

U.S. Department of Homeland Security

U.S. Immigration and Customs Enforcement Office of Professional Responsibility ICE Inspections Washington, DC 20536-5501

Office of Detention Oversight Compliance Inspection 2024-001-234

Enforcement and Removal Operations ERO Newark Field Office

Elizabeth Contract Detention Facility Elizabeth, New Jersey

November 28-30, 2023

COMPLIANCE INSPECTION of the ELIZABETH CONTRACT DETENTION FACILITY

Elizabeth, New Jersey

TABLE OF CONTENTS

FACILITY OVERVIEW	4
COMPLIANCE INSPECTION PROCESS	5
FINDINGS BY PERFORMANCE-BASED NATIONAL DETEN	
2011 (REVISED 2016) MAJOR CATEGORIES	6
DETAINEE RELATIONS	7
COMPLIANCE INSPECTION FINDINGS	7
SECURITY	7
CUSTODY CLASSIFICATION SYSTEM	7
FACILITY SECURITY AND CONTROL	7
FUNDS AND PERSONAL PROPERTY	8
POST ORDERS	8
CONCLUSION	8

COMPLIANCE INSPECTION TEAM MEMBERS

Team Lead	ODO
Assistant Team Lead	ODO
Senior Inspections and Compliance Specialist	ODO
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Senior Inspections and Compliance Specialist	ODO
Contractor	Creative Corrections

FACILITY OVERVIEW

The U.S. Immigration and Customs Enforcement (ICE) Office of Professional Responsibility (OPR) Office of Detention Oversight (ODO) conducted a compliance inspection of the Elizabeth Contract Detention Facility (ECDF) in Elizabeth, New Jersey, from November 28 to 30, 2023. The facility opened in 1997 and is owned by Port View Property and operated by CoreCivic. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at ECDF in 1997 under the oversight of ERO's Field Office Director in Newark (ERO Newark). The facility operates under the Performance-Based National Detention Standards (PBNDS) 2011 (Revised 2016).

A facility warden handles daily facility operations and manages support personnel. CoreCivic provides food services, ICE Health Service Corps provides medical care, and Keefe Commissary provides commissary services at the facility. The facility was accredited by the American Correctional Association in June 2019 and the National Commission on Correctional Health Care in February 2020. In September 2023, ECDF was audited for the Department of Homeland Security (DHS) Prison Rape Elimination Act (PREA) and was DHS PREA certified.

Capacity and Population Statistics	Quantity
ICE Bed Capacity ²	
Average ICE Population ³	
Adult Male Population (as of November 28, 2023)	
Adult Female Population (as of November 28, 2023)	

During its last full inspection, in Fiscal Year (FY) 2023, ODO found 2 deficiencies in the following areas: Environmental Health and Safety (1) and Food Service (1).

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

² Data Source: ERO Custody Management Division Authorized Facility List as of November 20, 2023.

³ Ibid

COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population 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.

Upon completion of each 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 corrective action plans; 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 PERFORMANCE-BASED NATIONAL DETENTION STANDARDS 2011 (REVISED 2016) MAJOR CATEGORIES

PBNDS 2011 (Revised 2016) Standards Inspected ^{5,6}	Deficiencies
Part 1 - Safety	
Emergency Plans	0
Environmental Health and Safety	0
Sub-Total	0
Part 2 - Security	
Admission and Release	0
Custody Classification System	2
Facility Security and Control	1
Funds and Personal Property	1
Population Counts	0
Post Orders	3
Searches of Detainees	0
Sexual Abuse and Assault Prevention and Intervention	0
Special Management Units	0
Staff-Detainee Communication	0
Use of Force and Restraints	0
Sub-Total	7
Part 4 - Care	
Food Service	0
Hunger Strikes	0
Medical Care	0
Medical Care (Women)	0
Personal Hygiene	0
Significant Self-harm and Suicide Prevention and Intervention	0
Sub-Total	0
Part 5 - Activities	
Correspondence and Other Mail	0
Trips for Non-Medical Emergencies	0
Marriage Requests	0
Religious Practices	0
Telephone Access	0
Voluntary Work Program	0

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⁵ For greater detail on ODO's findings, see the *Compliance Inspection 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.

Sub-Total	0	
Part 6 - Justice		
Grievance System	0	
Law Libraries and Legal Materials	0	
Sub-Total	0	
Part 7 - Administration and Management		
Detention Files	0	
Detainee Transfers	0	
Sub-Total	0	
Total Deficiencies	7	

DETAINEE RELATIONS

ODO interviewed 27 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. All detainees reported satisfaction with facility services.

COMPLIANCE INSPECTION FINDINGS

SECURITY

CUSTODY CLASSIFICATION SYSTEM (CCS)

ODO reviewed four detainee detention files and found in one out of four files, no first reclassification assessment in the detainee's file (Deficiency CCS-49⁷).

ODO reviewed 4 detainee files and found 1 out of 4 files did not include a reclassification assessment, completed between 60 and 90 days after the initial classification (**Deficiency CCS-51**8).

FACILITY SECURITY AND CONTROL (FSC)

ODO reviewed the facility's control center and shift supervisor office contact lists and found the facility last updated the lists in February 2022. Additionally, the shift supervisor office list did not include verbiage for safeguarding the information (**Deficiency FSC-14**⁹).

⁷ "All facility classification systems shall ensure that a detainee is reassessed and/or reclassified." *See* ICE PBNDS 2011 (Revised 2016), Standard, Custody Classification System, Section (V)(H).

⁸ "The first reclassification assessment shall be completed 60 to 90 days after the date of the initial classification." See ICE PBNDS 2011 (Revised 2016), Standard, Custody Classification System, Section (V)(H)(1).

^{9 &}quot;The facility administrator shall establish procedures to implement the following control center requirements: ...
5. maintenance of a list of the current home and cell phone numbers of every staff member assigned to the facility, including administrative/support services staff members, all situation response team members (SRTs), hostage negotiation team member (HNTs) and applicable law enforcement agencies. If any staff member is inaccessible by phone, other means of off-duty contact approved by the facility administrator,

FUNDS AND PERSONAL PROPERTY (FPP)

ODO reviewed detainee property receipts and found the facility's logbook did not contain a listing for security tie-strap numbers (**Deficiency FPP-98**¹⁰).

POST ORDERS (PO)

ODO reviewed 15 post orders and found the following deficiencies:

- In 3 out of 15 post orders, no signature of the warden or designee nor date on the last page of each section. Specifically, the medical, processing officer, and visitation officer post orders did not have signatures nor dates (**Deficiency PO-11**¹¹);
- In 3 out of 15 post orders, the facility administrator did not initial nor date all pages. Specifically, the medical, processing officer, and visitation officer post orders did not have initials nor dates on all other pages (**Deficiency PO-12**¹²).
- In 1 out of 15 post orders, no printed name, signature, and date of review. Specifically, the shift supervisors did not print, sign, nor date their post order between November 8 to 9, and November 12 to 23, 2023 (**Deficiency PO-19**¹³).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 29 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 25 of those standards. ODO found seven deficiencies in the remaining four standards. Since ECDF's last full inspection in November 2022, the facility's overall compliance with the ICE PBNDS 2011 (Revised 2016) has trended down. ECDF went from 2 deficient standards and 2 deficiencies in November 2022 to 4 deficient standards and 7 deficiencies during this most recent full inspection. ODO received a completed uniform corrective action plan for the full inspection in November 2022, with no repeat nor priority

such as a pager number or e-mail address, may be listed; the list shall: ...

d. be updated at least quarterly

e. prominently feature the following notice: "This information must be safeguarded. Use is restricted to those who need the information in the performance of their official duties. Misuse shall subject the user to criminal liability. This agency shall view any misuse of this information as a serious violation of the Employee Code of Conduct, which may result in disciplinary action, including removal."

See ICE PBNDS 2011 (Revised 2016), Standard, Facility Security and Control, Section (V)(B)(5)(a-e).

¹⁰ "A logbook shall be maintained listing the security tie-strap number." *See* ICE PBNDS 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(I).

¹¹ "In SPCs, CDFs and dedicated IGSAs, the facility administrator (or designee) shall: ...

^{1.} approve, sign and date each Post Order on the last page of each section." *See* ICE PBNDS 2011 (Revised 2016), Standard, Post Orders, Section (V)(C)(1).

¹² "In SPCs, CDFs and Dedicated IGSAs, the facility administrator (or designee) shall: ...

^{2.} initial and date all other pages."

See ICE PBNDS 2011 (Revised 2016), Standard, Post Orders, Section (V)(C)(2).

¹³ "The post orders for each post shall be issued in a six-part classification folder and shall be organized as follows:

Section 6: Review and signature form, dated and with the officer's name printed and signed." See ICE PBNDS 2011 (Revised 2016), Standard, Post Orders, Section (V)(D).

component deficiencies reflected during this inspection. ODO recommends ERO Newark continue to work with the facility to resolve the deficiencies that remain.

Compliance Inspection Results Compared	FY 2023 Full Inspection (PBNDS 2011) (Revised 2016)	FY 2024 Full Inspection (PBNDS 2011) (Revised 2016)
Standards Reviewed	25	29
Deficient Standards	2	4
Overall Number of Deficiencies	2	7
Priority Component Deficiencies	0	0
Repeat Deficiencies	0	0
Areas Of Concern	0	0
Corrective Actions	0	0
Facility Rating	Superior	Good ¹⁴

¹⁴ ODO revised their rating system at the end of FY 2023 and beginning in FY 2024, facilities rated as "Superior" will have no or very minimal deficiencies and will have no repeat or priority component deficiencies.