

Office of Professional Responsibility

Lexington County Detention Center Inspection (2024-003-329)

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U.S. Immigration
and Customs
Enforcement



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**Office of Detention Oversight
Special Review
2024-003-329**

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

**Lexington County Detention Center
Lexington, South Carolina**

August 6-8, 2024

**SPECIAL REVIEW
of the
LEXINGTON COUNTY DETENTION CENTER**
Lexington, South Carolina

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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 Lexington County Detention Center (LCDC) in Lexington, South Carolina, from August 6 to 8, 2024.¹ The facility opened in 1975 and is owned and operated by the Lexington County Sheriff’s Office. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at LCDC in 2010 under the oversight of ERO’s Field Office Director in Atlanta (ERO Atlanta). 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. LCDC was inspected against the NDS 2019, and ODO’s assigned rating is for ERO’s informational purposes only.

[REDACTED] A warden handles daily facility operations and manages [REDACTED] support personnel. Trinity provides food services, WellPath provides medical care, and McDaniel Supply Company provides commissary services at the facility. The facility was accredited by the National Commission on Correctional Health Care in May 2021. In March 2020, LCDC 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 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 34 deficiencies in the following areas: Food Service (10); Detention Files (2); Environmental Health and Safety (21); and Medical Care (1).⁴

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 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.

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	5
Sub-Total	5
Part 2 - Security	
Use of Force and Restraints	0
Special Management Units	0
Sexual Abuse and Assault Prevention and Intervention	7
Sub-Total	7
Part 4 - Care	
Food Service	1
Hunger Strikes	0
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	13

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 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 2 ICE detainees, meeting the ODO requirement for special reviews.

SPECIAL REVIEW FINDINGS

SAFETY

ENVIRONMENTAL HEALTH AND SAFETY (EHS)

ODO reviewed the facility's EHS program and policies, and found no documentation of a written hazardous communications program, outlining proper chemical labeling and training for employees (**Deficiency EHS-1⁹**). **This is a priority component.**

ODO interviewed the interviewed a facility sergeant and found no master index to include a comprehensive, up-to-date list of emergency phone numbers (fire department, poison control center, etc.) (**Deficiency EHS-10¹⁰**).

ODO reviewed ■ staff training records and found in ■ out of ■ records, no documentation training for classification code and safe handling procedures of hazardous materials (**Deficiency EHS-23¹¹**).

ODO reviewed the facility's emergency plans (EP) and found the EP did not specifically address procedures for handling detainees with disabilities during an emergency response (**Deficiency EHS-25¹²**).

ODO interviewed a facility sergeant, reviewed the facility's EP policy, and found the facility staff did not review nor update the EP since ERO Atlanta began housing detainees in this facility in 2018 (**Deficiency EHS-27¹³**).

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 "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).

¹¹ "b. Staff and detainees who work with hazardous materials will have appropriate training, including the classification code and safe handling procedures for each material." See ICE NDS 2019, Standard, Environmental Health and Safety, Section (II)(A)(6)(b).

¹² "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).

¹³ "All staff will be trained in the emergency plans, which will be reviewed and updated as appropriate on an annual basis." See ICE NDS 2019, Standard, Environmental Health and Safety, Section (II)(B).

SECURITY

SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION (SAAPI)

ODO reviewed the facility's SAAPI program and found the following deficiencies:

- No procedures for housing detainees in accordance with their classification assessment (**Deficiency SAAPI-4**¹⁴);
- No procedures for coordinating the facility's internal administrative investigations with the assigned criminal investigative entity and ICE OPR (**Deficiency SAAPI-11**¹⁵);
- No procedures for the discipline of assailants nor disciplinary sanctions for staff (**Deficiency SAAPI-12**¹⁶);
- No stated requirement in the policy for the facility to cooperate with all ERO Atlanta audits and to monitor the facility's compliance with sexual abuse and assault policies and standards (**Deficiency SAAPI-13**¹⁷);
- No written SAAPI policy nor procedures reviewed and approved by ERO Atlanta (**Deficiency SAAPI-14**¹⁸); and
- No instructions to detainees to include prevention and intervention strategies nor definitions and examples of detainee-on-detainee sexual abuse and assault, staff-on-detainee sexual abuse and assault, and coercive sexual activity (**Deficiency SAAPI-42**¹⁹).

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:

1. Procedures on preventing sexual abuse and assault, including: ...

b. Procedures for housing detainees in accordance with their classification assessment;

See ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(A)(1)(b).

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: ...

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).

¹⁶ "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: ...

d. Disciplinary sanctions for staff, up to and including termination, when there is a substantiated allegation of sexual abuse and assault, or when staff has violated agency sexual abuse and assault policies."

See ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(A)(5)(d).

¹⁷ "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: ...

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)(7).

¹⁸ "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).

¹⁹ "Following the intake process, the facility shall provide instruction to detainees on the facility's Sexual Abuse and

CARE

FOOD SERVICE (FS)

ODO interviewed the food service director and found no documented preemployment medical examinations for FS personnel (**Deficiency FS-86**²⁰).

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 12 deficiencies in the remaining 3 standards. Since its last special review in February 2023, the facility has shown improvement; however, this was ODO's first special review of LCDC against NDS 2019. LCDC went from 4 deficient standards and 34 deficiencies in February 2023 under NDS 2000 to 3 deficient standards and 13 deficiencies during this most recent special review, which includes 1 priority component deficiency for EHS. LCDC completed its UCAP for its last inspection in February 2023; however, since there was a change to the NDS inspected, ODO did not assess the effect that UCAP had on this inspection. ODO recommends ERO Atlanta 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	9	10
Deficient Standards	4	3
Overall Number of Deficiencies	34	12
Priority Component Deficiencies	0	1
Repeat Deficiencies	7	0
Areas Of Concern	4	0
Corrective Actions	0	0
Facility Rating	Failure	Acceptable/Adequate

Assault Prevention and Intervention Program and ensure that such instruction includes (at a minimum):

1. The facility's zero-tolerance policy for all forms of sexual abuse and assault;
2. Prevention and intervention strategies;
3. Definitions and examples of detainee-on-detainee sexual abuse and assault, staff-on-detainee sexual abuse and assault and coercive sexual activity."

See ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(F)(1-3).

²⁰ "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).



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