

Office of Professional Responsibility

Fayette County Detention Center Inspection 2024-003-433

September 10–12, 2024



U.S. Immigration
and Customs
Enforcement



U.S. Department of Homeland Security
U.S. Immigration and Customs Enforcement
Office of Professional Responsibility
ICE Inspections
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**Office of Detention Oversight
Special Review
2024-003-433**

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

**Fayette County Detention Center
Lexington, Kentucky**

September 10-12, 2024

This report has been amended to clarify the facility changed from National Detention Standards (NDS) 2000 during the last inspection in July 2023 to NDS 2019 during this inspection. The original report indicated the facility had trended downward for deficiencies. The Office of Detention Oversight (ODO) amended the conclusion stating, “ODO did not assess the effect the previous inspections UCAP had on the facility’s compliance with NDS 2019 standards due to the change from NDS 2000 standards to NDS 2019 standards.”

**SPECIAL REVIEW
of the
FAYETTE COUNTY DETENTION CENTER
Lexington, Kentucky**

TABLE OF CONTENTS

FACILITY OVERVIEW	5
SPECIAL REVIEW PROCESS	6
FINDINGS BY NATIONAL DETENTION STANDARDS 2019 MAJOR CATEGORIES	7
DETAINEE RELATIONS	8
SPECIAL REVIEW FINDINGS	8
SAFETY	8
ENVIRONMENTAL HEALTH AND SAFETY	8
CARE	9
HUNGER STRIKES	9
CONCLUSION	9

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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 Fayette County Detention Center (FCDC) in Lexington, Kentucky, from September 10 to 12, 2024.¹ The facility opened in 1992 and is owned and operated by the Lexington-Fayette Urban County Government. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at FCDC in 1992 under the oversight of ERO’s Field Office Director in Chicago (ERO Chicago). 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 FCDC against the NDS 2019, which is the NDS listed on the ERO Custody Management Division Authorized Facility List as of September 9, 2024. ODO’s assigned rating is for ERO’s informational purposes only.²

[REDACTED] A facility chief handles daily operations and manages [REDACTED] support personnel. Aramark provides food services, YesCare provides 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. ³	[REDACTED]
Average ICE Population. ⁴	[REDACTED]
Adult Male Population (as of September 10, 2024)	[REDACTED]
Adult Female Population (as of September 10, 2024)	[REDACTED]

During its rated inspection in Fiscal Year (FY) 2023, ODO found 7 deficiencies in the following areas: Environmental Health and Safety (6) and Medical Care (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 For ODO inspections in FY 2024, ERO Custody Management Division requested ODO inspect all United States Marshals Service Intergovernmental Agreement facilities, not contractually obligated to an ICE NDS, to NDS 2019.

³ Data Source: ERO Custody Management Division Authorized Facility List as of September 9, 2024.

⁴ *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.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	8
Sub-Total	8
Part 2 - Security	
Use of Force and Restraints	0
Special Management Units	0
Sexual Abuse and Assault Prevention and Intervention	0
Sub-Total	0
Part 4 - Care	
Food Service	0
Hunger Strikes	1
Medical Care	0
Personal Hygiene	0
Significant Self-Harm and Suicide Prevention and Intervention	0
Sub-Total	1
Part 5 - Activities	
Recreation	0
Sub-Total	0
Total Deficiencies	9

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

⁷ 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.

⁸ 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 FY 2023 ADP of 1, meeting the ODO requirement for special reviews.

SPECIAL REVIEW FINDINGS

SAFETY

ENVIRONMENTAL HEALTH AND SAFETY (EHS)

ODO reviewed the facility's EHS policy and found the facility did not create a written hazardous communication program outlining proper chemical labeling and training for employees (**Deficiency EHS-1⁹**). **This is a priority component.**

ODO observed hazardous substances stored in the laundry department and found no perpetual inventory of its stock of 7 gallons of No Splash Bleach, 5 gallons of Liquid Laundry Chlorine Bleach, and 10 gallons of Liquid Laundry Built Detergent (**Deficiency EHS-3¹⁰**).

ODO observed hazardous substances stored in the laundry department and found no inventory records for 7 gallons of No Splash Bleach, 5 gallons of Liquid Laundry Chlorine Bleach, and 10 gallons of Liquid Laundry Built Detergent in the laundry department storage closet (**Deficiency EHS-4¹¹**).

ODO reviewed the master index of all hazardous substances in the facility and found the following deficiencies:

- No index, location, nor safety data sheets (SDS) for three hazardous substances located in the laundry department and five hazardous substances located in the food service department (**Deficiency EHS-8¹²**);
- No documentation of reviews in the SDS master file (**Deficiency EHS-9¹³**); and
- No comprehensive, up-to-date list of emergency phone numbers (fire department,

⁹ "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).

¹⁰ "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).

¹¹ "Inventory records will be maintained for each substance." See ICE NDS 2019, Standard, Environmental Health and Safety, Section (II)(A).

¹² "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).

¹³ "Documentation of reviews will be maintained in the SDS master file." See ICE NDS 2019, Standard, Environmental Health and Safety, Section (II)(A)(2).

poison control center, etc.) in the SDS master file (**Deficiency EHS-10**¹⁴).

ODO observed hazardous substances stored in the laundry department and found no inventory records for 7 gallons of No Splash Bleach, 5 gallons of Liquid Laundry Chlorine Bleach, and 10 gallons of Liquid Laundry Built Detergent in the laundry department storage closet (**Deficiency EHS-16**¹⁵).

ODO reviewed the facility's emergency plans and found the plans did not include procedures for ensuring the safety and security of detainees with disabilities during a facility emergency response (**Deficiency EHS-25**¹⁶).

CARE

HUNGER STRIKES (HS)

ODO reviewed training records of ■ medical and ■ non-medical staff, and found in all ■ training records, no documentation showing the facility conducted initial or annual training to recognize the signs of a hunger strike, to implement the procedures for referral for medical assessment, and to manage a detainee on a hunger strike (**Deficiency HS-1**¹⁷).

CONCLUSION

During this special review, ODO assessed the facility's compliance with 10 standards under NDS 2019 and found the facility in compliance with 8 of those standards. ODO found nine deficiencies in the remaining two standards. This was FCDC's first inspection under NDS 2019 and ODO did not conduct a trend analysis. LCDC went from 2 deficient standards and 7 deficiencies in July 2023 under the NDS 2000 to 2 deficient standards and 9 deficiencies during this most recent special review, which included 1 priority component deficiency in EHS. ODO did not assess the effect the previous inspections UCAP had on the facility's compliance with NDS 2019 standards due to the change from NDS 2000 standards to NDS 2019 standards. ODO recommends ERO Chicago work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations.

¹⁴ "The master index will also include a comprehensive, up-to-date list of emergency phone numbers (fire department, poison control center, etc.)." *See* ICE NDS 2019, Standard, Environmental Health and Safety, Section (II)(A)(2).

¹⁵ "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).

¹⁶ "Plans will include procedures for detainees with disabilities to ensure their safety and security during the facility response." *See* ICE NDS 2019, Standard, Environmental Health and Safety, Section (II)(B).

¹⁷ "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).

Compliance Inspection Results Compared	FY 2023 Special Review (NDS 2000)	FY 2024 Special Review (NDS 2019)
Standards Reviewed	11	10
Deficient Standards	2	2
Overall Number of Deficiencies	7	9
Priority Component Deficiencies	1	1
Repeat Deficiencies	0	0
Areas Of Concern	2	0
Corrective Actions	0	0
Facility Rating	Good	Good



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