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Immigration and Customs Enforcement

Office of Professional Responsibility

Inspections and Detention Oversight

Division Washington, DC 20536-5501

Office of Detention Oversight
Compliance Inspection

Enforcement and Removal Operations
ERO San Antonio Field Office
Port Isabel Service Processing Center
Los Fresnos, Texas

February 27 – March 1, 2018

**COMPLIANCE INSPECTION
for the
PORT ISABEL SERVICE PROCESSING CENTER
LOS FRESNOS, TX**

TABLE OF CONTENTS

OVERVIEW

Facility Overview 1
Findings by Performance-Based National Detention Standards (PBNDS) 2011
Major Categories 2

DETAINEE RELATIONS 4

COMPLIANCE INSPECTION FINDINGS 5

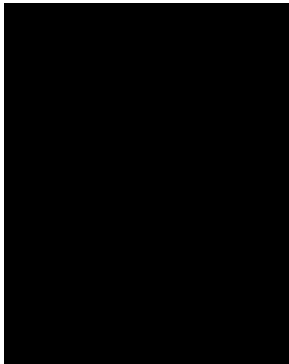
SAFETY..... 5
Environmental Health and Safety..... 5

SECURITY..... 5
Use of Force and Restraints 5

CARE 5
Food Service 5
Medical Care 6
Disability Identification, Assessment, and Accommodation 6

CONCLUSION..... 6

COMPLIANCE INSPECTION TEAM MEMBERS



Team Lead	ODO
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FACILITY OVERVIEW

The Office of Detention Oversight (ODO) conducted a compliance inspection of the Port Isabel Service Processing Center (PISPC) in Los Fresnos, Texas from February 27 to March 1, 2018¹. The PISPC opened in 1977 and is owned and operated by the U.S. Immigration and Customs Enforcement (ICE). The Office of Enforcement and Removal Operations (ERO) began housing detainees at PISPC in 2003, under oversight of the ERO Field Office Director (FOD) in San Antonio, Texas. The facility operates under the Performance-Based National Detention Standards (PBNDS) 2011.

ERO Deportation Officers (DO) and a Detention Services Manager (DSM) are assigned to the facility. An Officer in Charge (OIC) is responsible for oversight of daily facility operations and is supported by [REDACTED] personnel. Ahtna Support and Training Services provides food services, and medical care is provided by the ICE Health Service Corps. The facility is accredited by the American Correctional Association.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity ²	1175
Average ICE Detainee Population ³	[REDACTED]
Male Detainee Population (as of 2/27/2018)	[REDACTED]
Female Detainee Population (as of 2/27/2018)	[REDACTED]

In FY 2013, ODO conducted an inspection of PISPC and found eight (8) deficiencies in the following areas: Food Service had one (1) deficiency, Medical Care had three (3), Sexual Abuse and Assault Prevention and Intervention had one (1), Special Management Units had one (1), and Staff-Detainee Communication had two (2) deficiencies.

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

² Data Source: ERO Facility List Report as of March 5, 2018.

³ *Ibid.*

FINDINGS BY PBNDS 2011 REVISED DECEMBER 2016 MAJOR CATEGORIES

PBNDS 2011 STANDARDS INSPECTED⁴	DEFICIENCIES
Part 1 – Safety	
Environmental Health and Safety	1
Sub-Total	1
Part 2 – Security	
Admission and Release	0
Custody Classification System	0
Funds and Personal Property	0
Sexual Abuse and Assault Prevention and Intervention	0
Special Management Units	0
Staff-Detainee Communication	0
Use of Force and Restraints	1
Sub-Total	1
Part 4 – Care	
Disability, Identification, Assessment and Accommodation	1
Food Service	1
Medical Care	1
Medical Care (Women)	0
Significant Self-harm and Suicide Prevention and Intervention	0
Sub-Total	3
Part 5 - Activities	
Telephone Access	0
Sub-Total	0
Part 6 – Justice	
Detainee Handbook	0
Grievance System	0
Law Libraries and Legal Materials	0
Sub-Total	0
Total Deficiencies	5

⁴ For greater detail on ODO’s findings, see the *Inspection Findings* section of this report

COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population greater than 10, and where detainees are housed for over 72 hours, to assess compliance with ICE National Detention Standards (NDS) 2000, or the Performance-Based National Detention Standards (PBNDS) 2008, or 2011, as applicable. These inspections focus solely on facility compliance with detention standards that directly affect detainee life, health, safety, and/or well-being.⁵ ODO identifies violations linked to ICE detention standards, ICE policies, or operational procedures as *deficiencies*.

For facilities governed by either the PBNDS 2008 or 2011, ODO specifically notes deficiencies related to ICE-designated “priority components” which are considered *critical* to facility security and the legal and civil rights of detainees. ODO also highlights instances when the facility resolves deficiencies prior to completion of the ODO inspection--these corrective actions are annotated with “C” under the *Inspection Findings* section of this report.

At the conclusion of each inspection, ODO holds a closeout briefing with facility and local ERO officials to discuss preliminary findings. A summary of these findings is also 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. Additionally, ODO findings inform ICE executive management decision making in better allocating resources across the agency’s entire detention inventory.

⁵ ODO reviews the facility’s compliance with selected standards in their entirety.

DETAINEE RELATIONS

ODO interviewed forty (40) detainees, each of whom volunteered to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. All detainees reported satisfaction with facility services, with the exception of the concern listed below.

Medical (Women's Care): One detainee with limited Spanish comprehension and lack of writing skills pointed to her stomach and tried to communicate her concerns of stomach pain and need of medication.

- **Action Taken:** Records indicate the detainee arrived at PISPC on February 14, 2018, was medically screened at intake, and her initial physical was completed by a nurse practitioner on February 15, 2018. ODO spoke with the Medical Care SME who stated the detainee communicated medical concerns to Spanish-speaking medical staff and is currently receiving medication for stomach pain and gastro-esophageal reflux disease. The detainee was also recently seen at sick call on February 24, 2018 and is being treated for constipation.
- ODO spoke with the facility OIC and DSM, who confirmed the detainee speaks the Mum dialect; however, they claimed she is proficient in Spanish and communicates with staff. The OIC stated the detainee regularly communicates with the consulate without issues. While intake screening forms show the detainee indicated she is proficient in Spanish, because ODO observed that at times as her comprehension of Spanish appears to be quite limited, ODO recommended staff use a Mum interpreter when communicating with her.

COMPLIANCE INSPECTION FINDINGS

SAFETY

ENVIRONMENTAL HEALTH AND SAFETY (EH&S)

ODO's review of documentation found fire drills are completed [REDACTED] in all areas of the facility; however, [REDACTED] (Deficiency EH&S-1⁶).

SECURITY

USE OF FORCE AND RESTRAINTS (UOF&R)

Based on staff interviews and documentation, ODO determined there were nine immediate and one calculated use of force incidents involving detainees during the year preceding the inspection. ODO's review of documentation confirmed the detainees were medically-examined after the incidents, and all reviews were completed and submitted to ERO within the timeframes outlined in the standard. The review of the audio-visual recording of the calculated use of force incident found staff did not remove their [REDACTED] during the introduction or debriefing of the incident (Deficiency UOF-1⁷). The removal of [REDACTED] in the video is important to clearly identify all staff involved in the use of force.

CARE

FOOD SERVICE (FS)

ODO's inspection found the fire suppression system for the kitchen is not connected to the fire annunciation panel in the PISPC Control Center (Deficiency FS-1⁸). The kitchen is in a stand-alone building which was built prior to the construction of the facility control center. ODO confirmed that PISPC security staff conduct and record visual fire checks of the kitchen every 30 minutes. It is critical that the fire-suppression system annunciate in the facility's central control center to expedite response in the event of a fire in the kitchen.

ODO considers the food service training program for detainees as a **Best Practice**. ODO observed the training and materials to certify detainees to work in food service are provided in both English and Spanish. The training includes a written test, and detainees receive a certificate of completion for proper food handling. The certificate assists detainees in obtaining future employment in the food industry upon release from the facility.

⁶ [REDACTED]

However, when conducting fire drills, emphasis shall be placed on safe and orderly evacuation rather than speed." See ICE PBNDS 2011, Standard, Environmental Health and Safety, Section (V)(C)(4)(c).

⁷ "Faces of all team members shall briefly appear (with helmets removed and heads uncovered), one at a time, identified by name and title." See ICE PBNDS 2011, Standard, Use of Force and Restraints, Section (V)(I)(2)(b).

⁸ "An approved, fixed fire-suppression system shall be installed in ventilation hoods over all grills, deep fryers and open flame devices. A qualified contractor shall inspect the system every six months. The fire-suppression system shall be equipped with a locally audible alarm and connected to the control room's annunciator panel." See ICE PBNDS 2011, Standard, Food Service, Section (V)(J)(12)(f).

MEDICAL CARE (MC)

ODO's review of seven medical files of detainees receiving psychotropic medication found detainees sign a separate informed consent to receive psychotropic medication; however, while the current form indicates medication side effects are discussed with detainees, those side effects are not listed on the form as required by the standard (**Deficiency MC-1**⁹). PISPC staff corrected the deficiency during the inspection by revising the current IHSC form to include the documented side effects specific to the psychotropic medication being prescribed.

DISABILITY IDENTIFICATION, ASSESSMENT, AND ACCOMMODATION (DIA&A)

ODO's review of the facility's orientation program revealed it does not inform detainees about the disability accommodations policy, including their right to request reasonable accommodations and how to make such a request (**Deficiency DIA&A-1**¹⁰).

CONCLUSION

During this inspection, ODO reviewed the facility's compliance with 17 standards under the under PBNDS 2011, finding the facility compliant with twelve (12) standards. ODO found five (5) deficiencies in the remaining five (5) standards. ODO commends facility staff for adhering to ICE standards and having an overall low number of deficiencies given the size of the population housed. ODO also notes the improvement in total deficiencies found since the last inspection in FY 2015 as well as the best practice found in the food service training program. ODO recommends ERO work with the facility to remedy any deficiencies which remain outstanding, as applicable and in accordance with contractual obligations.

Compliance Inspection Results Compared	FY 2015 (PNDS 2011)	FY 2018 (PNDS 2011)
Standards Reviewed	16	17
Deficient Standards	6	5
Overall Number of Deficiencies	8	5
Deficient Priority Components	0	0
Corrective Action	0	1

⁹ "Prior to the administration of psychotropic medications, a separate documented informed consent, that includes a description of the medication's side effects, shall be obtained." See ICE PBNDS 2011 Revised, Standard, Medical Care, Section (AA)(4).

¹⁰ "The facility orientation program required by standard 2.1, 'Admission and Release,' and the detainee handbook required by standard 6.1, 'Detainee Handbook,' shall notify and inform detainees about the facility's disability accommodations policy, including their right to request reasonable accommodations and how to make such a request. The facility will post other documents for detainee awareness in detainee living areas and in the medical unit, as requested by the local ICE/ERO Field Office." See ICE PBNDS 2011 Revised, Standard, Disability Identification, Assessment, and Accommodation, Section (V)(J).