



U.S. Department of Homeland Security
Immigration and Customs Enforcement
Office of Professional Responsibility
ICE Inspections
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**Office of Detention Oversight
Follow-Up Compliance Inspection**

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

**Joe Corley Processing Center
Conroe, Texas**

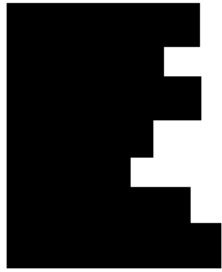
July 12-14, 2022

FOLLOW-UP COMPLIANCE INSPECTION
of the
JOE CORLEY PROCESSING CENTER
Conroe, 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 Joe Corley Processing Center (JCPC) in Conroe, Texas, from July 12 to 14, 2022.¹ This inspection focused on the standards found deficient during ODO’s last inspection of JCPC from December 13 to 16, 2021. The facility opened in 2008 and is owned and operated by The GEO Group, Inc. (GEO). The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at JCPC in 2008 under the oversight of ERO’s Field Office Director in Houston (ERO Houston). The facility operates under the National Detention Standards (NDS) 2019.

ERO has assigned deportation officers and a detention services manager to the facility. A JCPC administrator handles daily facility operations and manages █████ support personnel. GEO provides food services and medical care, and Keefe Commissary provides commissary services at the facility. The facility was accredited by the National Commission on Correctional Health Care in June 2018 and the American Correctional Association in January 2019.

Capacity and Population Statistics	Quantity
ICE Bed Capacity ²	█████
Average ICE Population ³	█████
Adult Male Population (as of July 12, 2022)	█████
Adult Female Population (as of July 12, 2022)	█████

During its last inspection, in Fiscal Year (FY) 2022, ODO found zero 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 as of July 5, 2022.

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 uniform corrective action plan (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.

FINDINGS BY NATIONAL DETENTION STANDARDS 2019 MAJOR CATEGORIES

NDS 2019 Standards Inspected ^{4,5}	Deficiencies
Part 1 - Safety	
Environmental Health and Safety	2
Sub-Total	2
Part 2 - Security	
Admission and Release	0
Custody Classification System	0
Facility Security and Control	0
Funds and Personal Property	0
Use of Force and Restraints	0
Special Management Units	0
Staff-Detainee Communication	1
Sub-Total	1
Part 4 - Care	
Food Service	0
Hunger Strikes	0
Medical Care	4
Personal Hygiene	0
Significant Self-Harm and Suicide Prevention and Intervention	0
Sub-Total	4
Part 5 - Activities	
Recreation	0
Telephone Access	0
Sub-Total	0
Part 6 - Justice	
Grievance System	0
Sub-Total	0
Total Deficiencies	7

⁴ For greater detail on ODO's findings, see the *Follow-up Compliance Inspection Findings* section of this report.

⁵ 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.

DETAINEE RELATIONS

ODO interviewed 24 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. One detainee disclosed thoughts of self-harm and ODO immediately referred the detainee to the facility's medical staff for evaluation. Most detainees reported satisfaction with facility services except for the concerns listed below.

Staff-Detainee Communication: One detainee stated ERO Houston did not respond to multiple staff-detainee communication requests.

- Action Taken: ODO reviewed the detainee request log and found the detainee submitted four requests on the following dates: June 29, July 6, July 7, and July 11, 2022. The detainee requested information about his immigration case and did not receive a response to any of the requests. ODO interviewed ERO Houston staff members and learned ERO Houston implemented a new process for responding to detainee requests in May 2022; however, the updated process prevented field office staff from accessing and responding to detainee requests, which ODO cited as a deficiency in the *Staff-Detainee Communication* section below. On July 13, 2022, ERO Houston reverted to the previous system after ODO brought it to their attention, allowing officers to respond to the requests. ERO Houston advised all staff via email of the change and to access the system. The detainee received a response and had no further questions.

Medical Care: One detainee stated medical staff would not provide him with medication to treat is his diagnosed human papilloma virus (HPV) unless his symptoms returned.

- Action Taken: ODO interviewed the director of nursing, reviewed the detainee's medical record, and confirmed the detainee arrived at JCPC on July 1, 2022, and reported he had a history of HPV with no current medication. On July 3, 2022, a registered nurse completed his initial physical examination, and he again stated his history of HPV, but no symptoms. On July 6, 2022, the detainee reported to sick call for a sore throat and cold symptoms. A nurse practitioner evaluated him and provided medication for his cold. During this visit, the detainee stated he had genital warts removed about 15 months ago. The NP performed a genital examination and noted no evidence of genital warts. The NP advised the detainee to return to sick call if the symptoms of HPV should return.

Medical Care: One detainee stated he had a hemorrhoid problem but could not submit a sick call because the requests were printed in English or Spanish and he only understands Russian.

- Action Taken: ODO reviewed the detainee's medical record, spoke with the medical staff, and found nothing recorded of his hemorrhoid issue. At ODO's request, the facility medical staff evaluated the detainee for hemorrhoids on July 13, 2022. The detainee denied any current issues with hemorrhoids and said the dorm caused him to feel claustrophobic. The facility medical staff referred the detainee to mental health,

and an NP evaluated him on July 19, 2022. The detainee denied needing mental health services and signed a refusal form. The medical staff informed the detainee on how to submit a sick call request, should he need further evaluation.

Additionally, ODO spoke with the facility administrative technician and confirmed a detainee may complete a request form in his/her native language and facility staff will translate and respond to the request. ODO followed up with the detainee and confirmed the medical staff used an interpreter during his medical appointments. He had no additional concerns.

Significant Self-Harm and Suicide Prevention and Intervention: One detainee stated thoughts of self-harm.

- **Action Taken:** ODO immediately notified an officer to escort the detainee to medical for a mental health evaluation. On July 13, 2022, medical staff evaluated the detainee, and the detainee stated he felt better now but had a stressful first 3-to-4 weeks at JCPC. The facility's medical staff prescribed the detainee pain medication and Vistaril for anxiety, and scheduled a follow-up appointment for July 15, 2022. The detainee acknowledged understanding of the medication and treatment plan. On July 15, 2022, the detainee confirmed improved sleep and feeling less anxious. The medical staff continued to monitor the detainee daily for any changes or concerns.

FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

SAFETY

ENVIRONMENTAL HEALTH AND SAFETY (EHS)

ODO inspected the facility housing units and found environmental health conditions fell below the level of recognized hygiene standards. Specifically, ODO noted the following hygiene issues in six housing units:

- All common area showers and sinks contained evidence of lime buildup on shower walls and sink surfaces;
- Floors in the restroom, bunk, and common areas were covered with discarded paper, food debris, and dust;
- Food debris and food stains on tabletops and in microwave ovens; and
- Numerous trays containing discarded food remained unreturned to food service (**Deficiency EHS-58⁶**).

ODO inspected the facility housing units and found the facility did not maintain sanitation to Occupational Safety and Health Administration standards. Specifically, ODO noted the following sanitation and cleanliness issues in six housing units:

⁶ "Environmental health conditions will be maintained at a level that meets recognized standards of hygiene." See ICE NDS 2019, Standard, Environmental Health and Safety, Section (II)(I).

- All common area showers and sinks contained evidence of lime buildup on shower walls and sink surfaces;
- Floors in the restroom, bunk, and common areas were covered with discarded paper, food debris, and dust;
- Food debris and food stains on tabletops and in microwave ovens; and
- Numerous trays containing discarded food remained unreturned to food service (**Deficiency EHS-64**⁷).

SECURITY

ADMISSION AND RELEASE (AR)

ODO reviewed the facility’s AR program and found ERO COVID-19 Pandemic Response Requirements, dated June 13, 2022, gave JCPC a “red” status during the inspection due to the high rating for the facility’s CDC community risk. With the 10-day quarantine requirement for detainees, JCPC developed a tracking board to identify housing units under quarantine and included classification level, number of detainees, dates of quarantine and estimated date of release to the general population. The staff used the board to manage status of detainees and overall population according to classification level, which ODO noted as a **Best Practice**.

CUSTODY CLASSIFICATION SYSTEM (CCS)

ODO reviewed the facility’s CCS program and found Standards 2.2, Custody Classification System, and 4.3, Medical Care, require all newly arrived detainees to receive classification, housing unit assignments, and medical screenings within 12 hours of arrival. The facility installed large digital timers above the doors of the holding cells to identify the time easily and ensure processing of detainees within the 12-hour time frame, which ODO noted as a **Best Practice**.

STAFF-DETAINEE COMMUNICATION (SDC)

ODO reviewed the ERO Houston electronic detainee correspondence log, interviewed ERO Houston staff, and found field office staff did not consistently respond and/or document responding to detainees’ requests. Specifically, ODO found no responses from field office staff to 41 out of 56 electronic requests. Additionally, ODO found the following issues:

- Staff had no access to the electronic request system;
- Staff did not report the lack of online access to a supervisor; and
- Staff did not close out detainee requests after responding (**Deficiency SDC-18**⁸).

⁷ “General: Facility cleanliness and sanitation shall be maintained. All surfaces, fixtures, and equipment shall be kept clean and in good repair.” See ICE NDS 2019, Standard, Environmental Health and Safety, Section (II)(I)(2).

⁸ “Detainee requests shall be forwarded to ICE/ERO within 72 hours. The facility will provide ICE/ERO’s returned response to the detainee within 24 hours.” See ICE NDS 2019, Standard, Staff-Detainee Communication, Section (II)(C)(1).

CARE

MEDICAL CARE (MC)

ODO reviewed one detainee medical file and transfer summary with suspected pulmonary Tuberculosis (TB) disease and found medical staff did not test for TB prior to the detainee's release. Specifically, a health care practitioner did not determine the detainee's noncontagious status according to CDC guidelines prior to release from airborne infection isolation. Additionally, the medical staff did not document the need for respiratory precautions on the detainee's transfer summary (**Deficiency MC-21**⁹).

ODO reviewed 25 detainee medical files and found in 25 out of 25 files, facility staff did not complete an initial dental screening within 14 days of the detainees' arrival. Specifically, a licensed practical nurse, a registered nurse, or nurse practitioner conducted a three-question dental survey instead of a dental screening examination (**Deficiency MC-43**¹⁰).

ODO reviewed 14 medical transfer summaries and found in 4 out of 14 summaries, no health history. Specifically, facility medical staff did not include the following items:

- A diabetes diagnosis in two summaries;
- A human immunodeficiency (HIV) diagnosis in one summary;
- Suspected TB infection in one summary; and
- Staff annotated the summaries with "NONE" entered in the diagnosis field (**Deficiency MC-112**¹¹).

ODO reviewed 14 medical transfer summaries and found in 4 out of 14 summaries, no transfer medical information. Specifically, ODO noted the following issues:

- No diabetes diagnosis in two summaries;
- No HIV diagnosis in one summary;
- No suspected TB infection in one summary;
- Staff annotated with "NONE" in the diagnosis field of all four summaries;
- No abnormal chest X-ray results nor pending TB laboratory results in one summary; and
- No current medication noted for a detainee with a prescription for a sliding scale insulin dose (**Deficiency MC-113**¹²).

⁹ "Detainees with suspected pulmonary TB disease will remain in airborne infection isolation until determined by a health care practitioner to be noncontagious in accordance with CDC guidelines." See ICE NDS 2019, Standard, Medical Care, Section (II)(D)(1).

¹⁰ "An initial dental screening exam shall be performed within 14 days of the detainee's arrival." See ICE NDS 2019, Standard, Medical Care, Section (II)(H).

¹¹ "This summary should include instructions that the detainee can understand and health history that would be meaningful to future medical providers." See ICE NDS 2019, Standard, Medical Care, Section (II)(Q)(3)(b).

¹² "The summary shall include, at a minimum, the following items:

- 1) Patient identification;
- 2) Tuberculosis (TB) screening results (including results date) and current TB status if TB disease is suspected or confirmed;

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 16 standards under NDS 2019 and found the facility in compliance with 13 of those standards. ODO found seven deficiencies in the remaining three standards. ODO commends facility staff for their innovative efforts in ensuring detainee classification procedures are accomplished by required time limits and ERO Pandemic Response Requirements are adhered to, which ODO noted as **Best Practices**. ODO recommends ERO Houston work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations. A uniform corrective action plan was not required for ODO's last inspection of JCPC which occurred in December 2021.

Compliance Inspection Results Compared	First FY 2022 (NDS 2019)	Second FY 2022 (NDS 2019)
Standards Reviewed	19	16
Deficient Standards	0	3
Overall Number of Deficiencies	0	7
Repeat Deficiencies	0	0
Areas Of Concern	0	0
Corrective Actions	0	0
Facility Rating	Superior	N/A

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- 3) Current mental, dental, and physical health status, including all significant health issues, and highlighting any potential unstable issues or conditions which require urgent follow-up;
 - 4) Current medications, with instructions for dose, frequency, etc., with specific instructions for medications that must be administered en route;"

See ICE NDS 2019, Standard, Medical Care, Section (II)(Q)(3)(b)(1-4).