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ICE Inspections
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**Office of Detention Oversight
Compliance Inspection**

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

**Montgomery ICE Processing Center
Conroe, Texas**

November 29-December 1, 2022

COMPLIANCE INSPECTION
of the
MONTGOMERY ICE 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 compliance inspection of the Montgomery ICE Processing Center (MIPC) in Conroe, Texas, from November 29 to December 1, 2022.¹ The facility opened in 2018 and is owned and operated by GEO Secure Services, Inc. (GEO). The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at MIPC in 2018 under the oversight of ERO’s Field Office Director in Houston (ERO Houston). 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. An MIPC warden handles daily facility operations and manages [REDACTED] support personnel. GEO provides food services, ICE Health Service Corps provides medical care, and Keefe provides commissary services at the facility. The facility was accredited by the American Correctional Association in November 2020. In September 2022, MIPC 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	[REDACTED]
Average ICE Population ³	[REDACTED]
Adult Male Population (as of November 29, 2022)	[REDACTED]
Adult Female Population (as of November 29, 2022)	[REDACTED]

During its last inspection, in Fiscal Year (FY) 2022, ODO found three deficiencies in the following area: Medical Care (3).

¹ This facility holds both 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 November 28, 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

PBNS 2011 (Revised 2016) Standards Inspected ^{5,6}	Deficiencies
Part 1 - Safety	
Emergency Plans	0
Environmental Health and Safety	0
Transportation (By Land)	1
Sub-Total	1
Part 2 - Security	
Admission and Release	0
Custody Classification System	1
Contraband	1
Funds and Personal Property	4
Hold Rooms in Detention Facilities	0
Key and Lock Control	0
Sexual Abuse and Assault Prevention and Intervention	1
Special Management Units	1
Staff-Detainee Communication ⁷	1
Tool Control	2
Use of Force and Restraints	2
Sub-Total	13
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	2

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

⁶ 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.

⁷ ODO identified the deficiency cited under the Staff-Detainee Communication standard while performing detainee interviews and did not review the standard in its entirety.

Recreation	0
Visitation	0
Sub-Total	2
Part 6 - Justice	
Detainee Handbook	4
Sub-Total	4
Part 7 - Administration and Management	
Staff Training	0
Sub-Total	0
Total Deficiencies	20

DETAINEE RELATIONS

ODO interviewed 27 detainees, who each voluntarily agreed to participate. Four detainees made allegations of sexual abuse. Most detainees reported satisfaction with facility services except for the concerns listed below.

Sexual Abuse and Assault Prevention and Intervention: One detainee stated another detainee left a written request for sex on his bed while he was away at an appointment.

- Action Taken: ODO immediately advised ERO Houston and MIPC staff of the detainee's allegation. MIPC staff completed a Sexual Abuse and Assault Prevention and Intervention (SAAPI) Assessment Worksheet, interview, mental health assessment, and medical evaluation of the detainee. MIPC staff found the detainee could not identify the subject nor produce the request. Facility staff notified the Conroe Police Department, and police determined no criminal intent after reviewing all case information. Facility staff assigned the detainee to another housing unit for his own safety. ERO Houston reported the incident to the Joint Intake Center (JIC), and the Joint Integrity Case Management System (JICMS) gave it case number 2023SIR0002586. At the conclusion of ODO's inspection, the PREA compliance manager interviewed all parties and resolved the case via JICMS.

Sexual Abuse and Assault Prevention and Intervention: One detainee stated another detainee, now deported, sexually harassed him.

- Action Taken: ODO immediately advised ERO Houston and MIPC staff of the detainee's allegation. MIPC staff confirmed receiving the report of the allegation on October 25, 2022. MIPC staff completed a SAAPI Assessment Worksheet, interview, mental health assessment, and medical evaluation of the detainee. Facility staff moved the suspected detainee to another housing unit and later deported him. Facility investigators concluded the incident did not meet the PREA definition and closed the case.

Sexual Abuse and Assault Prevention and Intervention: One detainee stated his discomfort when a detainee in his housing unit made inappropriate, violent, and sexual comments.

- Action Taken: ODO immediately advised ERO Houston and MIPC staff of the detainee's allegation. MIPC staff completed a SAAPI Assessment Worksheet, interview, mental health assessment, and medical evaluation of the detainee. Facility staff notified the Conroe Police Department, but the police found no criminal intent after reviewing case information. Facility staff moved the detainee to another housing unit, pending the completion of the investigation. ERO Houston reported the incident to JIC, and JICMS gave it case number 2023SIR0002627. At the conclusion of ODO's inspection, MIPC staff interviewed all parties and kept the case as still pending investigation in JICMS.

Sexual Abuse and Assault Prevention and Intervention: One detainee stated a medical staff member sexually harassed him with derogatory comments about his genitals.

- Action Taken: ODO immediately advised ERO Houston and MIPC staff of the detainee's allegation. MIPC staff completed a SAAPI Assessment Worksheet, interview, mental health assessment, and medical evaluation of the detainee. Staff contacted the Conroe Police Department, and the police investigated the allegation. ERO Houston reported the incident to JIC, and JICMS gave it case number 2023SIR0002586. At the conclusion of ODO's inspection, the PREA compliance manager interviewed all parties and resolved the case in JICMS.

Medical Care: One detainee stated she found her prescribed ointment to be ineffective in treating her skin spots.

- Action Taken: ODO interviewed medical staff, reviewed the detainee's medical file, and found a registered nurse (RN) evaluated the detainee for skin spots on October 23, 2022, and prescribed a topical ointment. The RN also advised the detainee to sign up for sick call if symptoms persisted. On November 25, 2022, the detainee requested a sick call for a headache and did not mention a skin concern during the visit. On November 29, 2022, MIPC staff scheduled the detainee for an appointment with a specialist following ODO's report of the detainee's concern.

Medical Care: One detainee stated she found the prescribed Tylenol ineffective in relieving her abdominal pain. The detainee stated the pain is intermittent and she has received no further care after submitting sick call requests.

- Action Taken: ODO interviewed medical staff, reviewed the detainee's medical file, and found an RN performed an initial medical examination of the detainee and noted the detainee's remark about lower abdominal pain. The RN performed a urine test, and results indicated no infection. The RN prescribed the detainee pain medication and referred to a specialist for further evaluation. On October 4, 2022, a specialist evaluated the detainee and prescribed medication for her condition. On October 18, 2022, a specialist examined the detainee for a follow-up visit and the detainee reported no

symptoms nor discomfort to the physician.

COMPLIANCE INSPECTION FINDINGS

SAFETY

TRANSPORTATION (BY LAND) (TBL)

ODO reviewed the MIPC TBL program and found transportation staff did not keep bolt cutters in the forward compartment of transport vans and instead kept bolt cutters in the emergency bag located in an unsecured area in the back of the vehicle (**Deficiency TBL-129⁸**).

SECURITY

CUSTODY CLASSIFICATION SYSTEM (CCS)

ODO reviewed the facility detainee handbook and found no explanation of classification levels nor the procedures by which a detainee may appeal his/her classification level (**Deficiency CCS-66⁹**).

CONTRABAND (CON)

ODO reviewed the facility detainee handbook and found it did not include a definition for contraband nor its applicability at this facility (**Deficiency CON-57¹⁰**).

FUNDS AND PERSONAL PROPERTY (FPP)

ODO reviewed the facility detainee handbook and found no rules for detainees on storing or mailing property not allowed in the detainee's possession (**Deficiency FPP-17¹¹**).

ODO observed MIPC FPP procedures, interviewed facility staff, and found the facility opened detainee personal property without the detainee present. Specifically, ODO found facility staff opened detainee personal property to store detainee medications prepared for placement without

⁸ "...The crew shall keep bolt cutters in the forward compartment with the outer equipment for use in an emergency." See ICE PBNDS 2011 (Revised 2016), Standard, Transportation (by Land), Section (V)(K)(2).

⁹ "The ICE Detainee Handbook standard section on classification shall include an explanation of the classification levels, with the conditions and restrictions applicable to each and the procedures by which a detainee may appeal his or her classification." See ICE PBNDS 2011 (Revised 2016), Standard, Custody Classification System, Section (V)(K).

¹⁰ "The detainee handbook, or equivalent, shall notify detainees in a language or manner that they understand relative to: ...

2. The applicability of standard "2.5 Funds and Personal Property," as it relates to contraband." See ICE PBNDS 2011 (Revised 2016), Standard, Contraband, Section (V)(E)(2).

¹¹ "The detainee handbook or equivalent shall notify the detainees of facility policies and procedures related to personal property, including: ...

3. The rules for storing or mailing property not allowed in their possession." See ICE PBNDS 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(C)(3).

the detainee present (**Deficiency FPP-97¹²**).

ODO observed MIPC FPP procedures, interviewed facility staff, and found the facility did not report nor turn over detainee abandoned property to ERO Houston. Specifically, ODO observed MIPC staff did not report nor turn over 34 abandoned items with dates ranging from February 17 to November 8, 2022, stored in the MIPC property room (**Deficiency FPP-160¹³**).

ODO observed MIPC FPP procedures, interviewed facility staff, and found the facility staff did not discard abandoned property. Specifically, ODO observed staff did not discard 34 abandoned items with dates ranging from February 17 to November 8, 2022, stored in the MIPC property room (**Deficiency FPP-162¹⁴**).

SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION (SAAPI)

ODO toured MIPC housing units and found the facility did not post the mailing addresses of organizations that assist detainees, victimized by sexual assault (**Deficiency SAAPI-68¹⁵**).

SPECIAL MANAGEMENT UNITS (SMU)

ODO reviewed 30-minute check logs and found facility staff did not personally observe detainees in the SMU and log observations at least every 30 minutes and on an irregular schedule. Specifically, ODO's review of 5 consecutive days found 612 instances where logged observation checks exceeded 30 minutes with a range of 1-to-54 minutes (**Deficiency SMU-126¹⁶**). **This is a priority component.**

STAFF-DETAINEE COMMUNICATION (SDC)

ODO reviewed housing unit logs for each housing unit and the ERO Houston weekly visitation schedule and found ERO Houston did not frequently interact with detainees in the housing unit. Specifically, ODO found housing unit logs showed ERO Houston did not visit housing units weekly as indicated by the weekly visitation schedule (**Deficiency SDC-1¹⁷**). **This is a priority component.**

¹² "All detainee luggage and facility containers used for storing detainee personal property shall be secured in a tamper-resistant manner (e.g., by a tamperproof numbered tie strap) and shall only be opened in the presence of the detainee." See ICE PBNDS 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(I).

¹³ "All facilities shall report and turn over to ICE/ERO all detainee abandoned property." See ICE PBNDS 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(M).

¹⁴ "Property that is of minimal value, broken, or clearly abandoned shall be discarded." See ICE PBNDS 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(M)(2).

¹⁵ "... The facility shall post with this notice the name of the PSA Compliance Manager and information about local organizations that can assist detainees who have been victims of sexual assault, including mailing addresses and telephone numbers (including toll-free hotline numbers where available)." See ICE PBNDS 2011 (Revised 2016), Standard, Sexual Abuse and Assault Prevention and Intervention, Section (V)(F)(3).

¹⁶ "Detainees in SMU shall be personally observed and logged at least every 30 minutes on an irregular schedule." See ICE PBNDS 2011 (Revised 2016), Standard, Special Management Units, Section (V)(M).

¹⁷ "ICE/ERO detainees shall not be restricted from having frequent informal access to and interaction with key facility staff members, as well as key ICE/ERO staff, in a language they can understand." See ICE PBNDS 2011 (Revised 2016), Standard, Staff-Detainee Communication, Section (V)(A).

TOOL CONTROL (TC)

ODO reviewed the MIPC TC program, interviewed the chief of security, and found facility management did not designate the duties of tool control officer to a staff member from the facility maintenance department (**Deficiency TC-8**¹⁸).

ODO observed the food service restricted tool cabinet and found staff did not log in one restricted tool to the sign-in/out board (**Deficiency TC-81**¹⁹).

USE OF FORCE AND RESTRAINTS (UOFR)

ODO reviewed seven UOFR incidents and found in seven out of seven incidents, the facility did not place a copy of the UOF report in the detainee's detention file (**Deficiency UOFR-130**²⁰).

ODO reviewed seven UOFR incidents and found in five out of seven incidents, the four-member after-action review (AAR) team did not convene on the workday following the incident. Specifically, the AAR team convened between 2 and 5 days following the incident (**Deficiency UOFR-155**²¹).

ACTIVITIES

CORRESPONDENCE AND OTHER MAIL (COM)

ODO reviewed the facility detainee handbook and found no definitions for special correspondence nor legal mail. Specifically, the handbook stated, "special correspondence and legal mail is defined in your ICE National Detainee Handbook" (**Deficiency COM-17**²²).

ODO reviewed the facility detainee handbook and found no notification that outgoing special correspondence or legal mail shall not be opened, inspected, nor read (**Deficiency COM-19**²³).

¹⁸ "Each facility administrator shall develop and implement a written tool control system that establishes the following:

1. A staff position responsible for: ...

b. Establishing an inspection system to ensure accountability; ... shall also assign, in writing, the duties of tool control officer to a staff member of the Facility Maintenance Department."

See ICE PBNDS 2011 (REVISED 2016), Standard, Tool Control, Section (V)(B)(1)(b).

¹⁹ "A tag shall indicate the tool has been removed from its cage and a sign-in/out board shall indicate area, date, times and user." See ICE PBNDS 2011 (REVISED 2016), Standard, Tool Control, Section (V)(H)(7)(b).

²⁰ "A copy of the report shall be placed in the detainee's detention file." See ICE PBNDS 2011 (REVISED 2016), Standard, Use of Force and Restraints, Section (V)(O).

²¹ "This four-member after-action review team shall convene on the workday after the incident." See ICE PBNDS 2011 (REVISED 2016), Standard, Use of Force and Restraints, Section (V)(P)(3).

²² "At a minimum, the notification shall specify: ...

4. The definition of special correspondence or legal mail, including instructions on the proper labeling as "special correspondence" or "legal mail" to ensure that it is treated as privileged mail."

See ICE PBNDS 2011 (REVISED 2016), Standard, Correspondence and Other Mail, Section (V)(C)(4).

²³ "At a minimum, the notification shall specify: ...

5. That incoming special correspondence or legal mail may only be opened in the detainee's presence, and may be inspected for contraband, but not read, and that outgoing special correspondence or legal mail shall not be opened, inspected, or read."

JUSTICE

DETAINEE HANDBOOK (DH)

ODO reviewed the facility detainee handbook and found:

- No procedure for appealing disciplinary findings nor a detainee’s rights in the disciplinary system, as required by the standard, “3.1: Disciplinary System” (**Deficiency DH-11**²⁴);
- No procedure for requesting access to the main law library, as required by the standard, “6.3: Law Libraries and Legal Material” (**Deficiency DH-15**²⁵);
- No notification of facility rules on correspondence and other mail, including information on correspondence procedures as required by the standard, “5.1: Correspondence and Other Mail” (**Deficiency DH-17**²⁶); and
- No procedure for mailing property not allowed in a detainee’s possession in accordance with the standard, “2.5: Funds and Personal Property” (**Deficiency DH-18**²⁷).

CONCLUSION

During this inspection, ODO assessed the facility’s compliance with 26 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 15 of those standards. ODO found 20 deficiencies in the remaining 11 standards. ODO recommends ERO 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 MIPC in June 2022.

See ICE PBNDS 2011 (REVISED 2016), Standard, Correspondence and Other Mail, Section (V)(C)(5).

²⁴ “While all applicable topics from the handbook must be addressed, it is especially important that each local supplement notify each detainee of: ...

6. ‘... the procedure for appealing disciplinary findings, and detainees’ rights in the disciplinary system, as required by standard “3.1 Disciplinary System,” at Section B of Expected Practices.’”

See ICE PBNDS 2011 (REVISED 2016), Standard, Detainee Handbook, Section (V)(B)(6).

²⁵ “While all applicable topics from the handbook must be addressed, it is especially important that each local supplement notify each detainee of: ...

10. Rules and procedures governing access to the law library as required by standard “6.3 Law Libraries and Legal Material,” at Sections E(2) and N of Expected Practices.”

See ICE PBNDS 2011 (REVISED 2016), Standard, Detainee Handbook, Section (V)(B)(10).

²⁶ “While all applicable topics from the handbook must be addressed, it is especially important that each local supplement notify each detainee of: ...

12. The facility’s rules on correspondence and other mail, including information on correspondence procedures as required by standard “5.1 Correspondence and Other Mail,” at Section C of Expected Practices.”

See ICE PBNDS 2011 (REVISED 2016), Standard, Detainee Handbook, Section (V)(B)(12).

²⁷ “While all applicable topics from the handbook must be addressed, it is especially important that each local supplement notify each detainee of: ...

13. The facility’s policies and procedures related to personal property, as required by standard “2.5 Funds and Personal Property,” at Section C of Expected Practices.”

See ICE PBNDS 2011 (REVISED 2016), Standard, Detainee Handbook, Section (V)(B)(13).

Compliance Inspection Results Compared	FY 2022 PBNS 2011 (Revised 2016)	FY 2023 PBNS 2011 (Revised 2016)
Standards Reviewed	17	26
Deficient Standards	1	11
Overall Number of Deficiencies	3	20
Priority Component Deficiencies	0	2
Repeat Deficiencies	0	0
Areas Of Concern	0	0
Corrective Actions	0	0
Facility Rating	Superior	Good