



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
2023-002-115**

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

**Laredo Processing Center
Laredo, Texas**

March 21-23, 2023

**COMPLIANCE INSPECTION
of the
LAREDO PROCESSING CENTER
Laredo, 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 Laredo Processing Center (LPC) in Laredo, Texas, from March 21 to 23, 2023.¹ The facility opened in 1985 and is owned and operated by CoreCivic. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at LPC in 1985 under the oversight of ERO’s Field Office Director in Harlingen (ERO Harlingen). The facility operates under the National Detention Standards (NDS) 2019.

ERO deportation officers are not assigned full time to the facility but conduct weekly scheduled visits on Tuesdays, from 9:00 a.m. to 5:00 p.m., in addition to unscheduled visits during the week. An LPC warden handles daily facility operations and manages █████ support personnel. Shaver Foods provides food services, Clinical Solutions provides medical care, and Keefe Supply Company provides commissary services at the facility. In February 2022, LPC 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 March 21, 2023)	█████
Adult Female Population (as of March 21, 2023)	█████

During its last full inspection, in Fiscal Year (FY) 2022, ODO found three deficiencies in the following areas: Admission and Release (1); Correspondence and Other Mail (1); and Significant Self-harm and Suicide Prevention and Intervention (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 February 27, 2023.

³ *Ibid.*

COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population of 10 or more, 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 NATIONAL DETENTION STANDARDS 2019 MAJOR CATEGORIES

NDS 2019 Standards Inspected ^{5,6}	Deficiencies
Part 1 - Safety	
Environmental Health and Safety	0
Transportation by Land	0
Sub-Total	0
Part 2 - Security	
Admission and Release	0
Custody Classification System	0
Funds and Personal Property	0
Hold Rooms in Detention Facilities	2
Use of Force and Restraints	0
Special Management Unit	0
Sexual Abuse and Assault Prevention and Intervention	0
Sub-Total	2
Part 3 - Order	
Disciplinary System	0
Sub-Total	0
Part 4 - Care	
Food Service	0
Medical Care	0
Significant Self-Harm and Suicide Prevention and Intervention	0
Terminal Illness and Death	0
Disability Identification, Assessment, and Accommodation	0
Sub-Total	0
Part 5 - Activities	
Correspondence and Other Mail	0
Recreation	0
Visitation	0
Sub-Total	0
Part 6 - Justice	
Detainee Handbook	0
Sub-Total	0
Total Deficiencies	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.

DETAINEE RELATIONS

ODO interviewed 39 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. One detainee informed ODO she had thoughts of self-harm and ODO immediately referred her to facility medical staff for evaluation. Most detainees reported satisfaction with facility services except for the concerns listed below.

Medical Care: One detainee stated her vision was worsening and she needed an LPC provider to examine her eyes.

- Action Taken: ODO interviewed the LPC health services administrator (HSA), reviewed the detainee's medical record and confirmed medical staff determined her visual acuity to be 20/20 without glasses and noted no concerns with vision during her initial intake screening on December 27, 2022. On March 23, 2023, an LPC physician examined the detainee, discussed her vision, and referred her to an off-site ophthalmologist. On the same day, medical staff scheduled the detainee's ophthalmology appointment for April 20, 2023, pending approval from ICE Health Service Corps (IHSC). On April 6, 2023, IHSC approved the appointment and LPC notified ERO Harlingen.

Medical Care: One detainee stated she had thoughts of self-harm on approximately March 20, 2023, and ODO stopped the interview and alerted facility staff. The detainee also requested a medical diet for hypertension and a re-evaluation of the prescribed medical cream for her scalp rash.

- Action Taken: ODO interviewed the LPC HSA and reviewed the detainee's medical record. Upon receiving ODO's notification of the detainee's suicidal ideation on March 21, 2023, facility staff immediately escorted the detainee to medical, and a nurse practitioner (NP) evaluated and referred her to the mental health coordinator (MHC). The MHC completed a self-harm/suicide risk assessment, wellness plan, and a behavioral analysis, before clearing her to return to the general population. On March 23, 2023, a facility psychiatrist also evaluated the detainee, discussed coping skills, and advised her to submit a sick call request when in need of a mental health provider. ODO confirmed the staff's disapproval for a medical diet, based on no diagnosis of hypertension during the detainee's physical examination on March 7, 2023. An LPC physician examined the detainee's scalp rash on March 23, 2023, and referred her to an off-site dermatologist. IHSC approved the off-site dermatology appointment for April 13, 2023, and LPC staff notified ERO Harlingen. On April 13, 2023, the dermatologist examined the detainee, prescribed cream for her scalp, and informed her on application of the cream.

Staff-Detainee Communication: One detainee stated LPC did not allow her to speak with her lawyer on or about March 17, 2023.

- Action Taken: ODO interviewed the LPC unit manager and confirmed the detainee’s scheduled appointment with her attorney on March 17, 2023. LPC staff brought the detainee to the visiting area, but her attorney never called. On March 22, 2023, the LPC staff contacted the detainee’s attorney and rescheduled an appointment for 1:00 p.m., March 23, 2023. Facility staff informed the detainee of the rescheduled appointment, and she later spoke with her attorney at the designated time.

Staff-Detainee Communication: One detainee requested to speak to ERO Harlingen on contacting pro bono lawyers and the status of her immigration case.

- Action Taken: ODO interviewed an LPC lieutenant and an ERO Harlingen DO and informed them of the detainee’s concerns. On March 21, 2023, the LPC lieutenant showed the detainee the pro bono lawyer contact list posted in the housing unit and how to contact them. On March 23, 2023, the ERO Harlingen DO spoke with the detainee and provided information about her immigration case.

COMPLIANCE INSPECTION FINDINGS

SECURITY

HOLD ROOMS IN DETENTION FACILITIES (HRDF)

ODO reviewed 25 hold room logs and found in 1 out of 25 logs, no record of detainees receiving a meal. Specifically, ODO reviewed the LPC video monitoring system and the hold room log for March 1, 2023, and found LPC staff provided no food to detainees held in a hold room for 7 hours (**Deficiency HRDF-31⁷**).

ODO reviewed 25 hold room logs and found in 12 out of 25 logs, between 2 and 7 instances per log of documented continuous monitoring between 17 and 30 minutes, instead of every 15 minutes (**Deficiency HRDF-37⁸**). **This is a priority component.**

⁷ “Officers shall provide a meal to any adult in the hold room for more than six hours.” See ICE NDS 2019, Standard, Hold Rooms in Detention Facilities, Section (II)(D)(3).

⁸ “Officers shall closely supervise the hold rooms through direct supervision, which involves irregular visual monitoring not to exceed 15 minutes between checks (each time recording the time and officer’s name or identifier in the detention log).” See ICE NDS 2019, Standard, Hold Rooms in Detention Facilities, Section (II)(D)(4).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 19 standards under NDS 2019 and found the facility in compliance with 18 of those standards. ODO found two deficiencies in the remaining standard. Since LPC's last full inspection in March 2022, LPC has continued to show steady improvement. LPC went from three deficient standards and three deficiencies in March 2022 to one deficient standard and two deficiencies during this most recent full inspection. However, the standard ODO found deficient was Hold Rooms in Detention Facilities which LPC did not have a deficiency in last year. The facility's improved performance was a result of completing a uniform corrective action plan for ODO's last inspection in March 2022. ODO recommends ERO Harlingen continue to work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations.

Compliance Inspection Results Compared	FY 2022 Full Inspection (NDS 2019)	FY 2023 Full Inspection (NDS 2019)
Standards Reviewed	19	19
Deficient Standards	3	1
Overall Number of Deficiencies	3	2
Priority Component Deficiencies	0	1
Repeat Deficiencies	0	0
Areas Of Concern	0	0
Corrective Actions	0	0
Facility Rating	Superior	Superior