

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 Compliance Inspection

Enforcement and Removal Operations ERO Houston Field Office

Coastal Bend Detention Center Robstown, Texas

January 11-14, 2021

COMPLIANCE INSPECTION of the COASTAL BEND DETENTION CENTER

Robstown, Texas

TABLE OF CONTENTS

| FACILITY OVERVIEW | 4 |
|---|---|
| COMPLIANCE INSPECTION PROCESS | 5 |
| FINDINGS BY PERFORMANCE-BASED NATIONAL DETENTION STANDARDS 2008 MAJOR CATEGORIES | |
| DETAINEE RELATIONS | 7 |
| COMPLIANCE INSPECTION FINDINGS | 9 |
| SAFETY | 9 |
| ENVIRONMENTAL HEALTH AND SAFETY (EH&S) | 9 |
| SECURITY | |
| ADMISSION AND RELEASE (A&R) | 9 |
| CONCLUSION | g |

COMPLIANCE INSPECTION TEAM MEMBERS



Team Lead Inspections and Compliance Specialist Contractor Contractor Contractor Contractor ODO ODO 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 compliance inspection of the Coastal Bend Detention Facility (CBDF) in Robstown, Texas, from January 11 – 14, 2021. The facility opened in 2008, and is owned and operated by GEO Group, Inc. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at CBDC in 2017 under the oversight of ERO's Field Office Director (FOD) in Houston, Texas. The facility operates under the Performance-Based National Detention Standards (PBNDS) 2008.

ERO has assigned deportation officers (DOs) to the facility. A CBDF warden/facility administrator handles daily facility operations and is supported by personnel. Single Source provides food services, Geo Group, Inc. provides medical care, and Keefe provides commissary services at the facility. The facility was accredited by the American Correctional Association in July 2020 and the National Commission on Correctional Health Care in December 2020.

| Capacity and Population Statistics | Quantity |
|--|----------|
| ICE Detainee Bed Capacity ² | 700 |
| Average ICE Detainee Population ³ | |
| Male Detainee Population (as of 1/11/2021) | |
| Female Detainee Population (as of 1/11/2021) | N/A |

During its last inspection, in Fiscal Year (FY) 2020, ODO found 17 deficiencies in the following areas: Environmental Health and Safety (2); Admission and Release (5); Classification System (2); Funds and Personal Property (5); Food Service (1); Medical Care (1); and Visitation (1).

-

¹ This facility is contracted to hold male 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 December 28, 2020.

³ Ibid.

COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population greater than ten, 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.⁴

ODO identifies violations of ICE detention standards, ICE policies, or operational procedures as "deficiencies." ODO also highlights instances in which 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.

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.

-

⁴ ODO reviews the facility's compliance with selected standards in their entirety.

FINDINGS BY PERFORMANCE-BASED NATIONAL **DETENTION STANDARDS 2008 MAJOR CATEGORIES**

| PBNDS 2008 Standards Inspected ⁵ | Deficiencies |
|--|--------------|
| Part 1 – Safety | |
| Emergency Plans | 0 |
| Environmental Health and Safety | 2 |
| Sub-Total | 2 |
| Part 2 – Security | |
| Admission and Release | 1 |
| Classification System | 0 |
| Facility Security and Control | 0 |
| Funds and Personal Property | 0 |
| Hold Rooms in Detention Facilities ⁶ | 0 |
| Population Counts | 0 |
| Sexual Abuse and Assault Prevention and Intervention | 0 |
| Staff-Detainee Communication | 0 |
| Use of Force and Restraints | 0 |
| Sub-Total | 1 |
| Part 4 – Care | |
| Food Service | 0 |
| Hunger Strikes | 0 |
| Medical Care | 0 |
| Suicide Prevention and Intervention | 0 |
| Sub-Total | 0 |
| Part 5 – Activities | |
| Religious Practices | 0 |
| Telephone Access | 0 |
| Sub-Total | 0 |
| Part 6 – Justice | |
| Grievance System | 0 |
| Law Libraries and Legal Material | 0 |
| Other Standards Reviewed | |
| Federal Performance-Based Detention Standards (FPBDS), Section A.7 | 0 |
| Sub-Total | 0 |
| Total Deficiencies | 3 |

⁵ For greater detail on ODO's findings, see the *Compliance Inspection Findings* section of this report.

⁶ ODO reviewed the Hold Rooms in Detention Facilities standard, in lieu of the SMU standard, as CBDF did not have an SMU.

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 concerns listed below. ODO conducted detainee interviews via video teleconference.

Food Service: Six out of the 12 detainees interviewed mentioned the food at the facility was subpar. Four detainees noted the food lacked variety and flavor. Two additional detainees complained the food was undercooked/raw and cold, multiple times a week.

Action Taken: ODO discussed the complaint of the food being subpar, lacking flavor
and variety with the food service administrator (FSA), reviewed the food menus,
nutritional information, and photos of food. ODO determined the meals prepared for the
detainee population were diverse, nutritionally adequate, and met the food service
standard requirement.

ODO discussed the complaint of the food being undercooked/raw and cold, multiple times a week, with the FSA. ODO found the facility purchased all meat products precooked, thus removing the possibility of the facility inadvertently serving a raw meat product. The FSA also stated the kitchen staff heated all cooked products to the proper serving temperature. Prior to sending the food cart to the housing units, staff checked the food's temperature to ensure it was appropriate and recorded the temperatures in logbooks. ODO reviewed the temperature logbooks and found the food temperatures were appropriate for the items served.

Staff-Detainee Communication: Nine of the 12 detainees interviewed noted they had not had any contact with ICE officers since their transfer into ICE custody on January 8, 2021. Three of the 12 detainees noted they would like to speak with a DO or other ICE officer.

• Action Taken: ODO spoke with the DO assigned to the facility and reviewed the ICE visitation logs. The DO noted because of the time the detainees were moved into ICE custody (1600 on Friday, January 8, 2021), the DOs had not had the opportunity to visit the facility prior to the ODO interviews on Monday, January 11, 2021. However, on Monday, January 11, 2021, ODO observed a DO arrive at the facility and speak with the detainees. Additionally, on Tuesday, January 12, 2021, a supervisory detention and deportation officer (SDDO) spoke with detainees to answer any questions or concerns. ODO also reviewed the ICE's visitor's log and confirmed both the DO and SDDO visits were recorded. ODO noted due to most detainees being in ICE custody at the facility for 48 hours or less, it was possible detainees could have limited interaction with ICE staff.

Staff-Detainee Communication: One detainee requested assistance with contacting his lawyer and with obtaining his lawyer's contact information.

• Action Taken: ODO sent the detainee's request to the assigned ICE/ERO staff and reviewed the ICE/ERO visitation logs. ODO found the ICE/ERO staff made routine trips to CBDF to interact with the detainees and collect their ICE request forms. As a result of ODO's referral, an ICE officer spoke with the detainee on January 11, 2021. However,

the detainee made no further mention of being unable to contact his lawyer. Further investigation found the detainee had no active G-28, Notice of Entry of Appearance as Attorney or Accredited Representative form, on file. The detainee was transferred out of the facility on January 12, 2021.

COMPLIANCE INSPECTION FINDINGS

SAFETY

ENVIRONMENTAL HEALTH AND SAFETY (EH&S)

The facility was unable to provide ODO with documentation to verify the facility conducted a state laboratory test of their drinking water and wastewater, as required (EHS-24⁷).

The facility was unable to provide ODO with documentation to verify the facility maintained a copy of testing and safety certification onsite (EHS-25⁸).

SECURITY

ADMISSION AND RELEASE (A&R)

ODO interviewed the intake supervisor and found new detainees reviewed the facility's orientation video in the housing units with the general population, contrary to the standard (AR-50⁹).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 19 standards under PBNDS 2008, one standard under FPBDS, and found the facility in compliance with 17 of those standards. ODO found three deficiencies in the remaining two standards.

ODO commends facility staff for their responsiveness and professionalism during this inspection. ODO recommends ERO work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations.

| Compliance Inspection Results Compared | FY 2020 (PBNDS 2008) | FY 2021 (PBNDS 2008) / (FPBDS) |
|--|-------------------------|--------------------------------------|
| Standards Reviewed | 16 | 19 / 1 |
| Deficient Standards | 7 | 2 |
| Overall Number of Deficiencies | 17 | 3 |
| Repeat Deficiencies | 1 | 0 |
| Areas of Concern | 3 | 0 |
| Corrective Actions | 8 | 0 |

⁷ "At least annually, a state laboratory shall test samples of drinking and wastewater to ensure compliance with applicable standards." *See* ICE PBNDS 2008, Standard, Environmental Health and Safety, Section (V)(E).

⁸ "A copy of the testing and safety certification shall be maintained on-site." *See* ICE PBNDS 2008, Standard, Environmental Health and Safety, Section (V)(E).

⁹ "In SPCs and CDFs, new detainees shall remain segregated from the general population during the orientation and classification period." *See* ICE PBNDS 2008, Standard, Admission and Release, Section (V)(D).