

Office of Professional Responsibility

Burnet County Jail Inspection (2024-003-394)

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U.S. Immigration
and Customs
Enforcement



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**Office of Detention Oversight
Special Review
2024-003-394**

**Enforcement and Removal Operations
ERO San Antonio Field Office**

**Burnet County Jail
Burnet, Texas**

August 6-8, 2024

**SPECIAL REVIEW
of the
BURNET COUNTY JAIL
Burnet, 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 special review of the Burnet County Jail (BCJ) in Burnet, Texas, from August 6 to 8, 2024.¹ The facility opened in 2009 and is owned by Burnet County and operated by the Burnet County Sheriff’s Office. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at BCJ in 2014 under the oversight of ERO’s Field Office Director in San Antonio (ERO San Antonio). 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 August 5, 2024. BCJ was inspected against the NDS 2019, and ODO’s assigned rating is for ERO’s informational purposes only.

[REDACTED] A jail administrator handles daily facility operations and manages [REDACTED] support personnel. Aramark provides food and commissary services, and Turnkey provides medical care at the facility. The facility was accredited by the Texas Commission on Jail Standards in May 2024.

Capacity and Population Statistics	Quantity
ICE Bed Capacity. ²	[REDACTED]
Average ICE Population. ³	[REDACTED]
Adult Male Population (as of August 6, 2024)	[REDACTED]
Adult Female Population (as of August 6, 2024)	[REDACTED]

During its last rated inspection, in Fiscal Year (FY) 2023, ODO found 14 deficiencies in the following areas: Hold Rooms in Detention Facilities (2); Sexual Abuse and Assault Prevention and Intervention (4); Food Service (1); Medical Care (6); and Significant Self-Harm and Suicide Prevention and Intervention (1).

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 Custody Management Division Authorized Facility List as of August 5, 2024.

³ *Ibid.*

⁴ Despite the facility housing no detainees during the special review, the facility maintains an active contract to house ICE detainees and had an FY 2023 ADP of 1, meeting the ODO requirement for special reviews.

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	
Hold Rooms in Detention Facilities	0
Use of Force and Restraints	0
Special Management Units	0
Sexual Abuse and Assault Prevention and Intervention	8
Sub-Total	8
Part 4 - Care	
Food Service	1
Hunger Strikes	0
Medical Care	0
Personal Hygiene	2
Significant Self-Harm and Suicide Prevention and Intervention	0
Sub-Total	3
Total Deficiencies	15

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

⁷ During a special review, ODO will review a facility’s compliance with at least 10 individual standards.

⁸ 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.

DETAINEE RELATIONS

The facility's ICE detainee population count was zero during the entire special review; therefore, ODO did not conduct any detainee interviews. Despite the facility housing no detainees during the special review, the facility maintains an active contract to house ICE detainees and had an FY 2023 ADP of 1, meeting the ODO requirement for special reviews.

SPECIAL REVIEW FINDINGS

SAFETY

ENVIRONMENTAL HEALTH AND SAFETY (EHS)

ODO interviewed facility staff, reviewed the facility's EHS program and policies, inspected the chemical storage areas throughout the facility, and found:

- No perpetual inventory of the following hazardous (flammable, toxic, or caustic) substances used and stored in the food service (FS) department: Suma Dish Detergent, Suma Rinse Aid, Suma Grill Cleaner, J-512 Sanitizer, Alpha-HP, Suma Nova Detergent, Prominence Floor Cleaner, and Reliance HD Degreaser (**Deficiency EHS-3⁹**);
- No inventory records in the FS department for the hazardous substances as listed in Deficiency EHS-3 above (**Deficiency EHS-4¹⁰**);
- The master index of all hazardous substances in the facility did not include their locations (**Deficiency EHS-8¹¹**); and
- No current inventory records in the FS department for the hazardous substances listed in Deficiency EHS-3 above (**Deficiency EHS-16¹²**).

SECURITY

SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION (SAAPI)

ODO reviewed the facility's SAAPI policy and procedures and found the facility did not have written SAAPI procedures that:

- Include a uniform evidence protocol for accessing a forensic medical exam to maximize the potential for obtaining usable, physical evidence for administrative

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 "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).

¹² "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).

- proceedings and criminal prosecutions (**Deficiency SAAPI-10¹³**);
- Include procedures for coordination of internal administrative investigations with the assigned criminal investigative entity nor coordination with ICE OPR (**Deficiency SAAPI-11¹⁴**);
- Address collecting data, reporting, and cooperating with ERO San Antonio audits for monitoring compliance with the standard (**Deficiency SAAPI-13¹⁵**); and
- Provide detainees with the name of the program coordinator or staff members' contact information for reporting allegations (**Deficiency SAAPI-48¹⁶**).

ODO interviewed a facility lieutenant and found the facility did not develop written, administrative investigation procedures to include the:

- Preservation of physical, deoxyribonucleic acid (DNA), or electronic evidence; interviewing alleged victims, suspects, and witnesses; and reviewing prior complaints and sexual abuse and assault reports of the suspect (**Deficiency SAAPI-136¹⁷**);
- 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

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: ...

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).

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: ...

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).

¹⁶ “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).

¹⁷ “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).

(Deficiency SA-API-137¹⁸). This is a repeat deficiency;

- Documentation of each investigation by written report and retention of such reports **(Deficiency SA-API-138¹⁹);** and
- Preparation of a negative report for sexual assaults indicating the facility had no sexual assaults during the FY 2023 reporting period **(Deficiency SA-API-161²⁰).**

CARE

FOOD SERVICE (FS)

ODO reviewed the facility's FS policy and equipment temperature logs from May through July 2024, and found the facility completed 157 out of 276 required temperature checks for the mechanical dishwasher **(Deficiency FS-118²¹).**

PERSONAL HYGIENE (PH)

ODO interviewed a facility lieutenant, reviewed the facility's PH policy and procedures, and found the facility's standard issue of clothing to detainees did not include socks **(Deficiency PH-5²²).**

ODO interviewed a facility lieutenant, reviewed the facility's PH policy and procedures, and found detainees could only obtain shampoo and skin lotion through commissary purchase **(Deficiency PH-14²³).**

¹⁸ "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).

¹⁹ "The facility shall develop written procedures for administrative investigations, including: ...

- 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).

²⁰ "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).

²¹ "Daily checks of equipment temperatures shall follow this schedule:

- 1) Dishwashers: every meal;"

See ICE NDS 2019, Standard, Food Service, Section (II)(I)(11)(b)(1).

²² "The standard issue of clothing for detainees should be consistent with facility policy, but should include not less than one uniform shirt and one pair of uniform pants or one jumpsuit; one pair of socks; one pair of underwear; two brassieres, as appropriate; and one pair of footwear." *See* ICE NDS 2019, Standard, Personal Hygiene, Section (II)(B).

²³ "Each detainee shall receive, at a minimum, the following items: ...

- 5. One bottle of shampoo, or equivalent; and

- 6. One container of skin lotion."

See ICE NDS 2019, Standard, Personal Hygiene, Section (II)(F)(5-6).

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 15 deficiencies in the remaining 4 standards. Since BCJ’s last special review in May 2023, the facility’s compliance with NDS 2019 has remained consistent. BCJ went from 5 deficient standards and 14 deficiencies to 4 deficient standards and 15 deficiencies during this most recent special review. ODO did not review the PH standard during the May 2023 special review, which accounted for two deficiencies during this most recent special review. BCJ completed its UCAP for its last special review in May 2023, which likely resolved most of the deficiencies ODO previously cited; however, the corrective action for SA-API-137 did not prevent the reoccurrence of that deficiency. ODO recommends ERO San Antonio continue to work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations.

Compliance Inspection Results Compared	FY 2023 Special Review (NDS 2019)	FY 2024 Special Review (NDS 2019)
Standards Reviewed	10	10
Deficient Standards	5	4
Overall Number of Deficiencies	14	15
Priority Component Deficiencies	3	0
Repeat Deficiencies	0	1
Areas Of Concern	0	0
Corrective Actions	0	0
Facility Rating	Acceptable/Adequate	Acceptable/Adequate



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