

### **U.S. Department of Homeland Security**

Immigration and Customs Enforcement Office of Professional Responsibility ICE Inspections Washington, DC 20536-5501

# Office of Detention Oversight Compliance Inspection

# Enforcement and Removal Operations ERO Harlingen Field Office

Coastal Bend Detention Facility Robstown, Texas

July 12-14, 2022

# COMPLIANCE INSPECTION of the COASTAL BEND DETENTION FACILITY

Robstown, Texas

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### **COMPLIANCE INSPECTION TEAM MEMBERS**



Team Lead Inspections and Compliance Specialist Contractor Contractor ODO ODO Creative Corrections Creative Corrections

### 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 Coastal Bend Detention Facility (CBDF) in Robstown, Texas, from July 12 to 14, 2022. The facility opened in 2008 and is owned and operated by The GEO Group, Inc. (GEO). The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at CBDF in 2017 under the oversight of ERO's Field Office Director in Houston (ERO Houston). As of August 2021, CBDF houses detainees under the oversight of ERO's Field Office Director in Harlingen (ERO Harlingen). The facility operates under the Performance-Based National Detention Standards (PBNDS) 2008.

ERO has assigned deportation officers to the facility. A CBDF facility administrator handles daily facility operations and manages support personnel. Single Source provides food services, GEO provides medical care, and Keefe Commissary provides commissary services at the facility. The facility was accredited by the American Correctional Association in 2020. In July 2020, CBDF was audited for the Department of Justice (DOJ) Prison Rape Elimination Act (PREA) and was DOJ PREA certified.

Capacity and Population Statistics	Qu	antity
ICE Bed Capacity <sup>2</sup>		
Average ICE Population <sup>3</sup>		
Adult Male Population (as of July 12, 2022)		
Adult Female Population (as of July 12, 2022)		

During its last inspection, in Fiscal Year (FY) 2021, ODO found two deficiencies in the following area: Medical Care (2).

<sup>&</sup>lt;sup>1</sup> This facility holds male detainees with low and medium-low security classification levels for periods greater than 72 hours.

<sup>&</sup>lt;sup>2</sup> Data Source: ERO Facility List as of July 11, 2022.

<sup>&</sup>lt;sup>3</sup> *Ibid.* CBDF's FY 2021 average daily population was four ICE detainees, which is why ODO conducted a Special Review (focused) inspection of CBDF.

### 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 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.<sup>4</sup>

ODO identifies violations of ICE detention standards, ICE policies, or operational procedures as "deficiencies." ODO also highlights instances in which 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 average daily population (ADP) of 1 or more detainees and over 72-hour ICE detention facilities with an ADP of 1-9 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 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.

<sup>&</sup>lt;sup>4</sup> ODO reviews the facility's compliance with selected standards in their entirety.

# FINDINGS BY PERFORMANCE-BASED NATIONAL DETENTION STANDARDS (PBNDS) 2008 MAJOR CATEGORIES

PBNDS 2008 Standards Inspected <sup>5,6</sup>	Deficiencies
Part 1 - Safety	
Environmental Health and Safety	3
Sub-Total	3
Part 2 - Security	•
Hold Rooms in Detention Facilities	0
Sexual Abuse and Assault Prevention and Intervention	0
Staff-Detainee Communication	1
Use of Force and Restraints	0
Sub-Total	1
Part 4 - Care	•
Food Service	0
Hunger Strikes	0
Medical Care	0
Suicide Prevention and Intervention	0
Sub-Total	0
Part 6 - Justice	
Grievance System	0
Sub-Total	0
Total Deficiencies	4

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<sup>&</sup>lt;sup>5</sup> For greater detail on ODO's findings, see the *Compliance Inspection Findings* section of this report.

<sup>&</sup>lt;sup>6</sup> 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 inspections.

### **DETAINEE RELATIONS**

ODO interviewed six out of seven detainees, who each voluntarily agreed to participate. One detainee declined ODO's request for an interview. None of the detainees made allegations of discrimination, mistreatment, or abuse. All detainees reported satisfaction with facility services.

### COMPLIANCE INSPECTION FINDINGS

### **SAFETY**

#### **ENVIRONMENTAL HEALTH AND SAFETY (EHS)**

ODO reviewed eight hazardous substance logs and found in eight out of eight logs, no alphabetical filing of hazardous substances (**Deficiency EHS-41**<sup>7</sup>).

ODO reviewed eight hazardous substance logs and found in two out of eight logs, the facility did not state used quantities nor accurate on-hand counts. Specifically, the food service log for July 2022 did not state any used quantities nor an accurate on-hand count. The log stated: three pot and pan detergents on hand, but ODO counted five; nine stainless steel cleaners on hand, but ODO counted five; and five glass cleaners on hand, but ODO counted four. Additionally, the laundry service log for July 2022 did not state any quantities used (**Deficiency EHS-42**8).

ODO reviewed eight hazardous substance logs and found in two out of eight logs, no current inventory records for before, during, and after each use. Specifically, the food service inventory log for July 2022 did not state a current hazardous substance count before and during each use nor an accurate inventory of substances after each use. Additionally, the laundry service log for July 2022 did not state a current count during each use (**Deficiency EHS-53**).

### **SECURITY**

#### STAFF-DETAINEE COMMUNICATION (SDC)

ODO reviewed the facility ICE detainee request logbook and found in two out of two entries, ERO Harlingen did not record staff response nor action taken (**Deficiency SDC-31**<sup>10</sup>).

<sup>&</sup>lt;sup>7</sup> "Entries for each shall be logged on a separate card (or equivalent) filed alphabetically by substance." *See* ICE PBNDS 2008, Standard, Environmental Health and Safety, Section (VI)(C).

<sup>&</sup>lt;sup>8</sup> "The entries shall contain relevant data, including purchase dates and quantities, use dates and quantities, and quantities on hand." *See* ICE PBNDS 2008, Standard, Environmental Health and Safety, Section (VI)(C).

<sup>&</sup>lt;sup>9</sup> "Inventory records for a hazardous substance must be kept current before, during, and after each use." *See* ICE PBNDS 2008, Standard, Environmental Health and Safety, Section (VI)(F).

<sup>&</sup>lt;sup>10</sup> "At a minimum, the log shall record: ...

<sup>•</sup> Date the request, with staff response and action, was returned to the detainee." See ICE PBNDS 2008, Standard, Staff-Detainee Communication, Section (V)(B)(2).

### **CONCLUSION**

During this inspection, ODO assessed the facility's compliance with 10 standards under PBNDS 2008 and found the facility in compliance with 8 of those standards. ODO found four deficiencies in the remaining two standards. ODO commends facility staff members for their responsiveness during this inspection. ODO recommends ERO Harlingen 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 CBDF in June 2021.

Compliance Inspection Results Compared	FY 2021 (PBNDS 2008)	FY 2022 (PBNDS 2008)
Standards Reviewed	10	10
Deficient Standards	1	2
Overall Number of Deficiencies	2	4
Repeat Deficiencies	0	0
Areas Of Concern	0	0
Corrective Actions	1	0
Facility Rating	N/A	Superior