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Office of Professional Responsibility
ICE Inspections
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Office of Detention Oversight
Unannounced Compliance Inspection
Enforcement and Removal Operations
ERO Houston Field Office

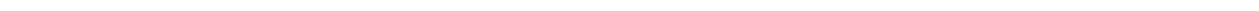
Montgomery ICE Processing Center
Conroe, Texas

June 7-9, 2022

**UNANNOUNCED COMPLIANCE INSPECTION
of the
MONTGOMERY ICE PROCESSING CENTER
Conroe, Texas**

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COMPLIANCE INSPECTION TEAM MEMBERS



Team Lead	ODO
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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 an unannounced compliance inspection of the Montgomery ICE Processing Center (MIPC) in Conroe, Texas, from June 7 to 9, 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 █████ 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 January 2020, 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 Detainee Bed Capacity ²	█████
Average ICE Detainee Population ³	█████
Male Detainee Population (as of June 7, 2022)	█████
Female Detainee Population (as of June 7, 2022)	█████

During its last inspection, in Fiscal Year (FY) 2022, ODO found five deficiencies in the following areas: Correspondence and Other Mail (1); Detention Files (2); and Detainee Transfers (2).

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. Additionally, this inspection was a follow-up inspection to ODO’s inspection of MIPC from November 29 to December 2, 2021.

² Data Source: ERO Facility List Report as of June 6, 2022.

³ *Ibid.*

UNANNOUNCED COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population (ADP) greater than 10, 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 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.

Beginning fiscal year (FY) 2022, ODO will conduct focused reviews of under 72-hour ICE detention facilities with an ADP of one or more detainees and over 72-hour ICE detention facilities with an ADP of one-to-nine detainees. Additionally, ODO will conduct unannounced inspections of ICE detention facilities, regardless of ADP of detainees, as well as reviews of ICE special/emerging detention facilities/programs. As such, these facility inspections will result in an ODO Inspection Compliance Rating. ODO will conduct a complete review of several core standards, in accordance with the facility’s new contractually required ICE National Detention Standards, which include but are not limited to Medical Care/Health Care, Medical Care (Women)/Health Care (Females), Hunger Strikes, Suicide Prevention, Food Service, Environmental Health and Safety, Emergency Plans, Use of Force and Restraints/Use of Physical Control Measures and Restraints, Special Management Units, Educational Policy (FRS only), Behavior Management (FRS only), Admission and Release, Classification, and Funds and Personal Property.

Upon completion of each unannounced compliance 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 its 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**

PBNDS 2011 (Revised 2016) Standards Inspected^{5,6,7}	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	0
Funds and Personal Property	0
Special Management Units	0
Staff-Detainee Communication	0
Use of Force and Restraints	0
Sub-Total	0
Part 4 - Care	
Food Service	0
Hunger Strikes	0
Medical Care	3
Medical Care (Women)	0
Significant Self-harm and Suicide Prevention	0
Sub-Total	3
Part 5 - Activities	
Correspondence and Other Mail	0
Recreation	0
Sub-Total	0
Part 7 - Administration and Management	
Detention Files	0
Detainee Transfers	0
Sub-Total	0
Total Deficiencies	3

⁵ For greater detail on ODO's findings, see the *Follow-Up 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.

⁷ Special reviews and unannounced inspections are both focused reviews, and ODO will review a facility's compliance with at least 10 individual standards during each special review or unannounced inspection.

DETAINEE RELATIONS

ODO interviewed 15 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 detainee stated her pain medication did not relieve her tooth pain. She requested Naproxen, but facility medical staff instructed her to continue with Tylenol or Ibuprofen to reduce the pain.

- Action Taken: ODO reviewed the detainee’s medical file, interviewed the facility’s compliance manager, and found facility medical staff examined the detainee on May 30, 2022, prescribed Ibuprofen for her tooth pain, and scheduled a dentist’s appointment for June 7, 2022. On June 2, 2022, medical staff examined her a second time for tooth pain but denied her request for Naproxen and advised her to take Ibuprofen as needed. The facility’s medical staff indicated they do not typically prescribe Naproxen for pain and instead prescribe either Ibuprofen or Tylenol. On June 6, 2022, the medical staff examined the detainee a third time for tooth pain and prescribed Tylenol. On June 7, 2022, the facility dentist examined the detainee and scheduled a tooth extraction for June 15, 2022. ODO followed-up with the facility and confirmed the dentist extracted her tooth on June 15, 2022, and prescribed post-operative pain medication.

UNANNOUNCED COMPLIANCE INSPECTION FINDINGS

CARE

MEDICAL CARE (MC)

ODO reviewed █ detainee medical files and found in █ out of █ files, no documentation for annual or periodic tuberculosis (TB) testing. Specifically, one detainee arrived at MIPC on February 12, 2021, a second detainee arrived on October 19, 2021, and the facility released the detainees on April 27, 2022, and May 18, 2022, respectively, without conducting TB testing on either detainee (**Deficiency MC-31**⁸).

ODO reviewed █ detainee medical files and found in █ out of █ files, no TB rescreening documentation. Specifically, one detainee with a TB test from August 29, 2019, arrived at the facility on February 12, 2021, and MIPC released that same detainee on April 27, 2022, without any further TB testing (**Deficiency MC-175**⁹).

ODO reviewed █ detainee health records and found in █ out of █ records, no documentation of current TB screening results. Specifically, one detainee, with a TB test from August 29, 2019,

⁸ “Annual or periodic TB testing shall be implemented in accordance with CDC guidelines; annual TB screening method should be appropriately selected with consideration given to the initial screening method conducted or documented during intake.” See ICE PBNDS 2011(Revised 2016), Standard, Medical Care, Section (V)(C)(2).

⁹ “Detainees shall have access to age- and gender-appropriate exams annually, including re-screening for TB.” See ICE PBNDS 2011(Revised 2016), Standard, Medical Care, Section (V)(Q).

arrived at the facility on February 12, 2021, and the MIPC released that same detainee without further TB testing on April 27, 2022. The facility should never have accepted him. Another detainee with a TB test from December 20, 2020, arrived at the facility on October 19, 2021, and MIPC released him without further TB testing on May 18, 2022 (**Deficiency MC-279**¹⁰).

CONCLUSION

During this inspection, ODO assessed the facility’s compliance with 17 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 16 of those standards. ODO found three deficiencies in the remaining one standard. ODO commends facility staff members for their responsiveness and cooperation during this inspection. ODO recommends ERO work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations. ERO provided ODO with the uniform corrective action plan for ODO’s last inspection of MIPC on November 29, 2021.

Compliance Inspection Results Compared	FY 2022 (PBNDS 2011) (Revised 2016)	FY 2022 (PBNDS 2011) (Revised 2016)
Standards Reviewed	24	17
Deficient Standards	3	1
Overall Number of Deficiencies	5	3
Repeat Deficiencies	0	0
Areas of Concern	0	0
Corrective Actions	0	0
Facility Rating	Superior	Superior

¹⁰ “Upon removal or release from ICE custody, the detainee shall be provided medication, referrals to community-based providers as medically appropriate, and a detailed medical care summary. This summary should include instructions that the detainee can understand and health history that would be meaningful to future medical providers. The summary shall include, at a minimum, the following items: ...

b) tuberculosis (TB) screening results (including results date) and current TB status if TB disease is suspected or confirmed;”

See ICE PBNDS 2011(Revised 2016), Standard, Medical Care, Section (V)(BB)(4)(c)(2)(b).