



U.S. Department of Homeland Security
U.S. Immigration and Customs Enforcement
Office of Professional Responsibility
Inspections and Detention Oversight Division
Washington, DC 20536-5501

**Office of Detention Oversight
Follow-Up Compliance Inspection**

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

**Houston Contract Detention Facility
Houston, Texas**

July 26-29, 2021

FOLLOW-UP COMPLIANCE INSPECTION
of the
HOUSTON CONTRACT DETENTION FACILITY
Houston, Texas

TABLE OF CONTENTS

FACILITY OVERVIEW	4
FOLLOW-UP COMPLIANCE INSPECTION PROCESS.....	5
FINDINGS BY PERFORMANCE-BASED NATIONAL DETENTION STANDARDS 2011 (REVISED 2016) MAJOR CATEGORIES.....	6
DETAINEE RELATIONS	7
FOLLOW-UP COMPLIANCE INSPECTION FINDINGS.....	7
SECURITY	7
Admission and Release	7
Funds and Personal Property	7
CONCLUSION	8



FOLLOW-UP COMPLIANCE INSPECTION TEAM MEMBERS



Acting Team Lead
Contractor
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ODO
Creative Corrections
Creative Corrections
Creative Corrections
Creative Corrections

FACILITY OVERVIEW

The U.S. Immigration and Customs Enforcement (ICE) Office of Professional Responsibility (OPR) Office of Detention Oversight (ODO) conducted a follow-up compliance inspection of the Houston Contract Detention Facility (HCDF) in Houston, Texas, from July 26 to 29, 2021.¹ This inspection focused on the standards found deficient during ODO’s last inspection of HCDF from February 22 to 25, 2021. The facility opened in 1984 and is owned and operated by CoreCivic. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at HCDF in 1986 under the oversight of ERO’s Field Office Director in Houston (ERO Houston). The facility operates under the Performance-Based National Detention Standards (PBNDS) 2011 (Revised 2016).

ERO has assigned a detention services manager to the facility. An HCDF warden handles daily facility operations and manages [REDACTED] support personnel. Trinity Food Service provides food services, ICE Health Services Corps provides medical care, and CoreCivic provides commissary services at the facility. The facility was accredited by the American Correctional Association in August 2019 and the National Commission on Correctional Health Care in April 2018. In June 2021, HCDF was audited by the Department of Homeland Security (DHS) Prison Rape Elimination Act (PREA) and was DHS PREA certified.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity ²	[REDACTED]
Average ICE Detainee Population ³	[REDACTED]
Male Detainee Population (as of July 26, 2021)	[REDACTED]
Female Detainee Population (as of July 26, 2021)	[REDACTED]

During its last inspection, in Fiscal Year (FY) 2021, ODO found four deficiencies in the following areas: Admission and Release (2); Facility Security and Control (1); and Staff-Detainee Communication (1).

¹ This facility holds male and female detainees with low, medium-low, medium-high, and high security classification levels for periods longer than 72 hours.

² Data Source: ERO Facility List Report as of July 26, 2021.

³ *Ibid.*

FOLLOW-UP COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population of 10 or more detainees, 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. In FY 2021, to meet congressional requirements, ODO began conducting follow-up inspections at all ICE ERO detention facilities, which ODO inspected earlier in the FY.

While follow-up inspections are intended to focus on previously identified deficiencies, ODO will conduct a complete review of several core standards, which include but are not limited to Medical Care, Hunger Strikes, Suicide Prevention, Food Service, Environmental Health and Safety, Emergency Plans, Use of Force and Restraints/Use of Physical Control Measures and Restraints, Admission and Release, Classification, and Funds and Personal Property. ODO may decide to conduct a second full inspection of a facility in the same FY based on additional information obtained prior to ODO's arrival on-site. Factors ODO will consider when deciding to conduct a second full inspection will include the total number of deficiencies cited during the first inspection, the number of deficient standards found during the first inspection, the completion status of the first inspection's UCAP, and other information ODO obtains from internal and external sources ahead of the follow-up compliance inspection. Conditions found during the inspection may also lead ODO to assess new areas and identify new deficiencies or areas of concern should facility practices run contrary to ICE standards. Any areas found non-compliant during both inspections are annotated as "Repeat Deficiencies" in this report.

ODO was unable to conduct an on-site inspection of this facility, as a result of the COVID-19 pandemic, and instead, conducted a remote inspection of the facility. During this remote inspection, ODO interviewed facility staff, ERO field office staff, and detainees, reviewed files and detention records, and was able to assess compliance for at least 90 percent or more of the ICE national detention standards reviewed during the inspection.

**FINDINGS BY PERFORMANCE-BASED NATIONAL
DETENTION STANDARDS 2011 (REVISED 2016)
MAJOR CATEGORIES**

PBNDS 2011 (Revised 2016) Standards Inspected⁴	Deficiencies
Part 1 – Safety	
Emergency Plans	0
Environmental Health and Safety	0
Sub-Total	0
Part 2 – Security	
Admission and Release	1
Custody Classification System	0
Facility Security and Control	0
Funds and Personal Property	1
Special Management Units	0
Staff-Detainee Communication	0
Use of Force and Restraints	0
Sub-Total	2
Part 4 – Care	
Food Service	0
Hunger Strikes	0
Medical Care	0
Medical Care (Women)	0
Significant Self-harm and Suicide Prevention and Intervention	0
Sub-Total	0
Total Deficiencies	2

⁴ For greater detail on ODO’s findings, see the *Follow-Up Compliance Inspection Findings* section of this report.

DETAINEE RELATIONS

ODO interviewed 12 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. Most detainees reported satisfaction with facility services except for the concern listed below. ODO conducted the detainee interviews via video teleconference.

Medical Care: One detainee stated medical staff advised her to buy crackers from the commissary for her stomach issue but the crackers were expensive. Additionally, the detainee stated the food is too spicy for her.

- Action Taken: ODO reviewed the detainee’s medical record and interviewed the facility’s medical staff. A review of the detainee’s medical record revealed the detainee tested positive for a stomach bacterium on June 28, 2021, and the medical staff prescribed medication. On June 30, 2021, medical staff changed the detainee’s medication due to side effects such as vomiting, dizziness, and bloating. On July 1, 2021, the detainee complained of nausea and medical staff prescribed him anti-nausea medication. Medical staff also informed the detainee to try eating crackers from the commissary, drink more fluids, and to avoid foods that trigger nausea as preventative measures. During a follow-up examination on July 13, 2021, the detainee completed her medication treatment and medical staff educated her on how to care for her stomach issues. On July 27, 2021, ODO contacted ERO and the health services administrator (HSA), who stated medical staff would re-evaluate the detainee the next day. On July 28, 2021, an advanced practice provider re-evaluated the detainee, and placed the detainee on a special needs diet consisting of no tomatoes, onions, or spice. The HSA stated medical staff will re-evaluate and retest the detainee for stomach bacteria according to clinical guidelines in four weeks and medical staff will continue to evaluate the detainee every three months thereafter.

FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

SECURITY

ADMISSION AND RELEASE (AR)

ODO reviewed [REDACTED] detainee release files and found in all [REDACTED] files the facility did not check for wants and warrants before the detainees’ release (**Deficiency AR-78**⁵).

FUNDS AND PERSONAL PROPERTY (FPP)

ODO reviewed [REDACTED] detainee detention files and found in all [REDACTED] files the facility did not record the

⁵ “Facility staff assigned to processing must complete certain procedures before any detainee’s release, removal, or transfer from the facility. Necessary steps include but are not limited to: completing out-processing forms; closing files and fingerprinting; returning personal property; reclaiming facility-issued clothing, identification cards, handbooks, and bedding; and checking wants and warrants.” See ICE PBNDS 2011 (Revised 2016), Standard, Admission and Release, Section (V)(H).

time of admission on the personal property inventory form (**Deficiency FPP-85**⁶).

CONCLUSION

During this inspection, ODO assessed the facility’s compliance with 14 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 12 of those standards. ODO found two deficiencies in the remaining two standards. ODO commends facility staff members for their responsiveness during this inspection. ODO recommends ERO Houston work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations. ERO provided ODO with the uniform corrective action plan for ODO’s last inspection of HCDF on April 6, 2021.

Compliance Inspection Results Compared	First FY 2021 (PBNDS 2011) (Revised 2016)	Second FY 2021 (PBNDS 2011) (Revised 2016)
Standards Reviewed	21	14
Deficient Standards	3	2
Overall Number of Deficiencies	4	2
Repeat Deficiencies	0	0
Areas of Concern	0	0
Corrective Actions	0	0

⁶ “The personal property inventory form must contain the following information at a minimum:

1. date and time of admission.” See ICE PBNDS 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(I)(1).