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**Office of Detention Oversight  
Special Review  
2023-003-165**

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

**Tulsa County Jail  
(David L. Moss Justice Center)  
Tulsa, Oklahoma**

**June 27-29, 2023**

**SPECIAL REVIEW  
of the  
TULSA COUNTY JAIL (DAVID L. MOSS JUSTICE CENTER)  
Tulsa, Oklahoma**

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## SPECIAL REVIEW TEAM MEMBERS



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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 Tulsa County Jail (David L. Moss Justice Center) (TCJ) in Tulsa, Oklahoma, from June 27 to 29, 2023.<sup>1</sup> The facility opened in 1997 and is owned and operated by the Tulsa County Sheriff’s Office. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at TCJ in 2008 under the oversight of ERO’s Field Office Director in Dallas (ERO Dallas). The facility operates under the National Detention Standards (NDS) 2019.<sup>2</sup>

[REDACTED] A TCJ risk manager handles daily facility operations and manages [REDACTED] support personnel. Summit Food Services provides food services, Turn-Key Health Clinics provides medical care, and TCJ provides commissary services at the facility. The facility was accredited by the National Commission on Correctional Health Care in October 2021 and the American Correctional Association in December 2021. In January 2023, TCJ was audited for the Department of Homeland Security (DHS) Prison Rape Elimination Act (PREA) and was DHS PREA certified.

Capacity and Population Statistics	Quantity
ICE Bed Capacity <sup>3</sup>	[REDACTED]
Average ICE Population <sup>4</sup>	[REDACTED]
Adult Male Population (as of June 27, 2023)	[REDACTED]
Adult Female Population (as of June 27, 2023)	[REDACTED]

During its last full inspection, in Fiscal Year (FY) 2020, ODO found 40 deficiencies in the following areas: Admission and Release (4); Custody Classification System (3); Disability Identification, Assessment, and Accommodation (4); Environmental Health and Safety (2); Food Service (1); Funds and Personal Property (5); Grievance System (2); Law Libraries and Legal Materials (1); Personal Hygiene (1); Recreation (2); Religious Practices (2); Sexual Abuse and Assault Prevention and Intervention (3); Special Management Unit (4); Staff-Detainee Communication (1); Telephone Access (2); Use of Force (2); Visitation (1).

<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>2</sup> In October 2020, TCJ signed a new contract with ERO, changing from an over 72-hour facility to an under 72-hour facility, and changing their required NDS to NDS 2019.

<sup>3</sup> Data Source: ERO Facility List as of June 20, 2023.

<sup>4</sup> *Ibid.*

## SPECIAL REVIEW PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population (ADP) greater than 10, 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.<sup>5</sup>

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 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.

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<sup>5</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>6,7</sup>	Deficiencies
<b>Part 1 - Safety</b>	
Environmental Health and Safety	0
<b>Sub-Total</b>	<b>0</b>
<b>Part 2 - Security</b>	
Use of Force and Restraints	0
Special Management Units	0
Sexual Abuse and Assault Prevention and Intervention	0
<b>Sub-Total</b>	<b>0</b>
<b>Part 4 - Care</b>	
Food Service	0
Medical Care	1
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>3</b>

<sup>6</sup> For greater detail on ODO's findings, see the *Special Review Inspection Findings* section of this report.

<sup>7</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 4 ICE detainees for FY 2022, meeting ODO's inspection criteria to conduct special reviews of under 72-hour ICE detention facilities with an ADP of 1 or more detainees.

## SPECIAL REVIEW FINDINGS

### CARE

#### MEDICAL CARE (MC)

ODO reviewed 25 detainee medical records and found in 3 out of 25 records, the licensed nurse practitioner (LPN) initiated tuberculosis (TB) screening questionnaires; however, the LPN did not complete the clinical questions for four "additional symptoms" and five "additional risk factors." Additionally, the LPN checked the box for Question No. 18, which stated, "No indication requiring immediate purified protein derivative (PPD), schedule routine PPD," and facility staff placed the detainees in general population on the same day (**Deficiency MC-18<sup>8</sup>**). **This is a priority component.**

### ACTIVITIES

#### RECREATION (R)

ODO interviewed facility staff, inspected the housing unit and outdoor recreation areas, and found non-citizens have access to only one handball court for exercise. Additionally, the handball court did not offer a variety of equipment for non-citizen use (**Deficiency R-8<sup>9</sup>**).

### JUSTICE

#### DETAINEE HANDBOOK (DH)

ODO reviewed ■ detainee detention files and found in ■ out of ■ files, facility staff did not document and maintain acknowledgment of receipt of the ICE National Detainee Handbook (**Deficiency DH-9<sup>10</sup>**). **This is a priority component.**

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<sup>8</sup> "All new arrivals shall receive tuberculosis (TB) screening in accordance with the most current Centers for Disease Control and Prevention (CDC) guidelines, including, but not limited to, CDC Guidelines for Correctional Facilities, prior to being placed in general population." See ICE NDS 2019, Standard, Medical Care, Section (II)(D)(1).

<sup>9</sup> "Exercise areas shall offer a variety of fixed and movable equipment." See ICE NDS 2019, Standard, Recreation, Section (II)(C)(1).

<sup>10</sup> "The facility will document and maintain a detainee acknowledgement of receipt of the ICE National Detainee Handbook and facility handbook." See ICE NDS 2019, Standard, Detainee Handbook, Section (II)(F).

## CONCLUSION

During this special review, ODO assessed the facility’s compliance with 10 standards under NDS 2019 and found the facility in compliance with 7 of those standards. ODO found three deficiencies in the remaining three standards, two of which were priority component deficiencies. Since TCJ’s last full inspection in October 2019, the facility has shown improvement. The facility changed their contractually required NDS in October 2020 from the Performance Based National Detention Standards (PBNDS) 2011 (Revised 2016), which ODO inspected during the full compliance inspection in October 2019 to the NDS 2019, which ODO inspected during this special review. TCJ went from 17 deficient standards and 40 deficiencies in October 2019 to 3 deficient standards and 3 deficiencies during this most recent special review, which includes 2 priority components for non-citizen acknowledgment of receipt of the ICE National Detainee Handbook, and for new arrivals receiving TB screenings before placement in general population. The facility’s improved performance was likely a result of implementing the NDS 2019 in October 2020. ODO recommends ERO continue to work with the facility to resolve the remaining deficiencies in accordance with contractual obligations.

<b>Compliance Inspection Results Compared</b>	<b>FY 2020 Full Inspection (PBNDS 2011) (Revised 2016)</b>	<b>FY 2023 Special Review Inspection (NDS 2019)</b>
Standards Reviewed	19	10
Deficient Standards	17	3
Overall Number of Deficiencies	40	3
Priority Component Deficiencies	4	2
Repeat Deficiencies	1	0
Areas Of Concern	2	0
Corrective Actions	1	0
Facility Rating	N/A	Good