



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

**Office of Detention Oversight
Compliance Inspection**

**Enforcement and Removal Operations
ERO Houston Field Office
Houston Contract Detention Facility
Houston, Texas**

May 7-9, 2017

**COMPLIANCE INSPECTION
for the
HOUSTON CONTRACT DETENTION FACILITY
HOUSTON, TEXAS**

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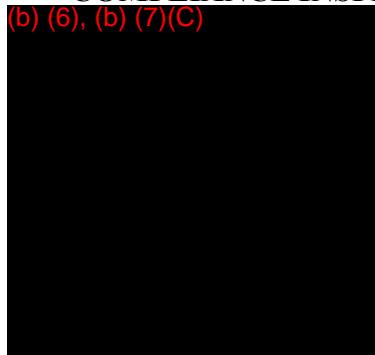
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COMPLIANCE INSPECTION TEAM MEMBERS

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FACILITY OVERVIEW

The Office of Detention Oversight (ODO) conducted a compliance inspection of the Houston Contract Detention Facility (HCDF), in Houston, Texas, from May 2 to 4, 2017¹. HCDF opened in 1984 and is owned and operated by CoreCivic. The Office of Enforcement and Removal Operations (ERO) began housing detainees at HCDF in 1984 under the oversight of ERO's Field Office Director (FOD) in Houston.

ERO Deportation Officers (DO) and a Detention Services Manager (DSM) are assigned to the facility. A HCDF warden is responsible for oversight of daily facility operations and is supported by (b) (7) personnel. The Trinity Services Group provides food services, and medical care is provided by the ICE Health Service Corps (IHSC). The facility holds both American Correctional Association (ACA) and National Commission on Correctional Health Care (NCCHC) accreditations.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity ²	1,000
Average ICE Detainee Population ³	993
Male Detainee Population (as of 5/2/2017)	854
Female Detainee Population (as of 5/2/2017)	32

In FY 2013, ODO conducted an inspection of HCDF reviewing seventeen (17) standards and finding ten (10) standards in compliance. In all, ODO found seven (7) deficiencies in the following areas: Classification System, Detainee Handbook, Funds and Personal Property, Law Libraries and Legal Material, Medical Care, Telephone Access, and Use of Force.

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 Report as of April 10, 2017.

³ *Ibid.*

FY 2017 FINDINGS BY PBNDS 2011 MAJOR CATEGORIES

PBNDS 2011 STANDARDS INSPECTED ⁵	DEFICIENCIES
Part 1 - Safety	
Environmental Health and Safety	1
Sub-Total	1
Part 2 - Security	
Admission and Release	0
Custody Classification System	1
Funds and Personal Property	1
Sexual Abuse and Assault Prevention and Intervention	0
Special Management Units	0
Staff-Detainee Communication	0
Use of Force and Restraints	0
Sub-Total	2
Part 4 - Care	
Food Service	0
Medical Care	0
Medical Care (Women)	0
Significant Self-harm and Suicide Prevention and Intervention	0
Sub-Total	0
Part 5 - Activities	
Telephone Access	0
Sub-Total	0
Part 6 - Justice	
Detainee Handbook	0
Grievance System	0
Law Libraries and Legal Materials	0
Sub-Total	0
Total Deficiencies	3

⁵ For greater detail on ODO's findings, see the *Inspection Findings* section of this report.

COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population greater than ten, and where detainees are housed for over 72 hours, to assess compliance with ICE National Detention Standards (NDS) 2000, or the Performance-Based National Detention Standards (PBNDS) 2008 or 2011, as applicable. These inspections focus solely on facility compliance with detention standards that directly affect detainee life, health, safety, and/or well-being.¹ ODO identifies violations linked to ICE detention standards, ICE policies, or operational procedures as *deficiencies*.

For facilities governed by either the PBNDS 2008 or 2011, ODO specifically notes deficiencies related to ICE-designated “priority components” which are considered *critical* to facility security and the legal and civil rights of detainees. ODO also highlights instances when the facility resolves deficiencies prior to completion of the ODO inspection -- these corrective actions are annotated with “C” under the Inspection Findings section of this report.

At the conclusion of each inspection, ODO holds a closeout briefing with facility and local ERO officials to discuss preliminary findings. A summary of these findings is also 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. Additionally, ODO findings inform ICE executive management decision making in better allocating resources across the agency’s entire detention inventory.

¹ ODO reviews the facility’s compliance with selected standards in their entirety.

DETAINEE RELATIONS

ODO interviewed 28 detainees, each of whom volunteered to participate. None of the detainees made allegations of mistreatment, abuse, or discrimination. The majority of detainees reported being satisfied with facility services, with the exception of the complaints below:

Detainee Handbooks: Fifteen (15) out of twenty-eight (28) detainees claimed they did not receive either the facility and/or the ICE National Detainee Handbooks upon their arrival to the facility.

- Action Taken: ODO reviewed the detainee files and confirmed the detainees were issued and signed for both handbooks upon intake. However, the facility quality assurance manager provided each of those detainees with the requested handbook prior to ODO's departure.

Medical Care: One transgender female detainee stated she is housed in an isolated unit, does not receive recreation, and has little or no interaction with other detainees.

- Action Taken: ODO interviewed facility staff regarding the detainee's claims and confirmed the detainee previously requested to be isolated from other detainees (including recreation). Upon learning the detainee desired group recreation and work, facility staff engaged with the detainee and scheduled an assessment with mental health. Staff will provide greater access to facility resources/services as appropriate while ensuring her safety.

Staff-Detainee Communication: Five detainees claimed they have not seen their ERO deportation officers and would like to speak with them. They also claimed some ERO officers simply sign the log book and leave without engaging with detainees.

- Action Taken: ODO reviewed the housing unit logbooks and confirmed schedules of ERO visits are posted in each housing unit. ODO informed ERO of the detainees' claims and accompanied an ERO officer to the housing units of those detainees. ODO observed ERO speak with all of them as well as other detainees who approached them.

COMPLIANCE INSPECTION FINDINGS

SAFETY

ENVIRONMENTAL HEALTH AND SAFETY (EH&S)

ODO verified hazardous substances were safely stored and controlled in all areas. A master index of hazardous substances and a master file of Material Safety Data Sheets (MSDS) is maintained in the Safety Office and in the maintenance area. ODO verified MSDS were available where hazardous chemicals were stored with one exception. The MSDS binder for cleaning chemicals in the medical Short Stay Unit was unavailable (**Deficiency EH&S-1²**).

Corrective Action: Prior to the completion of the inspection, the facility initiated corrective action by locating and returning the SDS binder to its proper location (C-1).

SECURITY

CLASSIFICATION

Detainees are issued color-coded uniforms with corresponding wristbands and photo identification cards that reflect their classification level. ODO reviewed the housing roster and confirmed there was no prohibited comingling in housing units. However, ODO observed low and high custody detainees comingled in the medical waiting area, hallways, and intake/release areas (**Deficiency CCS-1³**). Staff reported low and high custody detainees also comingle during legal presentations by attorneys and during religious services.

FUNDS AND PERSONAL PROPERTY

Review of quarterly property audits for 2016 and 2017 found the month and the name of staff person who completed the audits were documented. However, the date and time of the audits were not documented as required by the standard (**Deficiency F&PP-1⁴**).

² “Staff and detainees shall have ready and continuous access to the MSDS for the substances with which they are working. Staff and detainees who do not read English shall not be authorized to work with these materials.” See ICE PBNDS 2011, Standard, Environmental Health and Safety, Section (V)(B)(4)(c).

³ “Low custody detainees may not be comingled with high custody detainees.” See ICE PBNDS 2011, Standard, Custody Classification System, Section (V)(F)(1). **This is a Priority Component and Repeat Deficiency.** This deficiency was found during ODO inspections conducted in 2010, 2011, and 2013 and was discussed again with the facility leadership and the ICE Contracting Officer Representative (COR).

⁴ “The property and valuables logbook shall record the date, time and the name of the officer(s) conducting the inventory.” See ICE PBNDS 2011, Standard, Funds and Personal Property, Section (V)(J).

CONCLUSION

During this inspection, ODO reviewed the facility's compliance with sixteen (16) standards and found the facility compliant with thirteen (13) standards. Compared to the majority of ICE facilities, HCDF is a large facility housing nearly 900 detainees at the time of inspection. HCDF has shown significant improvement in the number of deficiencies found during ODO's inspections—moving from a high of thirty-two (32) deficiencies in 2010 to only three (3) deficiencies this inspection. HCDF staff should be commended for these improvements and for overall compliance with ICE detention standards. ODO recommends ERO work with facility personnel to resolve the few remaining deficiencies that remain, in accordance with contractual obligations.

Compliance Inspection Results Compared	FY 2013 (PNDS 2008)	FY 2017 (PNDS 2008)
Standards Reviewed	17	16
Deficient Standards	7	3
Overall Number of Deficiencies	7	3
Deficient Priority Components	2	1
Corrective Action	0	1