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**Office of Detention Oversight
Special Review
2024-001-343**

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

**Clinton County Jail
Plattsburgh, New York**

June 4-6, 2024

**SPECIAL REVIEW
of the
CLINTON COUNTY JAIL
Plattsburgh, New York**

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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 Clinton County Jail (CCJ) in Plattsburgh, New York, from June 4 to 6, 2024.¹ The facility opened in 1987 and is owned and operated by Clinton County. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at CCJ in 2006 under the oversight of ERO’s Field Office Director (FOD) in Buffalo (ERO Buffalo). 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). ODO inspected to the NDS listed on the ERO Custody Management Division Authorized Facility List as of May 28, 2024. CCJ was inspected against the NDS 2019, and ODO’s assigned rating is for ERO’s informational purposes only.

[REDACTED] A CCJ captain handles daily facility operations and manages [REDACTED] support personnel. Clinton County provides food and medical care, and Trinity Services provides commissary services at the facility. The facility does not hold any accreditations from any outside entities.

Capacity and Population Statistics	Quantity
ICE Bed Capacity ²	[REDACTED]
Average ICE Population ³	[REDACTED]
Adult Male Population (as of June 4, 2024)	[REDACTED]
Adult Female Population (as of June 4, 2024)	[REDACTED]

During its last rated inspection, in Fiscal Year (FY) 2023, ODO found 35 deficiencies in the following standards: Admission and Release (2); Correspondence and Other Mail (2); Environmental Health and Safety (6); Hold Rooms in Detention Facilities (4); Use of Force (18); Medical Care (2); 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 May 28, 2024.

³ *Ibid.*

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.⁴

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.

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 ^{5,6,7}	Deficiencies
Part 1 - Safety	
Environmental Health and Safety	0
Sub-Total	0
Part 2 - Security	
Hold Rooms in Detention Facilities	0
Use of Force and Restraints	0
Sexual Abuse and Assault Prevention and Intervention	6
Sub-Total	6
Part 4 - Care	
Food Service	1
Hunger Strikes	1
Medical Care	0
Personal Hygiene	0
Significant Self-Harm and Suicide Prevention and Intervention	1
Sub-Total	3
Part 5 - Activities	
Recreation	0
Sub-Total	0
Total Deficiencies	9

⁵ For greater detail on ODO's findings, see the *Special Review Findings* section of this report.

⁶ 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.

⁷ 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 3 ICE detainees for FY 2023, meeting the ODO requirement for special reviews.

SPECIAL REVIEW FINDINGS

SECURITY

SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION (SAAPI)

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

- Policy on sexual misconduct to include procedures for directly notifying the ERO Buffalo FOD of sexual abuse and assault allegations (**Deficiency SAAPI-5⁸**);
- Procedures for investigation and discipline of assailants, including coordinating with ERO Buffalo and other appropriate investigative agencies to ensure that an administrative or criminal investigation was completed for all allegations of sexual abuse and assault (**Deficiency SAAPI-9⁹**);
- Policy and procedures for coordination to ensure non-interference of internal administrative investigations with the assigned criminal investigative entity nor with ICE OPR (**Deficiency SAAPI-11¹⁰**);

⁸ "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, also including 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;"

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

⁹ "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).

¹⁰ "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).

- Policy and procedures for data collection and reporting (**Deficiency SAAPI-13**¹¹);
- Review and approval from ERO Buffalo for the facility’s written policy and procedures (**Deficiency SAAPI-14**¹²); and
- Posted protocols on the facility’s website nor make the protocols available to the public (**Deficiency SAAPI-16**¹³).

CARE

FOOD SERVICE (FS)

ODO interviewed the FS administrator, reviewed the June 2023 inspection documentation on the fixed-fire suppression system in the FS department, and found a qualified contractor did not inspect the system every 6 months (**Deficiency FS-112**¹⁴).

HUNGER STRIKES (HS)

ODO interviewed the health services administrator (HSA), reviewed [REDACTED] correctional staff and [REDACTED] medical staff training records, and found in [REDACTED] out of [REDACTED] correctional training records, staff did not receive initial nor annual training to recognize the signs of a hunger strike, nor procedures to implement a referral for medical assessment and management of a detainee on a hunger strike (**Deficiency HS-1**¹⁵).

SIGNIFICANT SELF-HARM AND SUICIDE PREVENTION AND INTERVENTION (SSHSPI)

ODO interviewed the HSA and a registered nurse, reviewed training records of [REDACTED] correctional staff and [REDACTED] medical staff and found in [REDACTED] out of [REDACTED] medical staff records, no annual refresher training for comprehensive suicide prevention since orientation in October 2022 (**Deficiency SSHSPI-2**¹⁶). **This is a priority component.**

¹¹ “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”

See ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(A)(6-7).

¹² “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).

¹³ “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).

¹⁴ “A qualified contractor shall inspect the system every six months.” *See* ICE NDS 2019, Standard, Food Service, Section (II)(I)(10)(c).

¹⁵ “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).

¹⁶ “All facility staff members who interact with and/or are responsible for detainees shall receive comprehensive suicide prevention training during orientation and refresher training at least annually thereafter.” *See* ICE NDS 2019, Standard, Significant Self-harm and Suicide Prevention and Intervention, Section (II)(B).

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 9 deficiencies in the remaining 4 standards. Since CCJ’s last rated inspection in October 2022, the facility’s compliance with the ICE NDS has improved. CCJ went from 7 deficient standards and 35 deficiencies in October 2022 to 4 deficient standards and 9 deficiencies during this most recent inspection, which includes 1 priority component for initial and refresher comprehensive suicide and prevention training. During the last rated inspection, ODO identified 32 areas of concern with CCJ’s SAAPI compliance. Although there have been improvements, 4 of the 6 SAAPI deficiencies¹⁷ were identified as areas of concern in FY 2023. ODO received a completed UCAP for the facility’s last ODO inspection in October 2022, and ODO noted the facility had no repeat deficiencies. ODO recommends ERO Buffalo 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 2000/ NDS 2019	FY 2024 Special Review NDS 2019
Standards Reviewed	11	10
Deficient Standards	7	4
Overall Number of Deficiencies	35	9
Priority Component Deficiencies	0	1
Repeat Deficiencies	N/A	0
Areas Of Concern	32	0
Corrective Actions	0	0
Facility Rating	Acceptable	Good

¹⁷ SAAPI deficiencies 5, 13, 14, and 16.