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Office of Professional Responsibility
Inspections and Detention Oversight Division
Washington, DC 20536-5501

Office of Detention Oversight Compliance Inspection

Enforcement and Removal Operations
ERO Dallas Field Office
Prairieland Detention Facility
Alvarado, Texas

June 26-28, 2018

COMPLIANCE INSPECTION
for the
PRAIRIELAND DETENTION FACILITY
Alvarado, Texas

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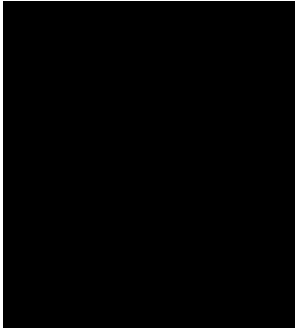
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COMPLIANCE INSPECTION TEAM MEMBERS



Lead Inspections and Compliance Specialist	ODO
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FACILITY OVERVIEW

The Office of Detention Oversight (ODO) conducted a compliance inspection of the Prairieland Detention Facility (PDF) in Alvarado, Texas, from June 26-28, 2018¹. PDF opened in 2016 and is owned by the city of Alvarado and operated by LaSalle Corrections. The Office of Enforcement and Removal Operations (ERO) began housing detainees at PDF in 2016 under the oversight of ERO's Field Office Director (FOD) in Dallas. The facility operates under the Performance-Based National Detention Standards (PBNDS) 2011.

ERO officers are assigned to the facility, but there is no assigned Detention Services Manager. The warden is responsible for daily facility operations and is supported by █████ personnel. Aramark provides food services and LaSalle provides all other services. The PDF Registered Nurse is the designated Health Services Administrator. The facility has not obtained any accreditations.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity ²	709
Average ICE Detainee Population ³	████
Male Detainee Population (as of 6/26/2018)	████
Female Detainee Population (as of 6/26/2018)	████

This was ODO's first inspection of PDF.

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

² Data Source: per PDF as of June 26, 2018.

³ *Ibid.*

FINDINGS BY PBNDS 2011 MAJOR CATEGORIES

PBNDS 2011 STANDARDS INSPECTED ⁴	DEFICIENCIES
Part 1 - Safety	
Environmental Health and Safety	1
Sub-Total	1
Part 2 - Security	
Admission and Release	1
Custody Classification System	2
Funds and Personal Property	0
Sexual Abuse and Assault Prevention and Intervention	0
Special Management Units	3
Staff-Detainee Communication	2
Use of Force and Restraints	5
Sub-Total	13
Part 4 - Care	
Food Service	2
Medical Care	0
Disability, Identification, Assessment, and Accommodation	2
Medical Care (Women)	0
Significant Self-harm and Suicide Prevention and Intervention	0
Sub-Total	4
Part 5 - Activities	
Telephone Access	3
Sub-Total	3
Part 6 - Justice	
Detainee Handbook	0
Grievance System	1
Law Libraries and Legal Materials	0
Sub-Total	1
Total Deficiencies	22

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 30 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 concerns listed below.

Environmental Health and Safety (EH&S): Three detainees complained the facility temperature is too cold and only one blanket is issued during intake. The detainees further explained additional blankets are issued only for medical reasons and the commissary does not have thermal clothing in stock.

- Action Taken: ODO confirmed PBNDS 2011 does not require specific ambient temperatures within facilities. ODO interviewed the PDF Warden and LaSalle Regional Manager who indicated they are in the process of bringing on a new commissary vendor with more offerings. They also indicated in the meantime, they will increase the facility temperature a few degrees to accommodate detainees.

Food Service (FS): Several detainees expressed concern regarding food service.

One detainee stated that although she has not submitted a complaint the brown food trays are unsanitary, and she found hair in food on two separate meal trays.

- Action Taken: ODO interviewed Aramark Food Services staff who did not recall receiving any complaints about hair found in the food. ODO observed meal preparation and plating and noted the kitchen was clean and areas including the trays appeared sanitary. All workers were appropriately dressed in clean white uniforms, with gloves, hairnets and beard guards when applicable.

Four female detainees stated their food is served cold, and they are fed rice and beans every day. Several female detainees explained they are no longer served meals in the main dining hall and are now served in a satellite area.

- Action Taken: Facility staff confirmed female detainees are now fed in a satellite dining area which allows for greater separation from male detainees whose housing units are on the path to the main dining area. Due to the limited size of the satellite area, only 15-20 females are fed at a time. Before ODO could verify the allegation of food being served cold, the facility implemented a change and began *only* bringing enough trays to match the number of detainees present in the satellite area at any one time (detainees are allotted 20 minutes to eat) allowing food items to stay at proper temperatures. ODO observed staff taking and recording food temperatures throughout meal service. ODO also reviewed the dietician-approved 35-day cycle menu and found it is varied, nutritiously balanced, and meets or exceeds 2,800 calories per day. ODO confirmed rice and beans are served daily; however, these items supplement main entrée and side items.

Funds and Personal Property (FPP): One detainee alleged he had been at the facility for three weeks and had not been able to communicate with his family because he was not allowed access to his property bag that contained a list of his relatives' telephone numbers.

- Action Taken: ODO informed facility staff of the situation and the detainee was allowed access to his property bag. The detainee extracted a folded sheet of paper from his wallet that contained telephone numbers of family and friends. The detainee was subsequently given a free five-minute telephone call in the intake area. Facility staff spoke to the detainee and explained to him the process for submitting written and/or verbal requests to facility staff.

Grievance System (GS): One detainee claimed he felt threatened by another detainee who yelled at him because the detainee asked if he wanted to go to lunch not remembering the detainee was fasting. The detainee claimed he submitted a grievance about feeling threatened.

- Action Taken: ODO reviewed the grievance log and confirmed the detainee submitted a grievance. Per the log, the Warden's response informed the detainee he could not write a grievance against another detainee. However, ODO also confirmed the housing lieutenant engaged with the detainee and approved a move to a new housing unit (C2 dorm) given his concerns.

Medical Care (MC): Several detainees expressed concern regarding medical care.

One detainee stated she requested a bland diet because of tooth extractions.

- Action Taken: ODO reviewed the detainee's medical file and discussed the issue with medical and food staff. ODO found that on June 22, 2018, medical staff prescribed a bland diet to the detainee for three days, but the detainee refused the meals. At ODO's request, facility staff spoke to the detainee and confirmed she still wanted the bland diet as she was having a hard time chewing solid food. Medical staff again prescribed the bland diet on a three-day extension. ODO confirmed the detainee began accepting the meals.

One detainee stated she submitted a medical request for ibuprofen for a headache and intrauterine device (IUD) pain. She claimed the IUD was out of place, and medical staff have not scheduled an X-ray.

- Action Taken: ODO reviewed the detainee file and noted the detainee was seen for a urinary tract infection (UTI) on June 12, 2018. Medical staff treated the UTI and scheduled a pelvic ultrasound test for July 13, 2018. ODO confirmed an outside medical appointment has been made but the specific date of the appointment has not been shared with the detainee due to security concerns. ODO requested medical personnel follow up with the detainee accordingly.

A female detainee stated her left wrist was bruised and was swollen because ERO cut handcuffs off her wrist.

- Action Taken: ODO's review of the detainee medical records shows the detainee received medication and an X-ray of the left wrist following complaints of pain. The X-ray results did not show any bone breaks or sprain(s). A physical exam showed good range of motion and wrist strength. The detainee did not indicate she wanted to file a formal complaint.

A male detainee stated he was given a Tuberculosis (TB) test at another facility prior to his admission to PDF, even though he received a vaccine for TB in his native country. He claimed medical staff have not informed him of the test results.

- Action Taken: Medical staff was aware of the detainee's concerns and indicated his first test showed a false positive due to receiving a vaccination. A chest X-ray was performed which was negative for TB. ODO requested medical staff communicate the results to the detainee.

Telephone Access (TA): One detainee stated she was unable to use the telephone to make collect and pro-bono calls as she is indigent. The detainee confirmed she was issued a telephone pin number during admission.

- Action Taken: ODO interviewed facility staff and obtained a copy of the detainee's call history. ODO confirmed the detainee qualifies as indigent as she had a \$0.00 account balance for more than 10 days. Records show staff issued the detainee a pin number upon admission and authorized a five-minute free phone call on May 19, 2018. ODO followed-up with facility staff to arrange for the detainee to receive free phone calls to family or other persons assisting with her immigration proceedings. Facility staff also contacted the telephone service provider for an update to the pro-bono platform call listing.

Religious Services (RS): One detainee wanted to request a bible but was not familiar with the process and did not know how to operate the tablets in the housing unit.

- Action Taken: ODO spoke with facility staff and requested they explain the process for submitting a written request to the Chaplain using the paper request form.

COMPLIANCE INSPECTION FINDINGS

SAFETY

ENVIRONMENTAL HEALTH AND SAFETY (EH&S)

ODO verified PDF's [REDACTED] of hazardous materials meets the requirements of the standard. Safety Data Sheets (SDS) are current and present in all locations where hazardous substances are maintained and used. Cleaning chemicals are diluted prior to issuance for use by detainees. There were no flammable chemicals stored inside the facility and the toxic and caustic substances are secured. However, ODO found two 15-gallon containers of chlorine bleach in the laundry areas had not been inventoried (**Deficiency-EH&S-1⁶**).

Corrective Action: Prior to the completion of the inspection, facility staff removed both containers (C-1).

SECURITY

ADMISSION AND RELEASE (A&R)

ODO's review of 33 detention files confirmed detainees signed and acknowledged the receipt of the national and local detainee handbooks upon arrival at the facility. ODO's review of intake files found eight files were missing Form I-203, Order to Detain or Release Alien Form (**Deficiency-A&R-1⁷**).

ODO notes as an **Area of Concern** the lack of specificity in the facility admission and release policy regarding strip searches. Although ODO's observations, review of the grievance logs, and interviews with detainees found no evidence of strip searches of detainees, ODO recommends the facility address the prohibition of strip searches in their policy to ensure staff are provided specific guidance regarding searches of detainees.

CUSTODY CLASSIFICATION SYSTEM (CCS)

ODO's review of PDF housing unit rosters found no evidence of prohibited comingling nor was comingling observed in the dining room, medical holding rooms, hallways or recreation areas. However, ODO observed comingling of high- and low-level detainees in the intake area. Specifically, a group of five high-level detainees were escorted to the intake area where routine telephonic consular interviews take place and were seated on a bench. Within approximately ten minutes a group of 15 low-level detainees were escorted into the same area. While staff were present in the area, they did not maintain adequate supervision of detainees and did not ensure adequate space was maintained between the differently classified detainees, as ODO observed several high and low detainees seated next to each other on benches (**Deficiency FSC-1⁸**).

⁶ "Every area shall maintain a current inventory of the hazardous substances (e.g., flammable, toxic or caustic) used and stored there. Inventory records shall be [REDACTED] for each substance. Entries for each shall be [REDACTED]. The entries shall contain relevant data, including purchase dates and quantities, use dates and quantities on hand." See ICE PBNDS 2011, Standard, Environmental Health and Safety, Section, (V)(B)(3).

⁷ "An Order to Detain or an Order to Release the detainee (Form I-203 or I-203a), bearing the appropriate ICE ERO Authorizing Official signature, must accompany each newly arriving detainee." See ICE PBNDS 2011, Standard, Admission and Release, Section, (V)(E).

⁸ "Security staffing shall be sufficient to maintain facility security and prevent or minimize events that pose a risk of harm to persons and property. The facility administrator shall determine security needs based on a comprehensive

ODO reviewed six detention files of detainees who served disciplinary segregation for incidents involving threats, assault, fighting, or validated gang affiliation. There were two detainees released from the Special Management Unit (SMU) back to the general population housing unit. ODO's review of the files found documented detainee behavior such as threats or fighting with other detainees. However, the two detainees were not reclassified to high prior to release from the SMU (**Deficiency-CCS-2⁹**).

SPECIAL MANAGEMENT UNIT (SMU)

ODO verified detainees are offered two hours of recreation per day. Detainees in SMU also have access to legal material, telephone, visitation, and daily visits by medical staff. However, detainees assigned to administrative segregation (AS) are not provided opportunities for out of cell time for such activities as socializing, watching TV, playing board games and work details (**Deficiency-SMU-1¹⁰**).

Through review of policy, observation, and interviews with staff, ODO found there are no written guidelines regarding property a detainee can retain in their cells while in SMU. Additionally, detainees assigned to disciplinary segregation (DS) have no restriction and can retain all property (**Deficiency-SMU-2¹¹**).

ODO notes as an **Area of Concern** that detainees housed in SMU on both AS and DS are authorized to purchase and retain items that can present security concerns for staff and other detainees. ODO observed commissary items such as spices, mayonnaise, and hot-sauce are provided in hard-plastic containers that could be modified and fashioned into a weapon. Additionally, chili powder authorized for retention in cells can be used as an irritant and can cause eye injury to staff or detainees like the effects of oleoresin capsicum.

ODO observed nine male detainees housed in SMU: six on AS and three on DS. Welfare checks are conducted routinely at the top and bottom of each hour. ODO's review of documentation found welfare checks are consistently completed on the hour and the half hour within a few minutes. ODO did not observe any documentation reflecting an irregular schedule of welfare checks (**Deficiency-SMU-3¹²**).

staffing analysis and a staffing plan that is reviewed and updated at least annually. Essential posts and positions shall be filled with qualified personnel." See ICE PBNDS 2011, Standard, Facility Security and Control, Section, (V)(A).

⁹ "Special Reclassification Assessments: Staff shall complete a special reclassification within 24 hours before a detainee leaves the Special Management Unit (SMU), following an incident of abuse or victimization, and at any other time when warranted based upon the receipt of additional, relevant information, such as after a criminal act, or if a detainee wins a criminal appeal, is pardoned or new criminal information comes to light." See ICE PBNDS 2011, Standard, Custody Classification System, Section, (V)(H)(3).

¹⁰ "When space and resources are available, detainees in administrative segregation may be provided opportunities to spend time outside their cells (in addition to the required recreation periods), for such activities as socializing, watching TV and playing board games, and may be assigned to work details (e.g. as orderlies in the SMU)." See ICE PBNDS 2011, Standard, Special Management Units, Section, (V)(L)(1).

¹¹ "Each facility shall issue guidelines in accordance with this standard concerning the property detainees may retain in each type of segregation. Generally, detainees in disciplinary segregation shall be subject to more stringent personal property restrictions and control than those in administrative segregation, given the non-punitive nature of administrative segregation." See ICE PBNDS 2011, Standard, Special Management Units, Section, (V)(K).

¹² "Detainees in SMU shall be personally observed and logged at least every 30 minutes on an irregular schedule." See ICE PBNDS 2011, Standard, Special Management Units, Section, (V)(M). **This is a priority component.**

STAFF DETAINEE COMMUNICATION (SDC)

PDF detainees have frequent, informal access and interaction with facility staff members and ICE ERO staff. ODO observed professional, respectful, and cordial communication between staff and detainees. Detainee written requests are collected daily by on-site ERO Deportation Officers from a secure box located in each dorm or via an electronic tablet. In addition to the ICE ERO scheduled visits, weekly unannounced visits are done by an ICE Supervisory Detention and Deportation Officer who is on-site at the facility.

ODO verified ICE ERO officers have access to an electronic database to keep track of detainee requests. ODO reviewed the request logs and determined not all required elements were in the logs (**Deficiency-SDC-1**¹³).

ODO reviewed six months of facility staff members' weekly inspection sheets to verify weekly telephone checks are completed and that records are maintained. ODO found that telephone serviceability worksheets were consistently completed for the entire timeframe. However, ICE did not provide the serviceability forms to the facility staff and the Field Office is not maintaining the forms, organized by month, for three years (**Deficiency-SDC-2**¹⁴).

USE OF FORCE AND RESTRAINTS (UOF&R)

ODO's interview of the compliance manager and review of documentation determined there were two calculated and six immediate use of force incidents involving detainees during the year preceding the inspection. ODO viewed the PDF audio video recordings of two calculated use of force incidents and found neither included an introduction of the team with all the faces of each team member, one at a time, identifying themselves by name and title (**Deficiency-UOF&R-1**¹⁵). In one calculated use of force incident, the video contained breaks in the recording and was captured on three different videos instead of one DVD recording (**Deficiency-UOF&R-2**¹⁶). From the DVD recordings, ODO also noticed both calculated use of force incident recordings did not film a close-up of the detainee's body, focusing on the presence or absence of injuries was not recorded (**Deficiency-UOF&R-3**¹⁷), debriefing of the incident by the team with a discussion, analysis, and assessment was also not recorded (**Deficiency-UOF&R-4**¹⁸).

ODO reviewed the use of team techniques and observed that although available, staff did not wear protective clothing and equipment during the calculated use of force incidents (**Deficiency-**

¹³ "All requests shall be recorded in a logbook (or electronic logbook) that is specifically designated for that purpose. At a minimum, the log shall record: ...d. detainee's nationality; ...g. any other pertinent site-specific information, including detention condition complaints; h. specific reasons why the detainee's request is urgent and requires a faster response." See ICE PBNDS 2011, Standard, Staff-Detainee Communication, Section, (V)(B)(2)(d)(g)(h).

¹⁴ "Staff shall document each serviceability test on a form that has been provided by ERO, and each Field Office shall maintain those forms, organized by month, for three years." See ICE PBNDS 2011, Standard, Staff Detainee Communication, Section, (V)(C).

¹⁵ "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).

¹⁶ "Record entire use-of-force team operation, unedited, until the detainee is in restraints." See ICE PBNDS 2011, Standard, Use of Force and Restraints, Section (V)(I)(2)(d). **This is a priority component.**

¹⁷ Take close-ups of the detainee's body during a medical exam, focusing on the presence/absence of injuries. Staff injuries, if any are to be described but not shown." See ICE PBNDS 2011, Standard, Use of Force and Restraints, Section (V)(I)(2)(e).

¹⁸ "Debrief the incidents with a full discussion/analysis/assessment of the incident." See ICE PBNDS 2011, Standard, Use of Force and Restraints, Section (V)(I)(2)(f).

UOF&R-5¹⁹).

CARE

FOOD SERVICE (FS)

The PDF food service operation is contracted with Aramark Corporation. Staff consists of a food service manager and four cook supervisors. Food service staff is supported by 10-15 detainees on each shift. ODO confirmed the detainee workers received pre-employment medical clearance to work in food service. ODO's review of food service staff employment records showed two staff members have not received pre-employment medical examinations (**Deficiency-FS-1**²⁰).

Corrective Action: Prior to completion of the inspection, the two food service staff received the required medical examinations (**C-2**).

ODO inspected two walk-in refrigerators, one freezer, and two dry storage rooms. ODO observed food items in the inspected areas were stacked against the walls preventing pest control measures (**Deficiency-FS-2**²¹).

Corrective Action: Prior to the completion of the inspection, the food services staff moved the stored food items two inches from the walls (**C-3**).

DISABILITY IDENTIFICATION ASSESSMENT AND ACCOMMODATION (DIA&A)

ODO reviewed both the ICE National Detainee Handbook, dated April 2016, and the facility Detainee Handbook (Local Supplement), dated June 2018. Both handbooks inform detainees they have a right to disability accommodations. Neither handbook informs detainees of the process to request reasonable accommodations for a disability (**Deficiency-DIA&A-1**²²).

ODO observed the facility does not post documents for detainee awareness about disability accommodations in the living areas, as required by the standard (**Deficiency-DIA&A-2**²³).

¹⁹ "The [REDACTED]

[REDACTED] See ICE PBNDS 2011 (Revised December 2016), Standard, Use of Force and Restraints, Section (V)(I)(2)(f).

²⁰ "The facility administrator shall document that food service personnel have received a pre-employment medical examination to identify communicable diseases that may contraindicate food service work." See ICE PBNDS 2011, Standard, Food Services, Section, (V)(B)(3).

²¹ "Store all food item products at least six inches from the floor and sufficiently far from walls to facilitate pest-control measures." See ICE PBNDS 2011, Standard, Food Services, Section, (V)(K)(3)(d).

²² "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." See ICE PBNDS 2011, Standard, Disability Identification Assessment and Accommodations, Section, (V)(J).

²³ "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, Standard, Disability Identification Assessment and Accommodations, Section, (V)(J).

ACTIVITIES

TELEPHONE ACCESS (TA)

ODO conducted operational checks of telephones in all housing units and called randomly selected pre-programmed numbers and found them in good working order. ODO also observed posted information related to free legal services, pro bono lists, consulates lists, and OIG posters in every pod. However, the facility's free call platform was last updated on October 30, 2017 and was not current and up-to-date (**Deficiency-TA-1**²⁴).

Corrective Action: Prior to completion of the inspection, the facility contacted the telephone service provider to obtain an updated pro-bono platform call listing for posting in each housing unit (**C-4**).

ODO observed telephone checks and reviewed dormitory daily inspection forms and found that although officers check telephones for a dial tone they do not test equipment to ensure detainees can make calls on the free call platform (**Deficiency-TA-2**²⁵).

ODO's review of PDF policy showed the facility considers detainees in indigent status if their accounts have less than \$15.00 for thirty (30) days and not ten (10) days (**Deficiency-TA-3**²⁶).

Corrective Action: Prior to completion of the inspection, the facility updated the policy, handbook, and postings in the housing units (**C-5**).

JUSTICE

GRIEVANCE SYSTEM (GS)

ODO found the facility has an informal and formal grievance system in place allowing detainees to have grievances addressed at the lowest level possible and in the most efficient and timely manner. The facility also maintains an appeal process whereby the detainee may appeal the Grievance Officer's decision by filing a written appeal with the Grievance Appeals Board (GAB). However, in interviewing ICE ERO, ODO determined ICE has not issued guidance as to the make-up of the GAB or provided direction regarding conducting of grievance hearings (**Deficiency-GS-1**²⁷).

CONCLUSION

During this inspection, ODO reviewed the facility's compliance with 17 standards under the PBNDS 2011, finding the facility compliant with 7 standards. ODO identified 22 deficiencies in the remaining 10 standards. ODO notes one final **Area of Concern**, during our contract review

²⁴ "The Field Office Director shall ensure that all information is kept current and is provided to each facility. Updated lists need to be posted in the detainee housing units." See ICE PBNDS 2011, Standard, Telephone Access, Section (V)(E). **This is a priority component.**

²⁵ "Facility staff members are responsible for ensuring on a daily basis that telephone systems are operational and that the free telephone number list is posted. After ensuring that each phone has a dial tone, when testing equipment, the officers must be able to demonstrate that an individual has the ability to make calls using the free call platform." See ICE PBNDS 2011, Standard, Telephone Access, Section (V)(A)(4)(a).

²⁶ "Ordinarily, a detainee is considered "indigent" if he/she has less than \$15.00 in his/her account for ten (10) days." See ICE PBNDS 2011, Telephone Access, Section, (V)(E)(3).

²⁷ "ICE will issue guidance on the designation of representatives and additional guidelines for conducting hearings." See ICE PBNDS 2011, Standard, Grievance System, Section, (V)(C)(3).

we found PDF has not applied to receive American Correctional Association (ACA) accreditation as required in Article 32 of the facility contract with ERO. The contract requires the service provider to apply to ACA for accreditation within nine months of the date the facility became operational. Records indicate the facility began housing ICE detainees in 2016.

ODO would like to commend ICE ERO on its Staff-Detainee Communication practices at PDF. ODO observed seven Deportation Officers (DO) actively and positively engaging with detainees. Per field office leadership, DOs are assigned specific countries and then engage with detainees from those locations. This allows for great continuity and consistency of message. ODO was very impressed with the level of engagement of ERO officers and considers the way it manages Staff-Detainee Communication at this facility as a **Best Practice**.

This was ODOs first oversight inspection of this facility. 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 2018 (PNDS 2011)
Standards Reviewed	17
Deficient Standards	10
Overall Number of Deficiencies	22
Deficient Priority Components	3
Corrective Action	5