

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 Dallas Field Office

Bluebonnet Detention Facility
Anson, Texas

July 26-30, 2021

FOLLOW-UP COMPLIANCE INSPECTION
of the
BLUEBONNET DETENTION FACILITY
Anson, Texas

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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 follow-up compliance inspection of the Bluebonnet Detention Facility (BDC) in Anson, Texas, from July 26 to 30, 2021.¹ This inspection focused on the standards found deficient during ODO's last inspection of BDC from February 8 to 12, 2021. The facility opened in 2019, is owned by Jones County, and is operated by Management & Training Corporation (MTC). The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at BDC in 2019 under the oversight of ERO's Field Office Director in Dallas (ERO Dallas). The facility operates under the Performance-Based National Detention Standards (PBNDS) 2011 (Revised 2016).

ERO has assigned deportation officers and a detention services manager to the facility. A BDC warden handles daily facility operations and manages █████ support personnel. MTC provides food services and medical care, and Union Supply Group provides commissary services at the facility. The facility does not hold any national accreditations from any outside entities.

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

During its last inspection, in Fiscal Year (FY) 2021, ODO found 14 deficiencies in the following areas: Emergency Plans (2); Facility Security and Control (2); Grievance Systems (1); Hunger Strikes (2); Medical Care (3); Staff-Detainee Communication (1); Use of Force and Restraints (1); Significant Self-harm and Suicide Prevention and Intervention (1); and Religious Practices (1).

¹ This facility holds both 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	0
Custody Classification System	1
Facility Security and Control	0
Funds and Personal Property	0
Special Management Units	0
Staff-Detainee Communication	0
Use of Force and Restraints	0
Sub-Total	1
Part 4 – Care	
Food Service	2
Hunger Strikes	0
Medical Care	2
Medical Care for Women	0
Significant Self-harm and Suicide Prevention and Intervention	0
Sub-Total	4
Part 5 – Activities	
Religious Practices	0
Sub-Total	0
Part 6 – Justice	
Grievance System	0
Sub-Total	0
Total Deficiencies	5

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. All detainees reported satisfaction with facility services. ODO conducted detainee interviews via video teleconference.

FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

SECURITY

CUSTODY CLASSIFICATION SYSTEM (CCS)

ODO reviewed [REDACTED] detainee files with high-level custody classifications and found the facility permitted high-level custody detainees to work outside of their assigned living unit in [REDACTED] instances (**Deficiency CCS-41**⁵).

CARE

FOOD SERVICE (FS)

ODO reviewed [REDACTED] FS purchase requests for sugar and found [REDACTED] purchases in which the facility did not specify the special-handling requirements for delivery (**Deficiency FS-39**⁶).

ODO reviewed two common fare master menus and determined the facility does not provide special menus for the 10 federal holidays (**Deficiency FS-188**⁷).

MEDICAL CARE (MC)

ODO reviewed [REDACTED] detainee medical records and found an appropriate medical professional did not evaluate any of the detainees at least once a month, to ensure proper treatment and dosage of prescribed psychiatric medications (**Deficiency MC-160**⁸).

ODO reviewed [REDACTED] detainee medical records enrolled in the mental health chronic care clinic with prescribed psychotropic medications and found the facility did not obtain an informed consent, describing the side effects of those medications (**Deficiency MC-241**⁹).

⁵ “High custody detainees shall not be assigned work duties outside their assigned living areas.” *See* ICE PBNDS 2011 (Revised 2016), Standard, Custody Classification System, Section (V)(F)(3).

⁶ “Other Food Items Mace, nutmeg, cloves, sugar and alcohol-based flavorings also require special handling and storage.

1) The purchase order for any of these items shall specify the special-handling requirements for delivery.” *See* ICE PBNDS 2011 (Revised 2016), Standard, Food Service, Section (V)(B)(4)(b)(1).

⁷ “The common fare menu is based on a 14-day cycle, with special menus for the ten federal holidays.” *See* ICE PBNDS 2011 (Revised 2016), Standard, Food Service, Section (V)(G)(2).

⁸ “Any detainee prescribed psychiatric medications must be regularly evaluated by a duly-licensed and appropriate medical professional, at least once a month, to ensure proper treatment and dosage.” *See* ICE PBNDS 2011 (Revised 2016), Standard, Medical Care, Section (V)(O)(4).

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 2016), Standard, Medical Care, Section (V)(AA)(4).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 16 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 13 of those standards. ODO found five deficiencies in the remaining three standards. ODO commends facility staff members for their responsiveness during this inspection. ODO recommends ERO Dallas work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations. ODO has not received the uniform corrective action plan for ODO's last inspection of BDF in February 2021.

Compliance Inspection Results Compared	First FY 2021 (PBNDS 2011) (Revised 2016)	Second FY 2021 (PBNDS 2011) (Revised 2016)
Standards Reviewed	21	16
Deficient Standards	9	3
Overall Number of Deficiencies	14	5
Repeat Deficiencies	0	0
Areas of Concern	1	0
Corrective Actions	0	0