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**Office of Detention Oversight
Special Review
2023-003-155**

**Enforcement and Removal Operations
ERO Salt Lake City Field Office**

**Salt Lake County Metro Jail
Salt Lake City, Utah**

July 25-27, 2023

**SPECIAL REVIEW
of the
SALT LAKE COUNTY METRO JAIL
Salt Lake City, Utah**

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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 special review of the Salt Lake County Metro Jail (SLCMJ) in Salt Lake City, Utah, from July 25 to 27, 2023.¹ The facility opened in 1993 and is owned by Salt Lake County and operated by the Salt Lake County Sheriff's Office. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at SLCMJ in 1993 under the oversight of ERO's Field Office Director in Salt Lake City (ERO Salt Lake City). 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 Facility List as of July 17, 2023. SLCMJ was inspected against the NDS 2019, and ODO's assigned rating is for ERO's informational purposes only.

[REDACTED] A jail captain handles daily facility operations and manages [REDACTED] support personnel. Aramark Corporation provides food services, Wellcon provides medical care, and Keefe Commissary provides commissary services at the facility. The facility does not hold any accreditations from any outside entities. In December 2021, SLCMJ was audited for the Department of Justice (DOJ) Prison Rape Elimination Act (PREA) and was DOJ PREA certified.

Capacity and Population Statistics	Quantity
ICE Bed Capacity ²	[REDACTED]
Average ICE Population ³	[REDACTED]
Adult Male Population (as of July 25, 2023)	[REDACTED]
Adult Female Population (as of July 25, 2023)	[REDACTED]

This was ODO's first special review of the Salt Lake County Metro Jail.

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

² Data Source: ERO Facility List as of July 17, 2023.

³ *Ibid.*

SPECIAL REVIEW 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.⁴

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

Beginning fiscal year (FY) 2022, ODO will conduct 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 will conduct 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. ODO will conduct a complete review of several core standards, which may include but are not limited to Medical Care/Health Care, Medical Care (Women)/Health Care (Females), Hunger Strikes, Suicide Prevention, Food Service, Environmental Health and Safety, Emergency Plans, Use of Force and Restraints/Use of Physical Control Measures and Restraints, Special Management Units, Educational Policy (Family Residential Standard (FRS) only), Behavior Management (FRS only), Admission and Release, Classification, and Funds and Personal Property.

Upon completion of each review, 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.

⁴ ODO reviews the facility’s compliance with selected standards in their entirety.

FINDINGS BY NATIONAL DETENTION STANDARDS 2019 MAJOR CATEGORIES

NDS 2019 Standards Inspected ^{5,6}	Deficiencies
Part 1 - Safety	
Environmental Health and Safety	6
Sub-Total	6
Part 2 - Security	
Use of Force and Restraints	0
Special Management Unit	0
Sexual Abuse and Assault Prevention and Intervention	0
Sub-Total	0
Part 4 - Care	
Food Service	7
Medical Care	0
Significant Self-Harm and Suicide Prevention and Intervention	0
Terminal Illness and Death	0
Sub-Total	7
Part 5 - Activities	
Recreation	1
Sub-Total	1
Part 6 - Justice	
Detainee Handbook	2
Sub-Total	2
Total Deficiencies	16

⁵ For greater detail on ODO's findings, see the Special Review 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 interviewed the only detainee the facility housed during the inspection, who voluntarily agreed to participate. The detainee made no allegations of discrimination, mistreatment, or abuse and reported satisfaction with facility services.

SPECIAL REVIEW FINDINGS

SAFETY

ENVIRONMENTAL HEALTH AND SAFETY (EHS)

ODO reviewed the facility's EHS documentation, interviewed a facility lieutenant, and found the facility did not create a written hazardous communication program, outlining chemical labeling, Safety Data Sheet (SDS) distribution, and employee training (**Deficiency EHS-1⁷**). **This is a priority component.**

ODO interviewed the food service administrator (FSA), inspected the chemical storage areas in the food service department, reviewed the facility's EHS program and policies, and found the following deficiencies:

- No inventory to account for eight out of eight hazardous materials: Liquid Laundry Chlorine Bleach, Grease Lift, Lime Away, Solid Power XL, Oasis 115 XP, Oasis 146 Multi-Quat Sanitizer, Kool Klene, and Medallion (**Deficiency EHS-2⁸**);
- No perpetual inventory of the hazardous (flammable, toxic, or caustic) substances used and stored at the facility (**Deficiency EHS-3⁹**);
- The facility did not maintain inventory records for each substance the facility used (**Deficiency EHS-4¹⁰**); and
- No inventory records for hazardous substances documenting current, before, during, and after use (**Deficiency EHS-16¹¹**).

ODO interviewed a facility lieutenant and found the facility did not create a written hazardous communication program in accordance with the Occupational Safety and Health Administration regulations, outlining the proper chemical labeling, SDS distribution, and training for employees

⁷ "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).

⁸ "The facility will establish a system for storing, issuing, and maintaining inventories of, and accountability for, hazardous materials." See ICE NDS 2019, Standard, Environmental Health and Safety, Section (II)(A).

⁹ "Every area will have a perpetual inventory of the hazardous (flammable, toxic, or caustic) substances used and stored in that area." See ICE NDS 2019, Standard, Environmental Health and Safety, Section (II)(A).

¹⁰ "Inventory records will be maintained for each substance." See ICE NDS 2019, Standard, Environmental Health and Safety, Section (II)(A).

¹¹ "c. Inventory records for a hazardous substance must be kept current before, during, and after each use." See ICE NDS 2019, Standard, Environmental Health and Safety, Section (II)(A)(4)(c).

(Deficiency EHS-33¹²). This is a priority component.

CARE

FOOD SERVICE (FS)

ODO interviewed the FSA, reviewed the facility's FS program and policies, observed FS kitchen equipment, such as ovens, tilt skillets and sheet pans, and found the following deficiencies:

- Unsanitary FS areas. Specifically, ODO observed FS kitchen equipment, to include ovens, tilt skillets, and sheet pans soiled with food residue and stained with an accumulation of burnt food particles, grease, and debris (**Deficiency FS-1¹³**);
- Food and Drug Administration (FDA) Food Code, Title 21 CFR 110.35 requires physical facilities be maintained in a sanitary condition and shall be kept in repair sufficient to prevent food from becoming adulterated, and ODO observed food service kitchen equipment, to include ovens, tilt skillets, and sheet pans soiled with food residue and stained with an accumulation of burnt food particles, grease, and debris (**Deficiency FS-39¹⁴**);
- No storage area, meeting the environmental standard for cleanliness and order (**Deficiency FS-91¹⁵**); and
- No adherence to sanitary conditions according FDA Food Code, Title 21 CFR 110.35. Specifically, ODO observed food service kitchen equipment, to include ovens, tilt skillets, and sheet pans soiled with food residue and stained with an accumulation of burnt food particles, grease, and debris (**Deficiency FS-95¹⁶**).

ODO reviewed ■ FS staff training records and found in ■ out of ■ training records, no documented preemployment medical examination (**Deficiency FS-86¹⁷**).

¹² "The facility will comply with standards and regulations issued by the National Fire Protection Association (NFPA), Environmental Protection Agency (EPA) and OSHA, national, state, and local 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 2019, Standard, Environmental Health and Safety, Section (II)(D).

¹³ "The facility shall provide detainees with nutritious, attractively presented meals, prepared and served in a sanitary and hygienic food service operation." See ICE NDS 2019, Standard, Food Service, Section (I).

¹⁴ "Food shall be prepared and served in compliance with the most recent version of the FDA food code and/or applicable local standards." See ICE NDS 2019, Standard, Food Service, Section (II)(E)(2).

¹⁵ "All facilities shall meet the following environmental standards: a. Clean, well-lit, and orderly work and storage areas. b. Overhead pipes removed or covered, to eliminate the food-safety hazard posed by leaking or dusty pipes. c. Routinely cleaned walls, floors, and ceilings in all areas. d. Ventilation hoods, to prevent grease buildup and wall/ceiling condensation that can drip into food or onto food-contact surfaces. Filters or other grease- extracting equipment shall be readily removable for cleaning and replacement. e. Eighteen-inch clearance (minimum) underneath sprinkler deflectors." See ICE NDS 2019, Standard, Food Service, Section (II)(I)(5)(a-e).

¹⁶ "The facility will adhere to the health and safety standards of the FDA and/or state or local authorities with oversight of food service operations." See ICE NDS 2019, Standard, Food Service, Section (II)(I)(6).

¹⁷ "All food service personnel (both staff and detainee) shall receive a documented preemployment medical examination." See ICE NDS 2019, Standard, Food Service, Section (II)(I)(3)(a).

ODO interviewed the FSA, reviewed the facility’s FS program and policies, inspected the chemical storage areas in the FS department, and found staff did not know the location and on-hand quantities of the following: Liquid Laundry Chlorine Bleach, Grease Lift, Lime Away, Solid Power XL, Oasis 115 XP, Oasis 146 Multi-Quat Sanitizer, Kool Kleene, and Medallion. ODO also found the staff didn’t know these materials must be controlled and accounted for daily (**Deficiency FS-105¹⁸**).

ODO interviewed the FSA, reviewed the fixed fire suppression system inspection tag, and found a qualified contractor last inspected the fixed fire suppression system on November 8, 2022 (**Deficiency FS-112¹⁹**).

ODO interviewed the FSA, reviewed the facility’s FS program and policies, and found facility policy authorized the jail processing division administrator to change food rations to a disciplinary diet option that included cold sandwiches, less elaborate items than the standard presentation, and pureed food or nutrition loaf. Since no detainees were on disciplinary sanctions during the review period, ODO noted this as an **Area of Concern**.

ACTIVITIES

RECREATION (R)

ODO interviewed a facility lieutenant and found the facility did not have an individual responsible for the development and oversight of the recreation program (**Deficiency R-7²⁰**). **This is a priority component.**

JUSTICE

DETAINEE HANDBOOK (DH)

ODO interviewed a facility lieutenant, reviewed the facility handbook, and found the facility handbook did not include sanctions for violating facility disciplinary rules (**Deficiency DH-2²¹**). **This is a priority component.**

ODO reviewed detainee detention files and facility admission procedures, interviewed a facility lieutenant, and found the facility did not obtain nor maintain detainee acknowledgement for the receipt of the ICE National Detainee Handbook (**Deficiency DH-9²²**). **This is a priority**

¹⁸ “All staff members shall know where and how much toxic, flammable, or caustic material is on hand, and be aware that their use must be controlled and accounted for daily.” See ICE NDS 2019, Standard, Food Service, Section (II)(I)(9)(b).

¹⁹ “A qualified contractor shall inspect the system every six months.” See ICE NDS 2019, Standard, Food Service, Section (II)(I)(10)(c).

²⁰ “All facilities shall have an individual responsible for the development and oversight of the recreation program.” See ICE NDS 2019, Standard, Recreation, Section (II)(B).

²¹ “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: disciplinary rules and sanctions.” See ICE NDS 2019, Standard, Detainee Handbook, Section (II)(B).

²² “The facility will document and maintain a detainee acknowledgement of receipt of the ICE National Detainee

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 6 of those standards. ODO found 16 deficiencies in the remaining 4 standards. ODO found mainly administrative deficiencies due to SLMJ staff not updating facility written policy to include ICE/ERO requirements and not tracking hazardous substances used at the facility. Five of the deficiencies were priority component deficiencies. This was ODO's first inspection of SLMJ; therefore, ODO performed no trend analysis of this facility. ODO recommends ERO Salt Lake work with the facility to resolve deficiencies in accordance with contractual obligations.

Compliance Inspection Results Compared	No Previous ODO Inspection	FY 2023 Special Review (NDS 2019)
Standards Reviewed	N/A	10
Deficient Standards	N/A	4
Overall Number of Deficiencies	N/A	16
Priority Component Deficiencies	N/A	5
Repeat Deficiencies	N/A	N/A
Areas Of Concern	N/A	1
Corrective Actions	N/A	0
Facility Rating	N/A	Acceptable

Handbook and facility handbook." See ICE NDS 2019, Standard, Detainee Handbook, Section (II)(F).