



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 Newark Field Office

Elizabeth Contract Detention Facility
Elizabeth, New Jersey

May 10-14, 2021

FOLLOW-UP COMPLIANCE INSPECTION
of the
ELIZABETH CONTRACT DETENTION FACILITY
Elizabeth, New Jersey

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FOLLOW-UP COMPLIANCE INSPECTION TEAM MEMBERS



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Creative Corrections
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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 Elizabeth Contract Detention Facility (ECDF) in Elizabeth, New Jersey, from May 10 to 14, 2021.¹ This inspection focused on the standards found deficient during ODO’s last inspection of ECDF from November 30 to December 4, 2020. The facility opened in January 2006, is owned by Port View Property, and is operated by CoreCivic. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at ECDF in 1996 under the oversight of ERO’s Field Office Director in Newark (ERO Newark). The facility operates under the Performance-Based National Detention Standards (PBNDS) 2011 (Revised 2016).

ERO has assigned deportation officers and a detention services manager to the facility. An ECDF warden handles daily facility operations and manages █ personnel. CoreCivic provides food services, ICE Health Service Corps provides medical care, and Keefe provides commissary services at the facility. The facility was accredited by the American Correctional Association in June 2019 and by the National Commission on Correctional Health Care in February 2020. In May 2018, ECDF 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 Detainee Bed Capacity ²	304
Average ICE Detainee Population ³	█
Male Detainee Population (as of May 10, 2021)	█
Female Detainee Population (as of May 10, 2021)	█

During its last inspection, in Fiscal Year (FY) 2021, ODO found two deficiencies in the following areas: Disability Identification, Assessment, and Accommodation (1); and Custody Classification System (1).

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

² Data Source: ERO Facility List Report as of May 6, 2021.

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.

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 PERFORMANCE-BASED NATIONAL DETENTION STANDARDS 2011 (REVISED 2016) MAJOR CATEGORIES

PBNDs 2011 (Revised 2016) Standards Inspected	Deficiencies
Part 1 – Safety	
Emergency Plans	0
Environmental Health and Safety	0
Sub-Total	0
Part 2 – Security	
Admission and Release	0
Custody Classification System	0
Funds and Personal Property	0
Special Management Unit	0
Use of Force and Restraints	0
Sub-Total	0
Part 3 – Care	
Food Service	0
Hunger Strikes	0
Medical Care	0
Medical Care Women	0
Significant Self-Harm and Suicide Prevention and Intervention	0
Disability Identification, Assessment, and Accommodation	0
Sub-Total	0
Total Deficiencies	0

DETAINEE RELATIONS

ODO interviewed 12 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, nor abuse. All of the detainees reported satisfaction with facility services. ODO conducted detainee interviews via video teleconference.

FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

There were no findings for this follow-up compliance inspection.

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 13 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with all 13 of those standards. ODO commends facility staff for its responsiveness during this inspection.

Compliance Inspection Results Compared	First FY 2021 (PBNDS 2011) (Revised 2016)	Second FY 2021 (PBNDS 2011) (Revised 2016)
Standards Reviewed	21	13
Deficient Standards	2	0
Overall Number of Deficiencies	2	0
Repeat Deficiencies	0	0
Areas of Concern	2	0
Corrective Actions	0	0