



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**

**Enforcement and Removal Operations
ERO Dallas Field Office**

**Bluebonnet Detention Facility
Anson, Texas**

December 20-22, 2022

COMPLIANCE INSPECTION
of the
BLUEBONNET DETENTION FACILITY
Anson, Texas

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COMPLIANCE INSPECTION TEAM MEMBERS



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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 compliance inspection of the Bluebonnet Detention Facility (BDF) in Anson, Texas, from December 20 to 22, 2022.¹ The facility opened in December 2019 and is owned by Jones County and operated by Management & Training Corporation (MTC). The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at BDF in December 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 to the facility. A 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 was accredited by the American Correctional Association (ACA) in January 2022. In April 2021, BDF 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 December 20, 2022)	█████
Adult Female Population (as of December 20, 2022)	█████

During its last inspection, in Fiscal Year (FY) 2022, ODO found three deficiencies in the following areas: Sexual Abuse and Assault Prevention and Intervention (1); Significant Self-harm and Suicide Prevention and Intervention (1); and Special Management Units (1).

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: ERO Facility List as of December 19, 2022.

³ *Ibid.*

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. 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 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**

PBND 2011 (Revised 2016) Standards Inspected^{5,6}	Deficiencies
Part 1 - Safety	
Emergency Plans	0
Environmental Health and Safety	0
Transportation (by Land)	0
Sub-Total	0
Part 2 - Security	
Admission and Release	0
Custody Classification System	0
Contraband	0
Funds and Personal Property	0
Hold Rooms in Detention Facilities	1
Key and Lock Control	0
Sexual Abuse and Assault Prevention and Intervention	0
Special Management Units	0
Tool Control	0
Use of Force and Restraints	0
Sub-Total	1
Part 3 - Order	
Disciplinary System	0
Sub-Total	0
Part 4 - Care	
Food Service	0
Medical Care	0
Medical Care (Women)	0
Significant Self-harm and Suicide Prevention and Intervention	0
Terminal Illness, Advance Directives and Death	0
Disability Identification, Assessment, and Accommodation	0
Sub-Total	0
Part 5 - Activities	
Correspondence and Other Mail	0
Recreation	0
Visitation	2

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

⁶ Beginning in FY 2022, ODO instituted a process of rotating all standards on a 3-year basis. As a result, some standard components may not be present in all standards.

Sub-Total	2
Part 6 - Justice	
Detainee Handbook	0
Sub-Total	0
Part 7 - Administration and Management	
Staff Training	0
Sub-Total	0
Total Deficiencies	3

DETAINEE RELATIONS

ODO interviewed 29 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.

Medical Care: One male detainee stated a doctor evaluated and prescribed him medication for an upset stomach on December 13, 2022, but the facility never provided any medication. He stated he submitted a second request on December 19, 2022, and has not received a response.

- Action Taken: ODO interviewed the health service administrator (HSA), reviewed the detainee’s medical file, and found a nurse practitioner (NP) examined and diagnosed the detainee with gastroesophageal reflux disease on November 29, 2022, after receiving his sick call request on November 26, 2022, and prescribed Omeprazole (40 mg), one capsule per day for 30 days. The HSA stated the detainee consumed two capsules per day instead of the recommended one capsule. On December 14, 2022, the NP reevaluated and prescribed the detainee Famotidine (40 mg), one tablet per day at noon for 30 days. ODO verified medical staff advised the detainee of his medication routine, and the detainee acknowledged understanding.

COMPLIANCE INSPECTION FINDINGS

SECURITY

HOLD ROOMS IN DETENTION FACILITIES (HRDF)

ODO interviewed facility staff, reviewed facility detention logs, and found officers visually monitoring hold rooms did not print their names on the facility detention logs. Specifically, the facility detention log does not include a space to record the officer’s printed name (**Deficiency HRDF-54⁷**). **This is a priority component.**

⁷ “Officers shall closely and directly supervise hold rooms through the following means: ...

b. Visual monitoring at irregular intervals at least every 15 minutes, each time recorded in the detention log, to include the time, the officer’s printed name, and any unusual behavior or complaints under “comments;”

See ICE PBNDS 2011 (Revised 2016), Standard, Hold Rooms in Detention Facilities, Section (V)(D)(5)(b).

ACTIVITIES

VISITATION (V)

ODO interviewed facility staff, inspected 10 housing units, and found all 10 housing units did not have an official list of local free legal service providers in the housing units (**Deficiency V-95⁸**).

ODO interviewed facility staff, inspected 10 housing units, and found the facility did not promptly and prominently post the current official list of local free legal service providers in any of the housing units (**Deficiency V-96⁹**).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 25 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 23 of those standards. ODO found three deficiencies in the remaining two standards. 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 August 2022.

Compliance Inspection Results Compared	FY 2022 PBNDS 2011 (Revised 2016)	FY 2023 PBNDS 2011 (Revised 2016)
Standards Reviewed	19	25
Deficient Standards	3	2
Overall Number of Deficiencies	3	3
Priority Component Deficiencies	N/A	1
Repeat Deficiencies	0	0
Areas Of Concern	0	0
Corrective Actions	0	0
Facility Rating	N/A	Superior

⁸ "ICE/ERO shall provide each facility the official list of local free legal service providers, updated quarterly by the local DOJ Executive Office for Immigration Review." See ICE PBNDS 2011 (Revised 2016), Standard, Visitation, Section (V)(J)(13).

⁹ "The facility shall promptly and prominently post the current list in detainee housing units and other appropriate areas." See ICE PBNDS 2011 (Revised 2016), Standard, Visitation, Section (V)(J)(13).