>);
- Written policy nor procedures for a SAAPI program in place within 90 days of adopting the ICE NDS 2019 standards (**Deficiency SAAPI-15**<sup>26</sup>).
- Posted SAAPI protocols for the public to view on the facility’s website (**Deficiency SAAPI-16**<sup>27</sup>);
- A designated prevention of sexual assault (PSA) compliance manager to serve, oversee, coordinate, and act as the facility point of contact for the ICE/ERO PSA coordinator to ensure compliance with SAAPI policies and procedures (**Deficiency SAAPI-17**<sup>28</sup>)  
**This is a priority component;**
- A designated PSA compliance manager to assist with the development of written policies and procedures for the SAAPI program (**Deficiency SAAPI-18**<sup>29</sup>);
- A designated PSA compliance manager to assist with the development of initial and ongoing training protocols (**Deficiency SAAPI-19**<sup>30</sup>);
- A designated PSA compliance manager to serve as a liaison with other agencies (**Deficiency SAAPI-20**<sup>31</sup>);
- A designated PSA compliance manager to coordinate the gathering of statistics and reports on incidents of sexual abuse or assault, as detailed in “O. Data Collection” in this standard (**Deficiency SAAPI-21**<sup>32</sup>);
- A designated PSA compliance manager to review the results of every investigation of sexual abuse and assault and assist in conducting annual review of all investigations in compliance with the Privacy Act to assess and improve prevention and response efforts (**Deficiency SAAPI-22**<sup>33</sup>);

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<sup>25</sup> “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).

<sup>26</sup> “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).

<sup>27</sup> “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).

<sup>28</sup> “The facility administrator shall designate a Prevention of Sexual Assault (PSA) Compliance Manager who shall serve as the facility point of contact for the ICE/ERO PSA Coordinator and who has sufficient time and authority to oversee facility efforts to comply with facility sexual abuse and assault prevention and intervention policies and procedures.” *See* ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(C).

<sup>29</sup> “The PSA Compliance Manager shall assist with the development of written policies and procedures for the Sexual Abuse and Assault Prevention and Intervention Program, as specified above in this standard, and with keeping them current.” *See* ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(C)(1).

<sup>30</sup> “The PSA Compliance Manager shall assist with the development of initial and ongoing training protocols.” *See* ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(C)(2).

<sup>31</sup> “The PSA Compliance Manager shall serve as a liaison with other agencies.” *See* ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(C)(3).

<sup>32</sup> “The PSA Compliance Manager shall coordinate the gathering of statistics and reports on incidents of sexual abuse or assault, as detailed in “O. Data Collection” in this standard.” *See* ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(C)(4).

<sup>33</sup> “The PSA Compliance Manager shall review the results of every investigation of sexual abuse and assault and assist in conducting an annual review of all investigations in compliance with the Privacy Act to assess and improve prevention and response efforts.” *See* ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and

- A designated PSA compliance manager to review and maintain required levels of confidentiality of facility practices (**Deficiency SA-API-23**<sup>34</sup>); and
- A designated PSA compliance manager for notifications of sexual assault allegations (**Deficiency SA-API-24**<sup>35</sup>).

ODO reviewed the facility’s orientation procedures, interviewed a facility lieutenant, and found the facility did not:

- Provide detainees with a SA-API orientation upon arrival to the facility that discusses the facility’s zero tolerance policy for sexual abuse or assault (**Deficiency SA-API-40**<sup>36</sup>). **This is a priority component;**
- Provide instruction to detainees on the facility’s SA-API program (**Deficiency SA-API-41**<sup>37</sup>);
- Inform the detainees of prevention and intervention strategies or definitions and examples of detainee-on-detainee sexual abuse and assault, staff-on-detainee sexual abuse and assault, and coercive sexual activity (**Deficiency SA-API-42**<sup>38</sup>);
- Inform detainees about methods of reporting sexual abuse and assault including one or more staff members other than an immediate point of contact, the ICE Detention and Reporting Information Line, the Department of Homeland Security Office of Inspector General, ICE OPR, self-protection, prohibition against retaliation, and the right to receive treatment and counseling (**Deficiency SA-API-43**<sup>39</sup>);

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Intervention, Section (II)(C)(5).

<sup>34</sup> “The PSA Compliance Manager shall review facility practices to ensure required levels of confidentiality are maintained.” See ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(C)(6).

<sup>35</sup> “The PSA Compliance Manager shall be notified of every allegation.” See ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(C)(7).

<sup>36</sup> “The facility administrator shall ensure that the orientation program, required by Standard 2.1 “Admission and Release” notifies and informs detainees about the agency’s and the facility’s zero tolerance policies for all forms of sexual abuse and assault.” See ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(F).

<sup>37</sup> “Following the intake process, the facility shall provide instruction to detainees on the facility’s Sexual Abuse and Assault Prevention and Intervention Program.” See ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(F).

<sup>38</sup> “Following the intake process, the facility shall provide instruction to detainees on the facility’s Sexual Abuse and Assault Prevention and Intervention Program and ensure that such instruction includes (at a minimum):

1. The facility’s zero-tolerance policy for all forms of sexual abuse and assault;
2. Prevention and intervention strategies;
3. Definitions and examples of detainee-on-detainee sexual abuse and assault, staff-on-detainee sexual abuse and assault and coercive sexual activity.”

See ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(F)(1-3).

<sup>39</sup> “Following the intake process, the facility shall provide instruction to detainees on the facility’s Sexual Abuse and Assault Prevention and Intervention Program and ensure that such instruction includes (at a minimum): ...

4. Explanation of methods for reporting sexual abuse and assault, including one or more staff members other than an immediate point-of-contact line officer, the ICE Detention and Reporting Information Line (DRIL), the DHS Office of Inspector General and the ICE Office of Professional Responsibility;
5. Information about self-protection and indicators of sexual abuse and assault;
6. Prohibition against retaliation, including an explanation that reporting sexual abuse and assault shall not negatively impact the detainee’s immigration proceedings; and

- Maintain documentation of detainee participation in the instruction session (**Deficiency SAAPI-45**<sup>40</sup>);
- Develop policies and procedures to ensure that detainees have multiple ways to privately report sexual abuse and assault, retaliation for reporting sexual abuse and assault, or staff neglect or violations of responsibilities that contributed to such incidents (**Deficiency SAAPI-46**<sup>41</sup>);
- Have a SAAPI policy to provide detainees who are victims of sexual abuse and assault, the option to report the incident or situation to a designated staff member other than an immediate point of contact, such as the program coordinator or a mental health specialist (**Deficiency SAAPI-47**<sup>42</sup>);
- Provide detainees with a program coordinator or staff members' contact information for reporting allegations (**Deficiency SAAPI-48**<sup>43</sup>);
- Provide a SAAPI pamphlet to detainees that includes the PSA compliance manager, mailing address, and toll-free numbers for local organizations for victims of sexual abuse (**Deficiency SAAPI-52**<sup>44</sup>); and
- Keep new arrivals separate from the general population until they complete a classification screening and facility staff houses them accordingly (**Deficiency SAAPI-74**<sup>45</sup>). **This is a priority component.**

Additionally, ODO interviewed a facility lieutenant and found the facility did not:

- Develop written procedures for administrative investigations, including provisions requiring preservation of direct and circumstantial evidence, including any available

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7. Right of a detainee who has been subjected to sexual abuse and assault to receive treatment and counseling.”

*See* ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(F)(4-7).

<sup>40</sup> “The facility shall maintain documentation of detainee participation in the instruction session.” *See* ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(F).

<sup>41</sup> “The facility shall develop policies and procedures to ensure that detainees have multiple ways to privately report sexual abuse and assault, retaliation for reporting sexual abuse and assault, or staff neglect or violations of responsibilities that may have contributed to such incidents.” *See* ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(F).

<sup>42</sup> “Each facility’s Sexual Abuse and Assault Prevention and Intervention program shall provide detainees who are victims of sexual abuse and assault the option to report the incident or situation to a designated staff member other than an immediate point-of-contact line officer (e.g., the program coordinator or a mental health specialist).” *See* ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(F)(1).

<sup>43</sup> “The facility shall provide detainees with the name of the program coordinator or designated staff member and information on how to contact him or her.” *See* ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(F)(1).

<sup>44</sup> “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).

<sup>45</sup> “Each new arrival shall be kept separate from the general population until he or she is classified and housed accordingly.” *See* ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(I)(1).

- physical and DNA evidence and any available electronic monitoring data; interviewing alleged victims, suspected perpetrators, and witnesses; and reviewing prior complaints and reports of sexual abuse and assault involving the suspected perpetrator (**Deficiency SA-API-136**<sup>46</sup>);
- Develop written procedures for administrative investigations, including provisions requiring 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 and the effort to determine whether actions or failures to act at the facility contributed to the abuse (**Deficiency SA-API-137**<sup>47</sup>);
  - Develop written procedures for administrative investigations, including provisions requiring documentation of each investigation by written report and retention of such reports (**Deficiency SA-API-138**<sup>48</sup>);
  - Prepare a negative report for sexual assaults indicating they had not had any sexual assaults in the reporting period (**Deficiency SA-API-161**<sup>49</sup>); and
  - Prepare a negative report nor provide the results and findings of the annual review to the facility administrator and ERO Dallas for transmission to the ICE PSA coordinator (**Deficiency SA-API-162**<sup>50</sup>).

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<sup>46</sup> “The facility shall develop written procedures for administrative investigations, including provisions requiring:

- a. Preservation of direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data;
- b. Interviewing alleged victims, suspected perpetrators, and witnesses;
- c. Reviewing prior complaints and reports of sexual abuse and assault involving the suspected perpetrator.”

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

<sup>47</sup> “The facility shall develop written procedures for administrative investigations, including provisions requiring:

- a. 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).*

<sup>48</sup> “The facility shall develop written procedures for administrative investigations, including provisions requiring:

...

- f. Documentation of each investigation by written report, which shall include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings; and
- g. Retention of such reports for as long as the alleged abuser is detained or employed by the agency or facility, plus five years.”

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

<sup>49</sup> “If the facility has not had any reports of sexual abuse and assault during the annual reporting period, then the facility shall prepare a negative report.” *See ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(M)(5).*

<sup>50</sup> “The results and findings of the annual review shall be provided to the facility administrator and ICE/ERO for transmission to the ICE PSA Coordinator (this notification must be sent directly to the FOD).” *See ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(M)(5).*

## CARE

### **FOOD SERVICE (FS)**

ODO reviewed the facility's FS policy, toured the kitchen, and interviewed a FS sergeant, and found the facility staff did not secure all toxic, flammable, and caustic materials inside a locked and labeled cabinet or room. Specifically, facility staff left four different Cynamic Chemical Company cleaning chemicals unsecured and under a table next to the dishwasher machine in the main kitchen (**Deficiency FS-107**<sup>51</sup>).

## ACTIVITIES

### **RECREATION (R)**

ODO observed the outdoor recreation areas, interviewed a facility lieutenant, and found the facility did not offer any fixed nor moveable equipment for detainees (**Deficiency R-8**<sup>52</sup>).

## JUSTICE

### **DETAINEE HANDBOOK (DH)**

ODO reviewed the facility handbook and found the handbook did not include information regarding available services for disability accommodations nor the sexual abuse and assault prevention and intervention program (**Deficiency DH-2**<sup>53</sup>). **This is a priority component.**

## **CONCLUSION**

During this special review, ODO assessed the facility's compliance with 10 standards under NDS 2019 and found the facility in compliance with 3 of those standards. ODO found 47 deficiencies in the remaining 7 standards. Most of the deficiencies ODO identified are administrative in nature and are the result of the facility not having a written policy/procedure; however, six of the deficiencies are priority component deficiencies. This was ODO's first inspection of RCJ, and therefore no trend analysis is available for this facility. ODO recommends ERO Dallas work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations.

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<sup>51</sup> "All toxic, flammable, and caustic materials shall be segregated from food products and stored in a locked and labeled cabinet or room." See ICE NDS 2019, Standard, Food Service, Section (II)(I)(9)(d).

<sup>52</sup> "Exercise areas shall offer a variety of fixed and movable equipment." See ICE NDS 2019, Standard, Recreation, Section (II)(C)(1).

<sup>53</sup> "The facility handbook will specify in detail the rules, regulations, policies, and procedures with which every detainee must comply and include information about available services such as: personal hygiene rules, recreation, correspondence and other mail, visitation, library/legal access, telephone use, sexual abuse and assault prevention and intervention program, disability accommodations, restricted areas, contraband, housekeeping, disciplinary rules and sanctions, grievance and appeal procedures, health care access, religious services, canteen and commissary, property, and so forth." See ICE NDS 2019, Standard, Detainee Handbook, Section (II)(B).

<b>Compliance Inspection Results Compared</b>	<b>FY 2022 Special Review NDS 2019</b>	<b>FY 2023 Special Review NDS2019</b>
Standards Reviewed	N/A	10
Deficient Standards	N/A	7
Overall Number of Deficiencies	N/A	47
Priority Component Deficiencies	N/A	6
Repeat Deficiencies	N/A	N/A
Areas Of Concern	N/A	0
Corrective Actions	N/A	0
Facility Rating	N/A	Failure