



**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  
Compliance Inspection

Enforcement and Removal Operations  
ERO El Paso Field Office

West Texas Detention Facility  
Sierra Blanca, Texas

December 7-11, 2020

**COMPLIANCE INSPECTION**  
**of the**  
**WEST TEXAS DETENTION FACILITY**  
Sierra Blanca, Texas

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## COMPLIANCE INSPECTION TEAM MEMBERS

[REDACTED]	Acting Team Lead	ODO
[REDACTED]	Inspections and Compliance Specialist	ODO
[REDACTED]	Inspections and Compliance Specialist	ODO
[REDACTED]	Contractor	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 compliance inspection of the West Texas Detention Facility (WTDF) in Sierra Blanca, Texas, from December 7 to 11, 2020.<sup>1</sup> The facility opened in 2007 and is owned by Hudspeth County and operated by LaSalle Correctional Management. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at WTDF in 2007 under the oversight of ERO's Field Office Director in El Paso (ERO El Paso). The facility operates under the National Detention Standards (NDS) 2019.

ERO has assigned deportation officers to the facility. A warden handles daily facility operations and is supported by █ personnel. LaSalle Correctional Management provides food and commissary services and Preferred Hospital Leasing Van Horn, Inc. provides medical care at the facility. The facility was certified by the Department of Justice Prison Rape Elimination Act in 2019. The facility does not hold any accreditations from any outside entities.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity <sup>2</sup>	450
Average ICE Detainee Population <sup>3</sup>	█
Male Detainee Population (as of 12/11/2020)	0
Female Detainee Population (as of 12/11/2020)	0

During its last inspection, in Fiscal Year (FY) 2018, ODO found 16 deficiencies in the following NDS 2000 standards: Admission and Release (2); Detainee Classification System (2); Food Service (2); Environmental Health and Safety (4); Use of Force (4); and Medical Care (2).

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

<sup>2</sup> Data Source: ERO Facility List Report as of November 30, 2020.

<sup>3</sup> *Ibid.*

## 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 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.

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 their decision-making to better allocate resources across the agency’s entire detention inventory.

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, 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.

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<sup>4</sup> ODO reviews the facility’s compliance with selected standards in their entirety.

## FINDINGS BY NATIONAL DETENTION STANDARDS 2019 MAJOR CATEGORIES

NDS 2019 Standards Inspected <sup>5,6</sup>	Deficiencies
<b>Part 1 – Safety</b>	
Environmental Health and Safety	2
<b>Sub-Total</b>	<b>2</b>
<b>Part 2 – Security</b>	
Admission and Release	0
Custody Classification System	3
Facility Security and Control	0
Funds and Personal Property	3
Use of Force and Restraints	0
Special Management Units	0
Staff-Detainee Communication	1
Sexual Abuse and Assault Prevention and Intervention	1
<b>Sub-Total</b>	<b>8</b>
<b>Part 4 – Care</b>	
Food Service	1
Hunger Strikes	0
Medical Care	1
Significant Self-Harm and Suicide Prevention and Intervention	4
Disability Identification, Assessment, and Accommodation	0
<b>Sub-Total</b>	<b>6</b>
<b>Part 5 – Activities</b>	
Religious Practices	0
Telephone Access	0
<b>Sub-Total</b>	<b>0</b>
<b>Part 6 – Justice</b>	
Grievance System	0
Law Libraries and Legal Materials	0
<b>Sub-Total</b>	<b>0</b>
<b>Total Deficiencies</b>	<b>16</b>

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

<sup>6</sup> 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

In October 2019, the town of Sierra Blanca became involved in a water dispute with a neighboring town which resulted in disruptions to the water supply at WTDF and ERO El Paso immediately removed all ICE detainees from the facility. Since November 2019, ERO El Paso has only utilized the facility to temporarily house new ICE detainees released from United States Marshal Service custody until the detainees are transferred to another facility. As such, no detainees were available for interviews during the week of the inspection.

## COMPLIANCE INSPECTION FINDINGS

### SAFETY

#### ENVIRONMENTAL HEALTH AND SAFETY (EHS)

ODO reviewed the Safety Data Sheets (SDS) master file and found no documentation of hazardous substance reviews (**Deficiency EHS-9<sup>7</sup>**).

ODO reviewed the facility's policy and procedures and found the emergency plans did not include procedures for ensuring detainees with disabilities are kept safe and secure during emergencies (**Deficiency EHS-25<sup>8</sup>**).

### SECURITY

#### CUSTODY CLASSIFICATION SYSTEM (CCS)

ODO found [REDACTED] out of [REDACTED] detainee detention files in which the intake officer did not complete the classification process within 12 hours of admission (**Deficiency CCS-4<sup>9</sup>**).

ODO reviewed [REDACTED] detainee detention files and found none of the files were reviewed by a supervisor for accuracy and completeness (**Deficiency CCS-10<sup>10</sup>**).

ODO reviewed [REDACTED] detainee detention files and found the facility received ERO El Paso's classification level assignment on the Order to Detain (Form I-203), and/or the Record of Persons and Property Transferred (Form I-216); however, ODO confirmed with ERO El Paso there were additional classification documents available that were not provided to the facility (**Deficiency CS-13<sup>11</sup>**).

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<sup>7</sup> "Documentation of reviews will be maintained in the SDS master file." See ICE NDS 2019, Standard, Environmental Health and Safety, Section (II)(A)(2).

<sup>8</sup> "Plans will include procedures for detainees with disabilities to ensure their safety and security during the facility response." See ICE NDS 2019, Standard, Environmental Health and Safety, Section (II)(B).

<sup>9</sup> "The classification system shall ensure:

2. The initial classification process and initial housing assignment should be completed within 12 hours of admission to the facility." See ICE NDS 2019, Standard, Custody Classification System, Section (II)(A)(2).

<sup>10</sup> "A supervisor will review the intake/processing officer's classification file for each detainee for accuracy and completeness." See ICE NDS 2019, Standard, Custody Classification System, Section (II)(B).

<sup>11</sup> "ICE/ERO offices will provide the facility with any information available to ICE to assist the facility in classifying detainees." See ICE NDS 2019, Standard, Custody Classification System, Section (II)(C).

While detainees wear wrist bands to identify their classification level, the facility only has three classification levels: low, medium, and high. However, ICE typically classifies detainees using a four-level system: low, medium-low, medium-high, and high. The facility's classification levels may allow for a low or medium-low detainee to be housed with a medium-high or high detainee, which is an **Area of Concern**.

ODO interviewed the case manager and associate warden, who both stated, contrary to facility policy, a detainee who arrives without a classification assignment from ERO El Paso would default to a high level and be housed with high level detainees, which is an **Area of Concern**.

### **FUNDS AND PERSONAL PROPERTY (FPP)**

ODO reviewed [REDACTED] detainee detention files and found none of the files contained a forwarding address for detainees with personal property (**Deficiency FPP-15<sup>12</sup>**).

ODO reviewed the facility's property inventory logs and found facility staff do not record the date, time, and name of the person conducting the inventory (**Deficiency FPP-20<sup>13</sup>**).

ODO reviewed [REDACTED] detainee release files and found none of the files contained a signed receipt to indicate the detainee received his personal property upon release (**Deficiency FPP-24<sup>14</sup>**).

### **STAFF-DETAINEE COMMUNICATION (SDC)**

ODO found the facility does not update the contact information for ERO El Paso staff quarterly (**Deficiency SDC-23<sup>15</sup>**).

### **SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION (SAAPI)**

ODO reviewed [REDACTED] detainee detention files and found none of the files contained an assessment at intake to identify those likely to be sexual aggressors and/or sexual abuse and assault victims (**Deficiency SAAPI-72<sup>16</sup>**).

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<sup>12</sup> "Standard operating procedures will include obtaining a forwarding address from every detainee who has personal property." See ICE NDS 2019, Standard, Funds and Personal Property, Section (II)(C)(1).

<sup>13</sup> "The facility's logs will indicate the date, time, and name of the officer(s) conducting the inventory." See ICE NDS 2019, Standard, Funds and Personal Property, Section (II)(D)

<sup>14</sup> "After a property check, the detainee will then sign a receipt for the property, indicating his or her receipt of all funds and personal property due him or her." See ICE NDS 2019, Standard, Funds and Personal Property, Section (II)(E)

<sup>15</sup> "The facility shall provide contact information for ICE/ERO and the scheduled hours and days that ICE/ERO staff is available to be contacted by detainees at the facility. Contact information shall be updated quarterly or more frequently as necessary to reflect changes in ICE/ERO personnel." See ICE NDS 2019, Standard, Staff-Detainee Communication, Section (II)(C)(4).

<sup>16</sup> "In accordance with Standards 2.1 "Admission and Release" and 2.2 "Custody Classification System," the facility shall assess all detainees on intake to identify those likely to be sexual aggressors or sexual abuse and assault victims and shall house detainees to prevent sexual abuse and assault, taking necessary steps to mitigate any such danger." See ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(I)(1).



## CARE

### **FOOD SERVICE (FS)**

ODO reviewed the food service menus and found the facility does not have a special common fare menu for the 10 federal holidays (**Deficiency FS-60<sup>17</sup>**).

### **MEDICAL CARE (MC)**

ODO found registered nurses (RNs) were completing dental screenings; however, a dentist does not train the RNs annually to conduct the exam (**Deficiency MC-45<sup>18</sup>**).

### **SIGNIFICANT SELF-HARM AND SUICIDE PREVENTION AND INTERVENTION (SSHSPI)**

ODO reviewed the facility's policy and procedures and found medical staff other than a mental health provider can remove a detainee from constant monitoring (**Deficiency SSHSPI-23<sup>19</sup>**).

ODO found suicidal detainees do not have privacy to shower, perform bodily functions, nor change their clothing because cross-gender staff monitor the suicide rooms via video cameras (**Deficiency SSHSPI-37<sup>20</sup>**).

In addition, ODO found the facility does not have procedures in place to enable detainees on suicide precautions to avoid exposing themselves to cross-gender staff (**Deficiency SSHSPI-38<sup>21</sup>**).

ODO reviewed the facility's policy and procedures and interviewed medical staff and found the facility does not have a preliminary incident report in place in the event of a suicide attempt with the information required by the standard (**Deficiency SSHSPI-47<sup>22</sup>**).

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<sup>17</sup> "The common-fare menu is based on a 14-day cycle, with special menus for the 10 Federal holidays. The menus must be certified as exceeding minimum daily nutritional requirements, meeting or exceeding U.S. recommended daily allowances." See ICE NDS 2019, Standard, Food Service, Section (II)(F)(2).

<sup>18</sup> "If no on-site dentist is available, the initial dental screening may be performed by a physician, physician assistant, nurse practitioner, or registered nurse. Such non-dental clinicians shall be trained annually on how to conduct the exam by a dentist." See ICE NDS 2019, Standard, Medical Care, Section (II)(H).

<sup>19</sup> "Only a mental health provider may remove a detainee from constant monitoring (one-to-one)." See ICE NDS 2019, Standard, Significant Self-Harm and Suicide Prevention and Intervention, Section (II)(F).

<sup>20</sup> "Suicidal detainees shall be allowed to shower, perform bodily functions, and change clothing with as much privacy as possible under the continuous observation of staff, and without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances." See ICE NDS 2019, Standard, Significant Self-Harm and Suicide Prevention and Intervention, Section (II)(I).

<sup>21</sup> "Although staff of the opposite gender may be assigned to suicide precautions, including constant observation, the facility must have procedures in place that enable a detainee on suicide precautions to avoid exposing himself or herself to nonmedical staff of the opposite gender." See ICE NDS 2019, Standard, Significant Self-Harm and Suicide Prevention and Intervention, Section (II)(I).

<sup>22</sup> "The preliminary Incident Report must include detainee name, alien number, relevant medical history/diagnosis, reason for suicide placement (if applicable), date of death, and name and title of person providing information." See ICE NDS 2019, Standard, Significant Self-Harm and Suicide Prevention and Intervention, Section (II)(K).

## CONCLUSION

During this inspection, ODO assessed the facility's compliance with 18 standards under NDS 2019 and found the facility in compliance with 10 of those standards. ODO found 16 deficiencies in the remaining 8 standards. ODO commends facility staff and ERO El Paso for their responsiveness during this inspection. ODO encourages the facility and ERO El Paso to work together to resolve these issues and the other deficiencies identified in this report in accordance with contractual obligations.

<b>Compliance Inspection Results Compared</b>	<b>FY 2018 (NDS 2000)</b>	<b>FY 2021 (NDS 2019)</b>
Standards Reviewed	15	18
Deficient Standards	6	8
Overall Number of Deficiencies	16	16
Repeat Deficiencies	1	0
Areas of Concern	0	2
Corrective Actions	2	0