



**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

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Office of Detention Oversight  
Follow-Up Compliance Inspection

Enforcement and Removal Operations  
ERO Houston Field Office

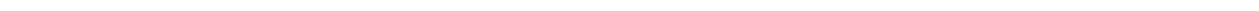
Coastal Bend Detention Facility  
Robstown, Texas

June 14-18, 2021

**FOLLOW-UP COMPLIANCE INSPECTION  
of the  
COASTAL BEND DETENTION FACILITY  
Robstown, Texas**

**TABLE OF CONTENTS**

<b>FACILITY OVERVIEW .....</b>	<b>4</b>
<b>FOLLOW-UP COMPLIANCE INSPECTION PROCESS.....</b>	<b>5</b>
<b>FINDINGS BY PERFORMANCE-BASED NATIONAL DETENTION STANDARDS 2008 MAJOR CATEGORIES .....</b>	<b>6</b>
<b>DETAINEE RELATIONS.....</b>	<b>7</b>
<b>FOLLOW-UP COMPLIANCE INSPECTION FINDINGS.....</b>	<b>7</b>
<b>CARE .....</b>	<b>7</b>
Medical Care.....	7
<b>CONCLUSION .....</b>	<b>7</b>



## FOLLOW-UP 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 follow-up inspection of the Coastal Bend Detention Facility (CBDF) in Robstown, Texas, from June 14 to 18, 2021.<sup>1</sup> This inspection focused on the standards found deficient during ODO’s last inspection of the CBDF from January 11 to 14, 2021. The facility opened in 2008 and is owned and operated by GEO Group, Inc. 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 (FOD) in Houston (ERO Houston). The facility operates under the Performance-Based National Detention Standards (PBNDS) 2008.

ERO has assigned deportation officers to the facility. A CBDF warden handles daily facility operations and is supported by ██████ personnel. Single Source provides food services, Geo Group, Inc. provides medical care, and Keefe provides commissary services at the facility. The facility was accredited by the American Correctional Health Care in December 2020.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity <sup>1</sup>	700
Average ICE Detainee Population <sup>2</sup>	████
Male Detainee Population (as of June 14, 2021)	████
Female Detainee Population (as of June 14, 2021)	████

During its last inspection, in Fiscal Year (FY) 2021, ODO conducted an inspection of CBDF and found three deficiencies in the following areas: Admission and Release (1) and Environmental Health and Safety (2).

<sup>1</sup> Data Source: ERO Facility List Report as of June 14, 2021.

<sup>2</sup> *Ibid.*

<sup>3</sup> Per the ERO Facility List Report as of June 14, 2021, CBDF’s FY 2020 average daily population of ICE detainees was 17 ICE detainees, and the facility has an active contract to hold ICE detainees, which is why ODO inspected CBDF even though the facility held no ICE detainees at the time of the inspection.

## **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 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.

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 and ERO field office staff, 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 PERFORMANCE-BASED NATIONAL DETENTION STANDARDS 2008 MAJOR CATEGORIES

PBNDS 2008 Standards Inspected <sup>4</sup>	Deficiencies
<b>Part 1 – Safety</b>	
Emergency Plans	0
Environmental Health and Safety	0
<b>Sub-Total</b>	<b>0</b>
<b>Part 2 – Security</b>	
Admission and Release	0
Classification System	0
Funds and Personal Property	0
Special Management Units	0
Use of Force and Restraints	0
<b>Sub-Total</b>	<b>0</b>
<b>Part 4 – Care</b>	
Food Service	0
Hunger Strikes	0
Medical Care	2
Suicide Prevention and Intervention	0
<b>Sub-Total</b>	<b>2</b>
<b>Total Deficiencies</b>	<b>2</b>

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<sup>4</sup> For greater detail on ODO's findings, see the *Follow-Up Compliance Inspection Findings* section of this report.

## DETAINEE RELATIONS

ODO did not conduct detainee interviews due to the facility's zero-detainee population count during the entirety of the inspection.

## FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

### MEDICAL CARE (MC)

ODO reviewed the credential files of [REDACTED] medical staff and found the facility had not verified the licenses of [REDACTED] contract radiology technicians who provide services at the facility (**Deficiency MC-73<sup>5</sup>**).

*Corrective Action:* The health service administrator informed ODO the facility verified the licenses of the [REDACTED] radiology technicians during this inspection and added them to the facility tracking flowsheet (**C-1**).

ODO reviewed [REDACTED] detainee health intake screenings and found a physician's assistant reviewed [REDACTED] out of [REDACTED] detainee health intake screenings, a responsibility that belongs expressly to the clinical medical authority (**Deficiency MC-84<sup>6</sup>**).

## CONCLUSION

During this inspection, ODO assessed the facility's compliance with 11 standards under PBND 2008 and found the facility in compliance with 10 of those standards. ODO found two deficiencies in the remaining one standard. ODO commends facility staff members for their responsiveness during this inspection and notes there was an instance where staff initiated one corrective action during the 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 CBDF on May 12, 2021.

Compliance Inspection Results Compared	First FY 2021 (PBND 2008) (FPBDS)	Second FY 2021 (PBND 2008)
Standards Reviewed	19/1	11
Deficient Standards	2	1
Overall Number of Deficiencies	3	2
Repeat Deficiencies	0	0
Areas of Concern	0	0
Corrective Actions	0	1

<sup>5</sup> "All health care staff must be verifiably licensed, certified, credentialed, and/or registered in compliance with applicable state and federal requirements." See ICE PBND 2008, Standard, Medical Care, Section (V)(H).

<sup>6</sup> "The clinical medical authority shall be responsible for review of all health screening forms within 24 hours or next business day to assess the priority for treatment (for example, Urgent, Today, or Routine)." See ICE PBND 2008, Standard, Medical Care, Section (V)(I)(1).