



U.S. Department of Homeland Security
U.S. Immigration and Customs Enforcement
Office of Professional Responsibility
Inspections and Detention Oversight Division
Washington, DC 20536-5501

**Office of Detention Oversight
Follow-Up Compliance Inspection**

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

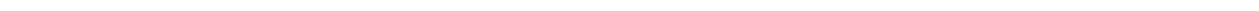
**IAH Secure Adult Detention Facility (Polk)
Livingston, Texas**

April 19-22, 2021

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 22, 2021.¹ This inspection focused on the standards found deficient during ODO's last inspection of ISADF from October 26 to 29, 2020. ISADF opened in 2007, is owned by Polk County, and is operated by Management and Training Corporation (MTC). The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at ISADF in May 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 ISADF. An ISADF warden handles daily facility operations and manages ■■■ support personnel. MTC provides medical care and food services, and Lone Star Commissary provides commissary services at the facility. ISADF was accredited by the American Correctional Association in January 2020.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity ²	1054
Average ICE Detainee Population ³	■■■
Male Detainee Population (as of April 19, 2021)	■■■
Female Detainee Population (as April 19, 2021)	N/A

During its last inspection, in October 2020, ODO found three deficiencies in the following areas: Facility Security and Control (1) and Use of Force and Restraints (2).

¹ This facility holds male detainees with low, medium-low, medium-high, and high-security classification levels for periods longer than 72 hours.

² Data Source: ERO Facility List Report as of April 19, 2021.

³ *Ibid.*

FOLLOW-UP/INTERIM 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 Fiscal Year (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.

Follow-Up/Interim Compliance Inspections focus on facilities that changed their contractually required ICE National Detention Standards (i.e., from NDS 2000 to NDS 2019) following their first ODO inspection of the FY. 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. 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, 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.

ODO was unable to conduct an on-site inspection of this facility, as a result of the COVID-19 pandemic, and instead, conducted a remote inspection of the facility. During this remote inspection, ODO interviewed facility staff, ERO field office staff, and detainees, reviewed files and detention records, and was able to assess compliance for at least 90 percent or more of the ICE national detention standards reviewed during the inspection.

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
Use of Force and Restraints	0
Special Management Units	0
Sub-Total	0
Part 4 – Care	
Food Service	0
Hunger Strikes	0
Medical Care	0
Significant Self-harm and Suicide Prevention and Intervention	0
Sub-Total	0
Total Deficiencies	0

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

⁵ Beginning in FY 2021, ODO added Emergency Plans, Facility Security and Control, Population Counts, Hunger Strikes, and Staff Training as core standards. NDS 2019 does not include Emergency Plans, Population Counts, nor Staff Training as individual standards; however, those specific requirements are resident in other core standards.

DETAINEE RELATIONS

ODO interviewed 12 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. One detainee exhibited signs of mental health issues during the interview, and ODO immediately referred him to both ERO Houston and ISADF medical staff for follow-up. Most detainees reported satisfaction with facility services except for the concerns listed below. ODO attempted to conduct detainee interviews via video teleconference; however, the ERO Houston field office and ISADF were not able to accommodate this request due to technology issues and detainee privacy concerns. As such, the detainee interviews were conducted via telephone.

Admission and Release: One detainee stated he did not receive an ICE National Detainee handbook upon admission to ISADF and the ISADF detainee handbook he received was in English; however, he did not understand it because he only spoke Spanish and was illiterate.

- Action Taken: ODO reviewed the detainee's Intake Orientation Acknowledgement Form, dated March 12, 2021, and found the detainee initialed for the receipt of both the ICE National Detainee and ISADF detainee handbooks. On April 19, 2021, the ISADF classification/records supervisor verified the detainee possessed both handbooks, printed in Spanish. Additionally, the detainee's Intake Orientation Acknowledgement form documented that an ISADF officer served as an interpreter during the intake process and explained the handbooks to the detainee. The classification/records supervisor confirmed that detainee received an explanation of the illiteracy translation process during intake.

Correspondence and Other Mail: One detainee stated, on or about March 23, 2021, he received legal correspondence that was not opened in his presence.

- Action Taken: ODO interviewed the ISADF mail room supervisor, reviewed the ISADF correspondence and other mail policy, the ISADF incoming legal mail log, and the detainee mail call list. On April 13, 2021, ISADF mail records confirmed that the detainee received one legal letter. On the same day, the detainee mail call list indicated ISADF staff summoned the detainee to the mail room to await his turn in line at the service window to receive mail. The mail room supervisor explained that, in accordance with the ISADF incoming legal mail procedure, the detainee had to sign the incoming legal mail log, acknowledging receipt of a legal letter before opening the envelope. After the detainee signed the log, the ISADF supervisor opened the envelope in the detainee's presence, skimmed the envelope for contraband without reading the contents, and handed the open envelope to the detainee.

Law Libraries and Legal Materials: One detainee stated he had a legal document he could not understand and requested translation of the document into Spanish.

- Action Taken: ODO reviewed the ISADF library services policy and interviewed the ISADF compliance coordinator. The compliance coordinator confirmed the detainee received legal documents, written in English as per requirement, from his attorney. On April 19, 2021, following the ODO detainee interview, an ISADF officer explained to the detainee how to submit a written request to the ISADF law library for translation

services. On April 20, 2021, the ISADF library technician provided the detainee with translation assistance.

Medical Care: One detainee exhibited signs of mental health issues during the detainee interview, and ODO immediately referred the detainee to the ISADF medical staff for follow-up. The detainee additionally stated he had a burning sensation in his eye and was not satisfied with the medical treatment provided at ISADF.

- Action Taken: Following the detainee interview, ODO immediately notified ISADF and ERO Houston staff to refer the detainee for a mental health evaluation. ODO spoke with the ISADF health service administrator and reviewed the detainee's medical record. On April 9, 2021, an ISADF nurse evaluated the detainee for knee and foot pain and prescribed ibuprofen twice daily for the pain. The detainee's medical record contained no complaints of eye pain during this visit and only that his ibuprofen prescription would end on April 12, 2021. However, on April 18, 2021, the detainee did submit a sick call request for eye pain, and an ISADF nurse examined him on April 19, 2021, following the ODO interview. On April 20, 2021, the ISADF nurse practitioner (NP) examined the detainee, based on a referral for bilateral eye irritation and visual acuity test. The NP found no abnormalities from the eye test, diagnosed the detainee's bilateral eye irritation as allergic conjunctivitis, and prescribed an over-the-counter saline eye solution to be taken as needed. The NP informed the detainee to submit an additional sick call request if the solution did not resolve his eye irritation.

Regarding the detainee's mental health, the detainee stated he had no desire to harm himself or others but was depressed and had no desire to arise in the morning due to his prolonged stay at various detention facilities. On March 12, 2021, the detainee received an initial mental health evaluation by ISADF medical staff upon admission. The evaluation determined the detainee to be stable, and he declined the opportunity to speak with an ISADF mental health provider, offered as part of the ISADF standard admission procedure. On April 20, 2021, the detainee spoke with an ISADF psychologist regarding his depression and anxiety symptoms as per the request of ODO. The detainee stated his despondency was due to separation from his family during his detention and declined medication for his anxiety. On April 21, 2021, an ISADF psychiatrist met with the detainee to further discuss his symptoms, and the detainee again declined the offer for medication. The ISADF medical staff determined the detainee intended neither suicide nor self-harm and informed the detainee to submit a sick call request should he need additional treatment or counseling for his mental health issues.

Sexual Abuse and Assault Prevention and Intervention: 7 out of 12 detainees alleged female officers did not consistently announce their presence before entering the male housing units.

- Action Taken: ODO interviewed the ISADF compliance coordinator and reviewed the ISADF Post Order. The compliance coordinator stated female officers were trained to announce their presence before entering male housing units by knocking loudly, vocally announcing a female officer would be entering the housing unit, and subsequently pausing to provide any male detainees the opportunity to cover themselves or to respond accordingly for additional time. On April 21, 2021, the ISADF compliance coordinator worked with the chief of security to require security

supervisors to reiterate the entrance procedure with housing unit officers during daily shift briefings for the next 30 days.

Personal Hygiene: One detainee stated he did not know how to replace his personal hygiene items and had depleted his shampoo.

- Action Taken: ODO interviewed the ISADF compliance coordinator and reviewed the ISADF detainee handbook for instructions to refill personal hygiene items. On April 19, 2021, an ISADF officer explained the replacement procedure to the detainee and provided the detainee with additional shampoo.

Telephone Access: One detainee stated he had been out of telephone minutes from the previous week and did not know how to obtain more minutes.

- Action Taken: ODO interviewed the ISADF compliance coordinator, reviewed the ISADF detainee handbook, and observed photographs of the telephones in the detainee housing units. ODO verified the ISADF detainee handbook's instructions to refill minutes on detainee telephone accounts and copies of these instructions in a binder attached to each telephone. On April 19, 2021, an ISADF sergeant determined the detainee used 500 out of 500 complimentary telephone minutes the facility issued during the COVID-19 pandemic. On the same day, the sergeant explained to the detainee how to purchase additional telephone minutes and how the detainee's family could purchase additional minutes for him.

FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

There were no findings during this follow-up inspection.

CONCLUSION

During this follow-up inspection, ODO assessed the facility's compliance with 11 standards under NDS 2019 and found the facility in compliance with all standards. ODO commends facility staff for their responsiveness and professionalism during the inspection process.

Compliance Inspection Results Compared	First FY 2021 (NDS 2019)	Second FY 2021 (NDS 2019)
Standards Reviewed	18	11
Deficient Standards	2	0
Overall Number of Deficiencies	3	0
Repeat Deficiencies	0	0
Areas of Concern	0	0
Corrective Actions	1	0