



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**

**IAH Secure Adult Detention Facility (Polk)
Livingston, Texas**

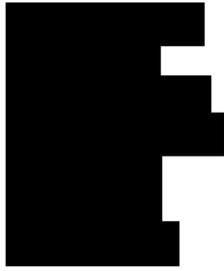
April 19-21, 2022

FOLLOW-UP COMPLIANCE INSPECTION
of the
IAH SECURE ADULT DETENTION FACILITY (POLK)
Livingston, 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 IAH Secure Adult Detention Facility (Polk) (ISADF) in Livingston, Texas, from April 19 to 21, 2022.¹ This inspection focused on the standards found deficient during ODO’s last inspection of ISADF from October 18 to 21, 2021. The facility opened in 2007 and is owned by Polk County and operated by the Management and Training Corporation (MTC). The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at ISADF in 2007 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 warden handles daily facility operations and manages █████ support personnel. MTC provides food services and medical care, and Lone Star Commissary provides commissary services at the facility. The facility was accredited by the American Correctional Association in January 2020. In September 2018, ISADF 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 April 19, 2022)	█████
Adult Female Population (as of April 19, 2022)	█████

During its last inspection, in Fiscal Year (FY) 2022, ODO found four deficiencies in the following areas: Custody Classification System (2); Detainee Transfers (1); and Searches of Detainees (1).

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 April 4, 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 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	0
Sub-Total	0
Part 2 - Security	
Admission and Release	0
Custody Classification System	0
Facility Security and Control	0
Funds and Personal Property	0
Searches of Detainees	0
Use of Force and Restraints	0
Special Management Unit	0
Staff-Detainee Communication	0
Sub-Total	0
Part 4 - Care	
Food Service	0
Hunger Strikes	0
Medical Care	1
Significant Self-Harm and Suicide Prevention and Intervention	0
Sub-Total	1
Part 5 - Activities	
Telephone Access	0
Sub-Total	0
Part 6 - Justice	
Grievance System	0
Sub-Total	0
Part 7 - Administration and Management	
Detainee Transfers	0
Sub-Total	0
Total Deficiencies	1

⁴ For greater detail on ODO's findings, see the *Follow-up 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 22 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse; however, multiple detainees expressed their concerns with how facility staff spoke to them. Most detainees reported satisfaction with facility services except for the concerns listed below.

Admission and Release: Nine detainees stated they did not receive an ICE National Detainee Handbook nor a facility specific handbook in a language they could read or understand.

- Action Taken: ODO notified the facility warden of the detainees' concerns and reviewed their respective detention files. ODO found each of the detainees signed for receipt of the ICE National Detainee Handbook and the facility specific handbook on their respective Intake Orientation Acknowledgement forms. On April 21, 2022, the facility reissued handbooks in French, Spanish, and Arabic to the detainees who read and spoke those languages. Also on April 21, 2022, the facility reissued handbooks to the detainees who spoke Turkish, Wolof, and Senegal, and brought those detainees to the intake area so that interpreters via the language line could read their handbooks to them in their respective languages.

Food Service: Four Muslim detainees stated that food portions are too small to support their religious fasting.

- Action Taken: ODO interviewed the warden and confirmed the four detainees participated in Ramadan, which allows Muslims to eat once before sunrise and once after sunset. Prior to the start of Ramadan, facility staff contacted a local Islamic center to establish appropriate eating and prayer times. The warden also stated facility food service provided the detainees with additional portions to support a daily diet of 3000 calories. ODO verified with the warden and the food service department that the facility made no changes to the menu during Ramadan. Detainees participating in Ramadan received two meals according to the menu/religious diet but with larger portions to meet the daily diet intake of 3000 calories.

Food Service: Two detainees stated the facility did not provide them meals on Saturday, April 16, 2022. One of the detainees stated the facility only served housing unit C-8 lunch on "Saturday" and a second detainee stated the facility did not serve housing unit C-8 breakfast.

- Action Taken: On April 21, 2022, ODO and the chief of security viewed video footage from housing unit C-8 and confirmed facility staff provided the unit with breakfast, lunch, and dinner on Saturday, April 16, 2022.

Law Libraries and Legal Material: One detainee stated the facility never responded to his requests to print documents required for his case, resulting in the judge deporting him.

- Action Taken: On April 21, 2022, ODO reviewed the facility's law library sign-in sheets from January 2022 to present and found documentation showing the detainee

used the library only once, which was on March 3, 2022, for a legal envelope. ODO found no documentation that the detainee submitted a request to the law library for document printing.

Medical Care: One detainee stated he had yet to receive medical care after submitting a sick call request 2 weeks ago for head and chest pains.

- Action Taken: ODO reviewed the detainee's medical file and found the detainee arrived at ISADF on March 6, 2022, and denied any medical problems during intake. On March 22, 2022, the detainee submitted a sick call request for chest pain and headaches. On March 24, 2022, the medical staff evaluated the detainee, conducted an electrocardiogram of him, and found no abnormality. On April 19, 2022, the medical staff reevaluated the detainee, and the detainee stated he needed only medication for his headaches. He also claimed missing his family as the cause of his chest pain. Medical staff prescribed medication for his headache and advised him to submit sick call requests as needed.

Personal Hygiene: Eleven detainees stated female officers do not announce their presence prior to entering a male housing unit, and one detainee stated officers told them they were in charge and did not have to announce their entry.

- Action Taken: ODO interviewed the chief of security and the warden and reviewed the facility's training standard operating procedure and their cross-gender announcement, which all staff are required to read/announce when they go into housing units of the opposite gender. ODO found the facility instructs all staff of the opposite gender to announce their presence prior to entering a detainee housing unit as part of pre-service and annual in-service training. ODO obtained a copy of the e-mail the warden sent to all facility staff, reminding them of the requirement to announce themselves when entering a housing unit of the opposite gender. Additionally, ODO did not observe any instances in which facility staff of the opposite gender failed to announce themselves prior to entering a housing unit.

Personal Hygiene: One detainee stated facility officers told detainees not to submit the required request forms for refills of hygiene items because the refill requests anger and annoy the officers.

- Action Taken: ODO interviewed the chief of security, reviewed the grievance logs, and found the detainee had not submitted a formal grievance nor made any verbal complaints about the staff's professionalism. ODO found all staff receive pre-service and annual in-service training on standards of conduct, addressing professionalism and communication with detainees. Additionally, the warden issued a reminder to all staff regarding appropriate staff-detainee communication and to ensure they always adhered to the facility's standards of conduct.

Staff-Detainee Communication: One detainee stated the officers behave rudely, yell at detainees, and treat them as criminals. He also stated the officers make comments such as: "You need to return to your country!" and "You are stupid."

- Action Taken: ODO observed facility interactions with detainees, spoke with facility leadership, and ODO did not observe any inappropriate staff conduct. ODO viewed facility video footage and found no instances of verbal abuse. Additionally, ODO found no records of grievances from detainees about the officers.

Telephone Access: One detainee stated another detainee told him that officers will punish any detainee caught speaking to an attorney. After hearing that warning, he now fears calling an attorney or consulate. The detainee could not recall the name of the detainee who informed him but did state he transferred to another facility.

- Action Taken: On April 20, 2022, ODO spoke with a facility case manager and requested a facility staff member instruct the detainee on how to make pro bono legal calls, add a lawyer to the facility’s approved list, and how to ensure privacy during any legal calls. On that same day, a facility officer contacted and assured the detainee privacy for his legal calls and then showed him how to make pro bono calls. Additionally, he instructed the detainee on how to request the addition of a lawyer’s phone number to the facility’s approved list.

FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

CARE

MEDICAL CARE (MC)

ODO reviewed [REDACTED] detainee medical records and found in [REDACTED] out of [REDACTED] records, the facility did not complete a comprehensive health assessment, including a physical examination and mental health screening within 14 days of a detainee’s arrival. Specifically, the facility completed a detainee’s comprehensive health assessment 15 days after arrival (**Deficiency MC-27⁶**).

Corrective Action: Prior to this ODO inspection, on March 24, 2022, the health service administrator identified a nurse who completed a comprehensive health assessment 1 day late. The facility educated the nurse on the importance of completing the comprehensive health assessment within 14 days of a detainee’s arrival and developed an electronic notification system. The electronic notification system provides nurses a message alert for upcoming due dates of all detainees’ comprehensive health assessments. Also, the facility decided to complete comprehensive health assessments within 10 days of a detainee’s arrival instead of the required 14 days. ODO verified the facility’s identification of the late comprehensive health assessments and the subsequent resolution (**C-1**).

⁶ “The facility will conduct and document a comprehensive health assessment, including a physical examination and mental health screening, on each detainee within 14 days of the detainee’s arrival at the facility.” See ICE NDS 2019, Standard, Medical Care, Section (II)(E).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 16 standards under NDS 2019 and found the facility in compliance with 15 of those standards. ODO found one deficiency in one standard. ODO commends facility staff members for their responsiveness during this inspection. ODO recommends ERO Houston work with the facility to resolve the deficiency that remains outstanding in accordance with contractual obligations. ERO provided ODO with the uniform corrective action plan for ODO's last inspection of ISADF on October 18, 2021.

Compliance Inspection Results Compared	First FY 2022 (NDS 2019)	Second FY 2022 (NDS 2019)
Standards Reviewed	19	16
Deficient Standards	3	1
Overall Number of Deficiencies	4	1
Repeat Deficiencies	0	0
Areas Of Concern	0	0
Corrective Actions	1	1
Facility Rating	Superior	N/A