

**Violations of Detention
Standards at
ICE's Port Isabel Service
Processing Center**





OFFICE OF INSPECTOR GENERAL
Department of Homeland Security

Washington, DC 20528 / www.oig.dhs.gov

February 1, 2023

MEMORANDUM FOR: Tae D. Johnson
Acting Director
U.S. Immigration and Customs Enforcement

FROM: Joseph V. Cuffari, Ph.D. **JOSEPH V
CUFFARI** Digitally signed by
Inspector General JOSEPH V CUFFARI
Date: 2023.02.01
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SUBJECT: *Violations of Detention Standards at ICE's Port Isabel
Service Processing Center*

Attached for your action is our final report, *Violations of Detention Standards at ICE's Port Isabel Service Processing Center*. We incorporated the formal comments provided by your office.

The report contains nine recommendations aimed at improving care of detainees at ICE's Port Isabel Service Processing Center. Your office concurred with eight recommendations and did not concur with one recommendation. We consider one recommendation resolved and closed, seven recommendations resolved and open, and one recommendation unresolved and open. Once your office has fully implemented the remaining recommendations, please submit a formal closeout letter to us within 30 days so that we may close the recommendations. The memorandum should be accompanied by evidence of completion of agreed-upon corrective actions. Please send your response or closure request to OIGISPFollowup@oig.dhs.gov.

Consistent with our responsibility under the *Inspector General Act*, we will provide copies of our report to congressional committees with oversight and appropriation responsibility over the Department of Homeland Security. We will post the report on our website for public dissemination.

Please call me with any questions, or your staff may contact Thomas Kait, Deputy Inspector General for Inspections and Evaluations at (202) 981-6000.

Attachment



DHS OIG HIGHLIGHTS

Violations of Detention Standards at ICE's Port Isabel Service Processing Center

February 1, 2023

Why We Did This Inspection

In accordance with the *Consolidated Appropriations Act, 2021*, we conduct unannounced inspections of ICE detention facilities to ensure compliance with detention standards. In April 2022, we conducted an in-person inspection of the Port Isabel facility in Los Fresnos, Texas, to evaluate compliance with ICE detention standards and COVID-19 requirements.

What We Recommend

We made nine recommendations to improve ICE's oversight of detention facility management and operations at Port Isabel.

For Further Information:

Contact our Office of Public Affairs at (202) 981-6000, or email us at DHS-OIG.OfficePublicAffairs@oig.dhs.gov

What We Found

During our unannounced inspection of U.S. Immigration and Customs Enforcement's (ICE) Port Isabel Service Processing Center (Port Isabel) in Los Fresnos, Texas, we found that Port Isabel complied with standards for the voluntary work program, access to legal services, and medical care for detainees. However, Port Isabel did not meet standards for detainee segregation, and we found unsafe conditions at the building used to house segregated detainees. In the housing units, we identified some concerns, specifically torn bedding and several plumbing issues, that violated standards and posed health and safety risks to detainees. In addition, we found violations of standards related to use of force, requests and grievances, classification documentation, and adherence to COVID-19 protocols. Finally, we noted that Port Isabel did not employ enough medical staff to handle either the facility's contracted guaranteed minimum detainee population or its maximum capacity.

ICE Response

ICE concurred with eight recommendations and did not concur with one recommendation. We consider one recommendation unresolved and open, seven recommendations resolved and open, and one recommendation resolved and closed.



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Abbreviations

ERO	Enforcement and Removal Operations
Port Isabel	Port Isabel Service Processing Center
PRR	<i>Pandemic Response Requirements</i>
ICE	U.S. Immigration and Customs Enforcement
OAFM	Office of Asset and Facilities Management
PBNS	<i>Performance-Based National Detention Standards</i>
SMU	Special Management Unit



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Introduction

U.S. Immigration and Customs Enforcement (ICE) houses detainees at roughly 130 facilities nationwide, and the conditions and practices at those facilities can vary greatly. ICE must comply with detention standards and establish an environment that protects the health, safety, and rights of detainees. Our program of unannounced inspections of ICE detention facilities has identified and helped correct violations of the *Performance-Based National Detention Standards 2011* (PBNDS 2011), revised in 2016, at facilities across the country. From April 26 to April 28, 2022, we conducted an unannounced, in-person inspection of the Port Isabel Service Processing Center (Port Isabel) in Los Fresnos, Texas, and identified concerns regarding detainee care and treatment.

Background

ICE apprehends, detains, and removes noncitizens who are in the United States unlawfully. ICE Enforcement and Removal Operations (ERO) oversees the detention facilities it manages in conjunction with private contractors or state or local governments. Port Isabel, a service processing center, first opened in 1977.¹ The facility is owned by ICE, which also provides onsite management. While ICE provides daily facility operations, the contractor, Ahtna Support and Training Services, LLC, provides food service to the facility, and medical care is provided by ICE Health Service Corps. Between October 1, 2021, and September 19, 2022, Port Isabel had an average daily population of approximately 590 detainees with a maximum capacity of 1,200 and a contracted guaranteed minimum bed space of 800 detainees.

ICE's contract for Port Isabel requires the facility to comply with the PBNDS 2011. According to ICE, the PBNDS 2011 establishes consistent conditions of detention, program operations, and management expectations within ICE's detention system. These standards set requirements in areas such as:

- environmental health and safety, including cleanliness, sanitation, security, detainee searches, segregation,² and disciplinary systems;

¹ A service processing center is owned by ICE, operated by ICE and contract employees, and dedicated to housing only ICE detainees.

² PBNDS 2011, Section 2.12, *Special Management Units* (revised Dec. 2016). Segregation is the process of separating certain detainees from the general population for disciplinary or administrative reasons. Detainees in disciplinary segregation can be held for no more than 30 days per incident, except in extraordinary circumstances. Detainees in disciplinary segregation are allowed out of their cells for 1 hour of recreation time at least 5 days a week. Detainees in administrative segregation can be held until their safety, and the safety of others, is no longer a concern. Detainees in administrative segregation are allowed out of their cells for up to 2 hours of recreation time and day room access each day, 7 days a week. Detainees in



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- detainee care, e.g., food service, medical care, and personal hygiene;
- activities, including visitation and recreation; and
- grievance systems.

As mandated by Congress,³ we conduct unannounced inspections of ICE detention facilities to ensure compliance with detention standards. From April 26 to April 28, 2022, we made an unannounced, in-person inspection of Port Isabel to determine whether it complied with the PBNDS 2011. We also conducted a limited review of the facility's COVID-19 pandemic preparedness measures and its response to COVID-19 outbreaks in the detainee population.⁴ Our onsite inspection team included contracted medical experts to review Port Isabel's compliance with applicable medical standards of care,⁵ and we have incorporated their assessments in our findings. At the start of our inspection, Port Isabel housed a total of 512 male ICE detainees. We conducted a walk-through of Port Isabel facilities, including detainee housing units, medical units, and indoor and outdoor recreation areas. We also interviewed ICE personnel, Port Isabel officials, and detainees.

Results of Inspection

During our unannounced inspection, we found that Port Isabel complied with detention standards for the voluntary work program, access to legal services, and medical care for detainees. We found multiple violations of standards for detainee segregation and unsafe conditions at the building used to house segregated detainees. In the housing units, we identified some concerns, specifically torn bedding and several plumbing issues, that violated standards and posed health and safety risks to detainees. In addition, we found violations of standards related to use of force, requests and grievances, classification documentation, and adherence to COVID-19 protocols. Finally, we noted that Port Isabel did not employ enough medical staff to handle either the facility's contracted guaranteed minimum detainee population or its maximum capacity.

both disciplinary and administrative segregation are also allowed time out of their cells for showers, phone calls, use of the law library, visitation, and religious services when offered.

³ *Consolidated Appropriations Act, 2021*, Pub. L. No. 116-260, Division F; *Department of Homeland Security Appropriations Act, 2021*, H.R. Rep. No. 116-458 (2021).

⁴ Specifically, we reviewed compliance with ICE's *COVID-19 Pandemic Response Requirements*, Version 8.0, Apr. 4, 2022.

⁵ In addition to the PBNDS 2011, our medical contractors used the National Commission on Correctional Health Care's 2018 *Standards for Health Services in Jails*.



Port Isabel Complied with Standards for the Voluntary Work Program, Access to Legal Services, and Medical Care for Detainees

According to the PBNDS 2011, facilities must give detainees the opportunity to voluntarily participate in facility work programs.⁶ Our review of Port Isabel's policies, guidance, and records showed the facility complied with this standard. Port Isabel provided detainees the required information about the program to make an informed decision about program participation. Those who chose to participate received training specific to their work function, and work schedules did not exceed 8 hours per day or 40 hours per week. Detainees received compensation for work completed via deposit into their personal accounts, in accordance with the PBNDS 2011.⁷ The facility's grievance log contained no allegations of detainees being forced to work in the voluntary work program, and we found no credible complaints regarding the work program itself.

The PBNDS 2011 also requires facilities to ensure detainees have access to courts,⁸ counsel,⁹ legal rights groups,¹⁰ legal materials,¹¹ legal telephone calls,¹² and the law library.¹³ The standards outline the requirements for detainee access to legal services, including the procedures for visits by legal representatives and legal telephone calls. Our review of Port Isabel's policies, guidance, and records showed the facility complied with these standards. Specifically, legal visitation occurred in person in private rooms as required or through live video streaming. Legal rights groups visit the facility periodically to give in-person legal rights presentations. Facility staff said that outside groups are allowed to tour the facility but must first receive clearance from the local ICE field office. The facility's law library reopened on May 24, 2022, for all detainees except those in COVID-19 quarantine or special housing units, who receive law library services using a mobile cart.

In addition, our medical contractors found that medical care was compliant with applicable medical standards, which require that detainees have access to appropriate and necessary medical, dental, and mental health care, including emergency services.¹⁴ Specifically, the medical contractors conducted a visual

⁶ PBNDS 2011, Section 5.8, *Voluntary Work Program* (revised Dec. 2016).

⁷ *Id.*

⁸ PBNDS 2011, Section 6.3, *Law Libraries and Legal Material* (revised Dec. 2016).

⁹ PBNDS 2011, Section 5.7, *Visitation* (revised Dec. 2016).

¹⁰ PBNDS 2011, Section 6.4, *Legal Rights Group Presentations* (revised Dec. 2016).

¹¹ PBNDS 2011, Section 6.3, *Law Libraries and Legal Material* (revised Dec. 2016).

¹² PBNDS 2011, Section 5.6, *Telephone Access* (revised Dec. 2016).

¹³ PBNDS 2011, Section 6.3, *Law Libraries and Legal Material* (revised Dec. 2016).

¹⁴ PBNDS 2011, Section 4.3, *Medical Care* (revised Dec. 2016).



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inspection of all areas where medical services were provided and interviewed key medical team members. The medical contractors reviewed 20 health records and found they were appropriately maintained by Port Isabel medical staff. In addition, the medical contractors concluded that the chronic care program provided sufficient and appropriate types of chronic care clinics, the medical facility itself was clean, the pharmacy was well organized and managed, and care was delivered in a timely and appropriate manner. Although the medical contractors found some areas for improvement while reviewing the medical records, they discussed them with facility medical staff and concluded the issues did not rise to the level of reportable standard violations.

Port Isabel's Segregation Unit Was Unsafe, Did Not Provide Required Services, and Inappropriately Handcuffed Detainees

We identified concerns with the condition of the building Port Isabel used to house detainees in segregation. The PBNDS 2011 requires facilities to maintain the highest levels of cleanliness and sanitation, but instead we found the segregation building was unsafe. We also found that detainees housed there were not provided required services and that detainees were being handcuffed on a routine basis, which contradicts standards.

Port Isabel's Segregation Building Was Unsafe

According to the PBNDS 2011, facilities must ensure that staff and detainees maintain a high standard of facility sanitation and general cleanliness.¹⁵ The segregation building was the only housing area at Port Isabel where we found major violations of this requirement. During our visit, half of the building was cordoned off with a sheet of plywood due to previously documented structural integrity issues, and neither detainees nor staff were permitted on that side (see Figure 1).

¹⁵ PBNDS 2011, Section 1.2, *Environmental Health and Safety* (revised Dec. 2016).



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Figure 1. The Cordoned-Off Section of the Segregation Building Separated by a Plywood Barrier, Observed on April 26, 2022

Source: DHS OIG photo

We observed the half of the building that was still being used also had unsafe and unsanitary conditions. For example, we observed an unknown substance leaking from beneath the floor (see Figure 2). We also saw a small utility closet located adjacent to the detainee shower facilities and containing a water heater, plumbing lines, and several electrical cords with half of the tile flooring missing. The exposed subflooring in this section of the closet was wet with a black substance in several areas (see Figures 3 and 4).



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Figure 2



Figure 3



Figure 4

Figures 2 through 4. An Unknown Substance Leaking through the Segregation Building Floor (Figure 2), the Utility Closet Inside the Segregation Building with Missing Tile Flooring and a Black Substance on the Subfloor (Figure 3), and the Other Side of the Utility Closet Containing Plumbing and Electrical Lines (Figure 4), All Observed on the Populated Side of the Segregation Building on April 26, 2022

Source: DHS OIG photos

Finally, we observed structural problems like rust, holes, exposed insulation, and corrosion on foundation crossbeams on the exterior of the building (see Figures 5 and 6). Port Isabel continues to house detainees in the segregation building, despite the unsafe conditions.



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Figure 5



Figure 6

Figures 5 and 6. Rust, Holes, and Exposed Insulation beneath the Segregation Building, Observed on April 28, 2022

Source: Photos taken by ICE in May 2021 and the same conditions observed by the OIG team in April 2022

In May 2021, the ICE Office of Asset and Facilities Management (OAFM) notified ERO that there was significant rust and corrosion to the crossbeams under the Special Management Unit (SMU) trailer and noted that the flooring and stairs to the SMU trailer were also a hazard. OAFM concluded that, “in the interest of personnel and detainee safety, we strongly recommend that the SMU be put off limits to all...” The next month, the ERO Facility Support Unit concurred with OAFM’s findings and recommended the closure of the segregation building until a new structure could be built. However, construction has been delayed by factors beyond the control of Port Isabel management, and Port Isabel has continued to use the non-cordoned half of the building to house segregated detainees.

Port Isabel Did Not Provide Required Services to Detainees in Segregation

The PBNDS 2011 requires that each detainee in segregation be offered individual recreation time¹⁶ and be able to submit requests and grievances to facility staff and ICE as they would otherwise be able to do in the general population.¹⁷ We found that these required services were located in the cordoned-off section of the segregation building, preventing detainee access to them. Specifically, the closed section of the building included the day room area designated for indoor recreation and the drop-boxes that allow detainees

¹⁶ PBNDS 2011, Section 2.12, *Special Management Unit* (revised Dec. 2016).

¹⁷ *Id.*



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to submit paper requests and grievances. Because that area was not accessible, detainees did not have access to television and indoor recreation activities and could not communicate with facility staff and ICE by submitting requests and grievances through paper forms. During our inspection, facility staff relocated the request and grievance boxes to the operational side of the segregation housing unit, allowing detainees to submit requests and grievances, as required.

The PBNDS 2011 also requires that facilities provide segregated detainees access to services such as the general and law libraries and religious programs and maintain detailed records of all activities or actions related to a detainee's segregation in permanent segregation logs.¹⁸ We found that facility segregation logs did not identify whether, or when, the detainee currently in segregation was provided the required services.

Port Isabel Inappropriately Handcuffed Detainees

According to the PBNDS 2011, placement in segregation alone does not constitute a valid basis for using restraints such as handcuffs on detainees.¹⁹ Further, restraints should only be used, if necessary, as a precaution against escape during transfer (e.g., to another facility, court, or hospital), when directed by the medical officer for medical reasons, or to prevent self-injury, injury to others, or serious property damage. During our visit at Port Isabel, we observed guards handcuffing the detainee in segregation for every activity requiring him to be outside of his cell. For example, we observed that guards handcuffed the detainee to move him from his cell in segregation to the interview room where we conducted an interview with him. According to facility staff, all detainees in disciplinary segregation are handcuffed any time they leave their cell and there is no case-by-case justification. Physically restraining all segregated detainees whenever they are outside their cells does not comply with detention standards.

Some Port Isabel Housing Units Were in Poor Condition

We identified concerns with Port Isabel's living conditions, specifically torn bedding and several plumbing issues, including a ceiling leak, broken toilets and sinks, and a leaking urinal. These living conditions not only violated detention standards and detainee rights, but also posed health and safety risks to detainees. When we identified these facility condition deficiencies during our walk-through, Port Isabel staff submitted 15 work order requests. Most of the deficiencies were corrected before completion of our 3-day inspection.

¹⁸ *Id.*

¹⁹ PBNDS 2011, Section 2.15, *Use of Force and Restraints* (revised Dec. 2016).



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Port Isabel Did Not Always Meet Standards for Clean Bedding

According to the PBNDS 2011, detainees must have suitable, clean bedding.²⁰ However, during our site visit, in one housing unit, we observed (and detainees complained about) mattresses in poor condition. Several detainees showed us mattresses with torn and dilapidated pads, as shown in Figures 7 and 8. The condition of the mattresses we observed violated the standard for suitable, clean bedding. By the end of our site visit, facility staff had replaced the torn and dilapidated mattresses with suitable, clean ones from an unoccupied housing unit.

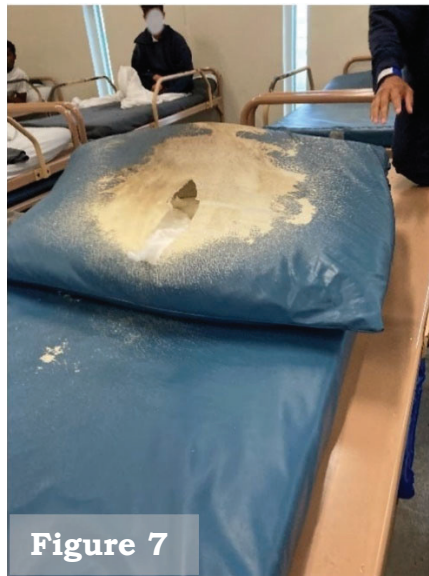


Figure 7



Figure 8

Figures 7 and 8. Torn and Dilapidated Mattresses in a Detainee Housing Unit, Observed on April 26, 2022

Source: DHS OIG photos

Port Isabel Had Several Plumbing Issues in Detainee Housing Units

The PBNDS 2011 requires that facility cleanliness and sanitation be maintained “at the highest level” and meet recognized standards of hygiene, and that facilities establish policies, procedures, and guidelines to ensure environmental health and safety.²¹ We found that housing units did not always have clean and sanitary conditions. In several housing units we found plumbing issues, including clogged toilets, a leaking urinal, and broken sinks, as shown in Figures 9 through 11. After these issues were pointed out to facility staff, almost all were fixed within 72 hours.

²⁰ PBNDS 2011, Section 4.5, *Personal Hygiene* (revised Dec. 2016).

²¹ PBNDS 2011, Section 1.2, *Environmental Health and Safety* (revised Dec. 2016).



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Figure 9



Figure 10



Figure 11

Figures 9 through 11. A Clogged Toilet (Figure 9), Leaking Urinal (Figure 10), and Broken Sink (Figure 11) in Detainee Housing Units, Observed on April 26, 2022

Source: DHS OIG photos

Port Isabel Did Not Properly Identify and Report a Use of Force Incident

The PBNDS 2011 requires facility staff to submit a written incident report to ICE when force is used on any detainee for any reason.²² Port Isabel staff indicated there had been no use of force incidents in the last 6 months. However, we concluded that an incident staff described in the segregation unit in response to a detainee injuring himself qualified as a use of force event. This event should have been documented and reported to ICE, but it was not.

In April 2022, a detainee in disciplinary segregation began hitting his head on the wall repeatedly, causing injury to his head. Two staff members entered the detainee's cell and physically subdued him to prevent him from continuing to injure himself and in preparation to take him to the medical unit. Facility staff members told us that during this event, the detainee threatened to kill himself, and they had to act fast to enter the cell and physically stop him from hitting his head on the wall to prevent serious injury. The staff members handcuffed the detainee and took him to the medical unit. Although staff members told us they felt it was necessary to subdue the detainee by putting their hands on him and using handcuffs, they did not document it as a use of force incident, nor did they report it to ICE. Facility management indicated it normally does not

²² PBNDS 2011, Section 2.15, *Use of Force and Restraints* (revised Dec. 2016).



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document handcuffing a detainee as a use of force. However, facility management acknowledged that personnel subdued and handcuffed the detainee in order to get him to the medical unit and agreed that the incident met the criteria to be a use of force. Facility personnel must properly identify and document their use of force incidents to ensure proper oversight and review.

Port Isabel Generally Responded in a Timely Manner to Requests and Grievances Submitted Electronically but Did Not Allow Written Requests and Grievances

The PBNDS 2011 establishes procedures for detainees to send written requests to facility staff²³ and file grievances regarding any aspect of their detention.²⁴ The standards also require timely responses and documentation for all requests and grievances. We were able to confirm that our selected sample of electronic requests and grievances included timely and substantive responses, as required.

We also found Port Isabel stopped using its paper-based systems for requests and grievances in 2020, although paper-based systems are still required by the standards. Some detainees continued to submit requests and grievances using paper forms, but Port Isabel staff did not log or provide responses to them. We found request and grievance boxes containing completed paper forms that had lingered unaddressed for months and drop-boxes in some housing units were taped shut with completed forms still inside.

Further, Port Isabel staff had recently terminated the electronic submission process for medical grievances because ICE Health Service Corps determined that the electronic system was not secure enough to protect detainees' medical information. Because Port Isabel no longer used its paper-based system, the facility had no formal process for detainees to file medical grievances.

Port Isabel Could Not Produce Accurate Logs for Tablet-Filed Requests or Grievances

The standards require facilities to record all requests and grievances in logbooks and respond to them in a timely manner.²⁵ This is particularly important for grievances, as the PBNDS 2011 allows ICE to audit grievance

²³ PBNDS 2011, Section 2.13, *Staff-Detainee Communication* (revised Dec. 2016).

²⁴ PBNDS 2011, Section 6.2, *Grievance System* (revised Dec. 2016).

²⁵ PBNDS 2011, Section 2.13, *Staff-Detainee Communication* (revised Dec. 2016) and Section 6.2, *Grievance System* (revised Dec. 2016).

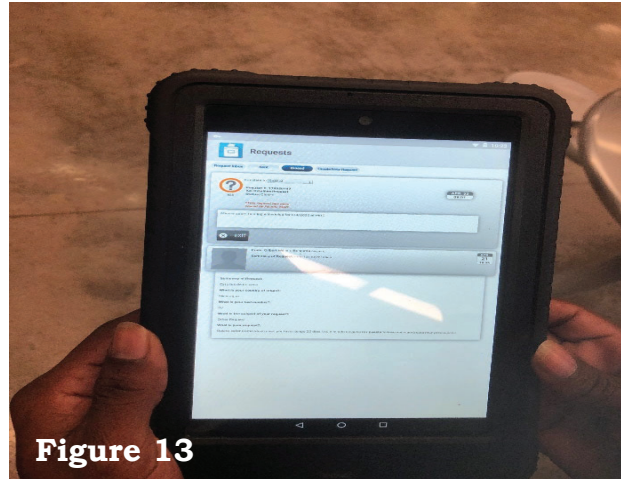
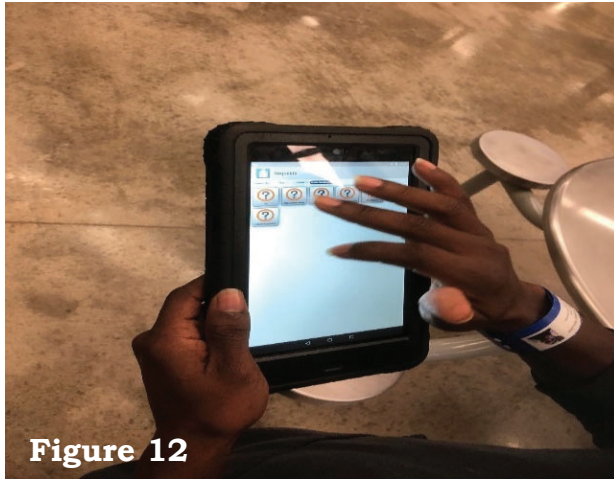


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logs and individual grievances as often as necessary to ensure detainee needs are being addressed.

Detainees at Port Isabel submit requests and grievances to facility staff using electronic tablets in the housing units (see Figures 12 and 13). Requests and grievances are automatically recorded in electronic logs by a third-party vendor.



Figures 12 and 13. A Detainee Demonstrates How to Use an Electronic Tablet to File Requests to the Facility, on April 26, 2022

Source: DHS OIG photos

We sought copies of the electronic logs from Port Isabel for submissions between October 26, 2021, and April 26, 2022. Port Isabel was unable to independently produce the logs; it relied on the third-party vendor to produce them. One month after our request for the logs, the third-party vendor produced a log with 13,040 entries for submitted requests and grievances. However, the log was not complete. For example, the log contained 11,652 entries with recorded response times, leaving 1,388 entries without a recorded response time (see Table 1). The process to obtain and analyze these entries was lengthy and not ideal for oversight. Port Isabel cannot ensure compliance with the standards without being able to readily produce and analyze accurate logs of detainee requests and grievances.



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Table 1. Port Isabel’s Logs of Requests and Grievances Submitted by Detainees between October 26, 2021, and April 26, 2022, Did Not Always Capture Response Times

	Recorded Response Time	No Recorded Response Time	Total
Requests	11,640	1,376	13,016
Grievances	12	12	24
Total	11,652	1,388	13,040

Source: DHS OIG analysis of electronic logs for requests and grievances provided by Port Isabel’s third-party vendor

Port Isabel’s Responses to Detainee Requests and Grievances Filed Electronically Were Generally Timely and Substantive

Port Isabel staff were generally timely in responding to detainee requests within the required 3 business days²⁶ and grievances within the required 5 days,²⁷ if they were filed electronically by detainees via the tablets in their housing units. The responses were also substantive. Between October 26, 2021, and April 26, 2022, for 11,640 electronically filed requests with recorded response times, staff responded late to only 30 electronically filed requests (or roughly 0.3 percent), with just 13 of those requests taking 10 business days or longer to receive a response. The longest response time was 21 business days.

We also chose a random sample from the 1,388 entries for requests and grievances that did not record a response time and asked Port Isabel to provide us the details of those entries. Through our analysis of the additional information Port Isabel provided, we later determined those requests and grievances received timely and substantive responses. Finally, we examined whether Port Isabel responded substantively to requests by examining the 186 requests electronically submitted during our 3-day visit, April 26–28, 2022. We found that staff responded substantively to all but three requests, for which additional action may have been appropriate.

For the 24 grievances filed electronically between October 26, 2021, and April 26, 2022, all staff responses were timely, but three grievances did not receive an appropriate staff response and were closed out without investigative action. Detainees rely on prompt responses to satisfy their detention-related

²⁶ PBNDS 2011, Section 2.13, *Staff-Detainee Communication* (revised Dec. 2016).

²⁷ PBNDS 2011, Section 6.2, *Grievance System* (revised Dec. 2016).



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needs and complaints, and Port Isabel generally gave prompt and thorough responses.

Port Isabel Stopped Using its Paper System for Requests and Grievances Even Though Standards Require Paper Forms

The PBNDS 2011 mandates allowing detainees to submit requests²⁸ and grievances²⁹ to facilities using paper forms. However, Port Isabel staff members said they no longer used the paper system and had sealed shut several of the collection boxes for requests and grievances with tape and a “NOT IN USE” sign (see Figure 14). The facility has used only its electronic system since 2020.

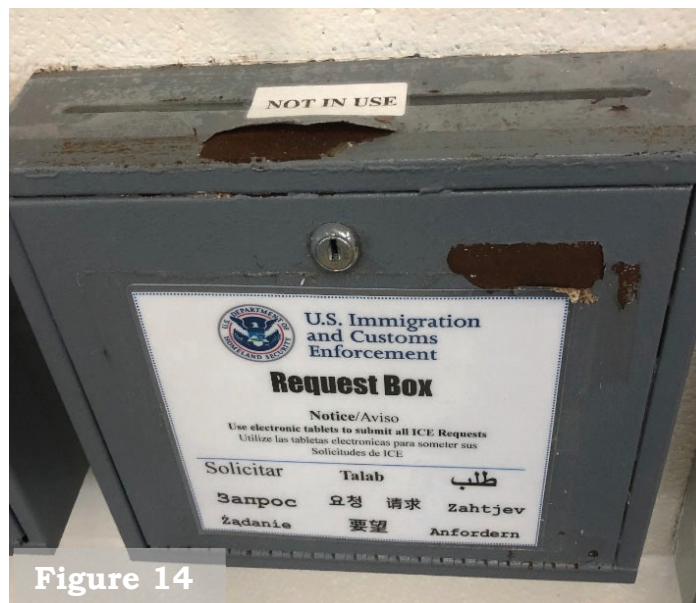


Figure 14

Figure 14. A Request Collection Box in a Housing Unit, Sealed Shut with a “NOT IN USE” Sign, Observed on April 28, 2022

Source: DHS OIG photo

Furthermore, some of the sealed collection boxes appeared to have completed requests inside, while other boxes were not sealed but also still had forms inside (see Figures 15 and 16).

²⁸ PBNDS 2011, Section 2.13, *Staff-Detainee Communication* (revised Dec. 2016).

²⁹ PBNDS 2011, Section 6.2, *Grievance System* (revised Dec. 2016).



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Figure 15



Figure 16

Figures 15 and 16. A Request Collection Box, Sealed Shut (Figure 15), and a Grievance Collection Box, Not Sealed Shut (Figure 16), Both with Forms Visible Inside, Observed on April 28, 2022

Source: DHS OIG photos

Specifically, we found paper request and grievance forms left in boxes in six of the nine housing units we visited. Facility staff opened some of the sealed boxes in the presence of our team, and inside were two requests from June 2021 and one grievance from October 2021. Facility staff members told us they had not checked the collection boxes for quite some time and had not kept a log of paper-based requests or grievances since 2020. To comply with standards, facilities need to provide the required paper-based systems for submitting requests and grievances for detainees who do not wish to use electronic tablets.

Port Isabel Did Not Have a System for Medical Grievances

The PBNDS 2011 requires facilities to provide detainees with a system to file grievances related to medical care.³⁰ In January 2022, ICE Health Service Corps determined that detainees should not use tablets to file medical grievances because the system was not secure enough to protect detainees' private medical information. Instead, staff members instructed detainees to file medical grievances using the paper forms intended for filing facility grievances or to sign up for a medical appointment and present their medical grievances during the sick call. However, because Port Isabel no longer used the paper-based system for submitting medical grievances specifically, detainees had no way of filing them and could only use sick calls to complain about their medical care. Accordingly, the facility has not received any medical grievances since it

³⁰ PBNDS 2011, Section 6.2, *Grievance System* (revised Dec. 2016).



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ceased allowing detainees to electronically file medical grievances. Port Isabel must provide a medical grievance system that complies with the standard and allows detainees to raise concerns about the medical care they receive.

Port Isabel Did Not Document All Required Information in Detainee Files during the Classification Process

The PBNDS 2011 requires the initial classification process and initial housing assignment to be completed within 12 hours of a detainee's admission to a facility.³¹ Of the 50 detainee files our team reviewed, all were classified correctly, but we could not verify that facility staff was completing initial classification and housing assignments within 12 hours. Although facility staff members time-stamped admission documentation, they did not time-stamp classification forms, making it impossible to calculate the amount of time elapsed between admission and classification. After our onsite inspection, Port Isabel staff members told us they were changing their policy to reflect the practice of signing, dating, and time-stamping the Primary Assessment Form for intake classification. This will allow facility staff and ICE to confirm that detainees are being classified and housed within 12 hours of admission.

Port Isabel Took Measures to Prevent the Spread of COVID-19, but Did Not Consistently Enforce Mask Wearing and Social Distancing Guidelines

We conducted a limited review of Port Isabel's response to COVID-19 and identified areas for improvement. The facility restricted services and social activities and required staff and detainees to wear masks if not maintaining a distance of 6 feet from each other, but we observed inconsistent mask wearing and social distancing.

In March 2020, ICE directed all detention facilities, including Port Isabel, to restrict certain activities in response to the COVID-19 pandemic.³² In addition to mask wearing and social distancing, this included restricting in-person social and legal visits. Religious services were also discontinued during the pandemic. Currently, ICE's *Pandemic Response Requirements* (PRR) continue to provide guidance to ICE detention facility operators in "sustaining detention operations while mitigating risk to the safety and wellbeing of detainees, staff, contractors, visitors, and stakeholders due to COVID-19."³³

³¹ PBNDS 2011, Section 2.2, *Custody Classification System* (revised Dec. 2016).

³² *Memorandum on Coronavirus Disease 2019 (COVID-19) Action Plan*, Revision I, Mar. 27, 2020.

³³ ICE, *COVID-19 Pandemic Response Requirements*, Version 8.0, Apr. 4, 2022. The April 4, 2022, COVID-19 Pandemic Response Requirements have been superseded and ICE ERO currently follows PRR Version 10.0, Nov. 1, 2022.



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During our inspection, Port Isabel required staff and detainees to wear masks when not maintaining a distance of 6 feet from each other. Facility staff told us detainees were required to wear masks any time they exited the housing units and when they approached other detainees or staff. In addition, staff were required to wear masks when working near detainees. However, during our April 2022 walk-through of multiple housing units, we observed numerous detainees and staff members not wearing masks when in close proximity to each other, and not practicing social distancing. The facility risks unnecessary COVID-19 exposure by not enforcing requirements for staff and detainees to wear masks and practice social distancing.

In addition to mask and social distancing precautions, the facility restricted services and social activities to comply with PRR requirements. To compensate for reduced visitation hours, Port Isabel provided each detainee with 13 free 10-minute telephone calls, 4 times per month, for a total of 520 free minutes. These restrictions were in place during our site visit; as of September 12, 2022, only in-person legal visitation had resumed.

Port Isabel also has a vaccination program in place for detainees. According to data provided by facility officials, Port Isabel medical staff administered 2,634 COVID-19 vaccine doses to detainees between May 12, 2021, and April 26, 2022. The COVID-19 vaccine is readily available to detainees, but vaccination is not required.

Port Isabel Did Not Have Medical Staff Required to Accommodate Either its Contracted Minimum Population or its Maximum Capacity

During the inspection, our medical contractors concluded that Port Isabel employed enough medical staff to ensure the current population of 512 detainees had access to appropriate and necessary medical, dental, and mental health care, as required by the PBNDS 2011. However, they cautioned that if Port Isabel increases to the contractual guaranteed minimum of 800 detainees or to its maximum capacity of 1,200 detainees, the facility is at risk of not meeting the PBNDS 2011 standard for medical care.



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Recommendations

We recommend the Executive Associate Director of Enforcement and Removal Operations direct the Harlingen ERO Field Office responsible for Port Isabel to:

Recommendation 1: Discontinue use of the building housing the segregation unit.

Recommendation 2: Ensure compliance with segregation standards, including having a basis for use of restraints and providing access to recreation, library, mail, and religious services.

Recommendation 3: Ensure all unaddressed facility conditions that we identified as deficient (torn bedding and plumbing issues) are corrected.

Recommendation 4: Ensure facility staff are aware of what criteria constitute a use of force event and reinforce the practice of documenting and reviewing such events.

Recommendation 5: Ensure paper forms for facility requests are available, collected, logged, and responded to within 3 business days of receipt.

Recommendation 6: Ensure paper forms for facility and medical grievances are available, collected, logged, and responded to by staff within 5 working days of receipt, where practicable.

Recommendation 7: Ensure electronic request and grievance logs are available for inspection, as required.

Recommendation 8: Ensure classification records document the date and time detainees are classified, as required.

Recommendation 9: Ensure compliance with ICE's current COVID-19 requirements for wearing masks and social distancing.



Management Comments and OIG Analysis

ICE concurred with eight recommendations and did not concur with one recommendation. Appendix B contains ICE's management comments in their entirety. We also received technical comments on the draft report and made revisions as appropriate. We consider one recommendation resolved and closed, seven recommendations resolved and open, and one recommendation unresolved and open.

A summary of ICE's response to our recommendations and our analysis follows.

Recommendation 1: Discontinue use of the building housing the segregation unit.

ICE Response to Recommendation 1: Non-concur. A new SMU building is under construction.

In the interim, steps were taken to ensure safety in the current building. In February 2022, the then existing Port Isabel SMU was inspected by ICE's Office of Asset and Facilities Management (OAFM). As a result, the following actions were recommended and implemented in March 2022 to ensure the safety of staff and occupants, on a temporary basis, until the new SMU building is constructed:

- The entrance stairway was rendered safe for use by shoring up the structure and closing the ramp;
- The interior, left side, was cordoned off due to the flooring being structurally unsound; and
- The right side was inspected and found structurally sound for use.

OAFM will continue to inspect the existing SMU on a monthly basis and perform any emergent repairs to ensure it remains safe to occupy until the new SMU is completed.

ICE requests that the OIG consider this recommendation resolved and closed as implemented.

OIG Analysis: We acknowledge the efforts ICE has taken to make the building housing the segregation unit safer. However, the actions noted in ICE's management response were completed in March 2022, prior to our visit to the facility (April 2022). Therefore, the dilapidated conditions observed during our visit included the OAFM's improvements, and our recommendation to



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discontinue use of the building remains open. This recommendation will remain open and unresolved until the new building is completed and in use.

Recommendation 2: Ensure compliance with segregation standards, including having a basis for use of restraints and providing access to recreation, library, mail, and religious services.

ICE Response to Recommendation 2: Concur. The use of restraints for detainees in SMU was addressed and corrected by facility staff. Specifically, in December 2022, at the direction of field office management, the facility revised local policies to indicate that placement in SMU does not constitute a valid basis for the use of restraints while in segregation or during movement around the facility. Accordingly, restraints will only be used, if necessary, as a precaution against escape during transfer, for medical reasons when directed by the medical staff or to prevent self-injury, injury to others, or serious property damage.

In addition, Port Isabel will provide recreation, law and leisure library, and mail and religious services to detainees placed in SMU according to the PBNDS 2011 requirements. Port Isabel security staff will also maintain records of all services provided to detainees in SMU, and any discrepancies will be immediately reported to the security supervisor. ICE provided OIG documentation corroborating these efforts under a separate cover on December 13, 2022.

ICE requests that OIG consider this recommendation resolved and closed as implemented.

OIG Analysis: We consider these actions partially responsive to the recommendation, which is resolved and open. The December 2022 updates to Port Isabel Detention Center Policy 3.4.1, *Special Management*, satisfy the recommendation to ensure compliance with the segregation standards requiring a basis for use of restraints. We will close this recommendation once ICE provides examples of records of all services being provided to detainees in SMU.

Recommendation 3: Ensure all unaddressed facility conditions that we identified as deficient (torn bedding and plumbing issues) are corrected.

ICE Response to Recommendation 3: Concur. On April 26–27, 2022, Port Isabel addressed plumbing issues in the housing units that were identified in OIG’s unannounced inspection. Accordingly, all plumbing issues (work orders: 54718, 54759, 54760, 54814, 54815, 54818, 54821, 54822, and 54944) were corrected within the inspection period. In addition, on September 15, 2022,



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unserviceable mattresses were identified, replaced, and excessed. ICE provided OIG documentation corroborating these efforts under a separate cover on December 13, 2022.

ICE requests that OIG consider this recommendation resolved and closed as implemented.

OIG Analysis: We consider these actions partially responsive to the recommendation, which is resolved and open. We will close this recommendation once ICE provides documentation showing that work orders 54774, 54773, and 54772 are complete. In addition, ICE provided documentation that work order 54818, a water leak in the ceiling in pod 2, was complete. However, the documentation shows that the work order was marked complete because it was a duplicate of work order 54837. ICE needs to provide documentation showing that work order 54837 is complete as well as evidence that unserviceable mattresses were identified, replaced, and excessed.

Recommendation 4: Ensure facility staff are aware of what criteria constitute a use of force event and reinforce the practice of documenting and reviewing such events.

ICE Response to Recommendation 4: Concur. ICE agrees with the importance of immediate supervisors ensuring that facility staff are reminded of existing protocols related to the use of force procedural guidelines. Accordingly, communication will be sent out by ERO field office management to further remind the facility staff of the criteria that constitute a use of force event and the procedures needed to properly document the event. Additionally, facility staff attend annual refresher training on proper use of force techniques and report writing in accordance with the PBNDS 2011. Estimated Completion Date (ECD): January 31, 2023.

OIG Analysis: We consider these actions responsive to the recommendation, which is resolved and open. We will close this recommendation when ICE provides documentation showing that communication was sent by ERO field office management and evidence of the annual refresher training.

Recommendation 5: Ensure paper forms for facility requests are available, collected, logged, and responded to within 3 business days of receipt.

ICE Response to Recommendation 5: Concur. During the OIG's inspection period, Port Isabel field office staff replenished all existing paper racks in all housing units with request forms. Furthermore, the ERO field office management reminded deportation officers to maintain and respond to all ICE request forms within 3 business days, in accordance with the PBNDS 2011.



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ICE provided OIG documentation corroborating these efforts under a separate cover on December 19, 2022.

ICE requests that OIG consider this recommendation resolved and closed as implemented.

OIG Analysis: We consider these actions partially responsive to the recommendation, which is resolved and open. ICE provided photographic evidence that it replenished paper request forms in housing units. ICE needs to provide the most recent full month of detainee requests including dates received and dates of response.

Recommendation 6: Ensure paper forms for facility and medical grievances are available, collected, logged, and responded to by staff within 5 working days of receipt, where practicable.

ICE Response to Recommendation 6: Concur. During the OIG's inspection period, Port Isabel field office staff replenished all existing paper racks in all housing units with grievance forms. Furthermore, the Port Isabel deportation officers were reminded to maintain and respond to all grievance forms within 5 days, in accordance with the PBNDS 2011. ICE provided OIG documentation corroborating these efforts under a separate cover on December 19, 2022.

ICE requests that OIG consider this recommendation resolved and closed as implemented.

OIG Analysis: We consider these actions partially responsive to the recommendation, which is resolved and open. ICE provided photographic evidence that it replenished paper grievance forms in housing units. ICE needs to provide the most recent full month of detainee grievances including dates received and dates of response.

Recommendation 7: Ensure electronic request and grievance logs are available for inspection, as required.

ICE Response to Recommendation 7: Concur. The Port Isabel deportation officer responsible for the electronic request and grievance logs was reminded to ensure all logs are maintained and readily available for inspections. Moving forward, Port Isabel will ensure compliance with the standards by readily producing and analyzing logs of detainee requests and grievances. ECD: February 28, 2023.



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OIG Analysis: We consider these actions responsive to the recommendation, which is resolved and open. We will close this recommendation when ICE provides evidence of its production of detainee request and grievance logs.

Recommendation 8: Ensure classification records document the date and time detainees are classified, as required.

ICE Response to Recommendation 8: Concur. During the OIG's inspection period, the classification supervisor was notified to properly document the time and date on ICE Custody Classification Worksheets and intake paperwork, as well as to place a copy within the detention file. In March 2022, ERO field office management also revised the policy, Port Isabel Detention Center Policy 4.2.2, *Classification*, to reflect the practice of signing, dating, and time-stamping the Primary Assessment Form for intake classification. ICE provided DHS OIG documentation corroborating these efforts under a separate cover on December 13, 2022.

ICE requests that OIG consider this recommendation resolved and closed as implemented.

OIG Analysis: The OIG closely reviewed the Port Isabel Detention Center Policy 4.2.2, *Classification*, revised March 2022, referenced and provided in ICE's response. We determined that it does not reflect the practice of signing, dating, and time-stamping the Primary Assessment Form for intake classification. We consider these actions partially responsive to the recommendation, which is resolved and open. We will close this recommendation when ICE provides evidence that it is recording the time that detainees are classified.

Recommendation 9: Ensure compliance with ICE's current COVID-19 requirements for wearing masks and social distancing.

ICE Response to Recommendation 9: Concur. The Port Isabel Detention Center adheres to the ERO *Pandemic Response Requirements*, dated November 1, 2022, and the Centers for Disease Control and Prevention's *Interim Guidance on Management of COVID-19 in Correctional and Detention Facilities* to continuously protect detainees at the lowest practicable risk of exposure to COVID-19. For example, flyers/posters in multiple languages have been posted in all housing units and common areas of the detention facility providing information on COVID-19 procedures and hand washing techniques. In addition, social distancing and mask wearing procedures are emphasized to all facility staff during daily briefings prior to assuming their post. ERO officers also instruct detainees on the importance of wearing a face mask while in, and out of, their living space.



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Further, throughout the facility, including the main gate and front lobby entrance, there are COVID-19 preventative measures and COVID-19 signage. The facility is continuously adapting and making timely changes to operating procedures to mitigate the spread of COVID-19. ICE provided OIG documentation corroborating these efforts under a separate cover on December 13, 2022.

ICE requests that OIG consider this recommendation resolved and closed as implemented.

OIG Analysis: We consider these actions responsive to the recommendation, which is resolved and closed. ICE provided evidence of the flyers it has posted in the facility that instruct staff and detainees to follow current Centers for Disease Control and Prevention guidelines on COVID-19.



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Appendix A

Objective, Scope, and Methodology

The Department of Homeland Security Office of Inspector General was established by the *Homeland Security Act of 2002* (Public Law 107-296) by amendment to the *Inspector General Act of 1978*.

DHS OIG initiated this inspection at Congress' direction. DHS OIG analyzes various factors to determine which facilities to inspect. We review OIG Hotline complaints and prior inspection reports, and past and future inspection schedules. We also consider requests, input, and information from Congress, the DHS Office of Civil Rights and Civil Liberties, non-governmental organizations, and media outlets to determine which facilities may pose the greatest risks to the health and safety of detainees. Finally, to ensure we review facilities with both large and small detainee populations in geographically diverse locations, we consider facility type (e.g., service processing centers, contract detention facilities, and intergovernmental service agreement facilities) and applicable PBNDS.

We generally limited our scope to the PBNDS 2011 for health, safety, medical care, mental health care, requests and grievances, classification, searches, use of segregation, use of force, and staff training. However, as noted in this report, our medical contractors also used the National Commission on Correctional Health Care's 2018 *Standards for Health Services in Jails* when reviewing medical related policies and procedures at the facility. Finally, we conducted a limited review of facility compliance with COVID-19 requirements.

Prior to our inspection, we reviewed relevant background information, including:

- OIG Hotline complaints
- PBNDS 2011
- ICE Office of Detention Oversight reports
- Information from nongovernmental organizations

We conducted our unannounced in-person inspection of Port Isabel from April 26 through April 28, 2022. During the inspection, we:

- Conducted an in-person walk-through of the facility. We viewed areas used by detainees, including intake processing areas; residential areas, including sleeping, showering, and toilet facilities; legal services areas, including law libraries; and recreational facilities.



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- Reviewed the facility's compliance with key health, safety, and welfare requirements of the PBNDS 2011 for classification, segregation, voluntary work program, access to legal services, access to medical care and mental health care, and medical and nonmedical grievances.
- Reviewed the facility's compliance with COVID-19 protocols, per the PRR.
- Interviewed ICE and detention facility staff members, including key ICE operational and detention facility oversight staff and detention facility medical, segregation, classification, grievance, and compliance officers.
- Interviewed detainees held at the detention facility to evaluate compliance with PBNDS 2011 grievance procedures and resolution.
- Reviewed documentary evidence, including medical files, and grievance and communication logs and files.

We contracted with a team of qualified medical professionals to conduct a comprehensive evaluation of detainee medical care at the Port Isabel facility. We incorporated information provided by the medical contractors in our findings.

We conducted this review under the authority of the *Inspector General Act of 1978, as amended*, and according to the *Quality Standards for Inspection and Evaluation* issued by the Council of the Inspectors General on Integrity and Efficiency.



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Appendix B
ICE Comments on the Draft Report

Office of the Director

U.S. Department of Homeland Security
500 12th Street SW
Washington, DC 20536



**U.S. Immigration
and Customs
Enforcement**

December 22, 2022

MEMORANDUM FOR: Joseph V. Cuffari, Ph.D.
Inspector General
Department of Homeland Security

FROM: Deborah Fleischaker DEBORAH T
Acting Chief of Staff FLEISCHAKER Digitally signed by DEBORAH T
U.S. Immigration and Customs Enforcement FLEISCHAKER Date: 2022.12.23 07:37:30 -05'00'

SUBJECT: Management Response to Draft Report: “Violations of
Detention Standards at ICE’s Port Isabel Service Processing
Center” (Project No. 21-005-ISP-ICE(e))

Thank you for the opportunity to comment on this draft report. The Department of Homeland Security, U.S. Immigration and Customs Enforcement (ICE) appreciates the work of the Office of Inspector General (OIG) in planning and conducting its review and issuing this report.

ICE leadership is pleased to note that the OIG found the ICE Port Isabel Processing Center (Port Isabel) in compliance with detention standards for access to the voluntary work program, legal services, and medical care for detainees. In addition, the OIG found that ICE took proactive steps to protect individuals in custody and prevent the spread of COVID-19 by modifying services and social activities, as well as requiring staff and detainees to wear masks if not maintaining a distance of six feet from each other. This exemplifies ICE’s commitment to the safety and well-being of noncitizens.

Accordingly, noncitizens at Port Isabel are provided with information on the importance of maintaining safe distancing, wearing a mask, proper handwashing, and personal hygiene as it relates to the prevention of COVID-19. Furthermore, as required by the *ICE Enforcement and Removal Operations (ERO) COVID-19 Pandemic Response Requirements*, (PRR) version 10.0, dated November 1, 2022¹, ICE implemented protocols and testing procedures for COVID-19 in alignment with the Centers for Disease Control and Prevention (CDC) *Interim Guidance on Management of COVID-19 in Correctional and Detention Facilities*². ICE remains committed to

¹ <https://www.ice.gov/doclib/coronavirus/eroCOVID19responseReqsCleanFacilities.pdf>

² <https://stacks.cdc.gov/view/cdc/107037>

www.ice.gov



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Management Response to Draft Report: "Violations of Detention Standards at ICE's Port Isabel Service Processing Center" (Project No. 21-005-ISP-ICE(e))

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ensuring that noncitizens in its custody reside in safe, secure, and humane environments and under appropriate conditions of confinement.

The draft report contained nine recommendations, including one with which ICE non-concurs (Recommendation 1) and eight with which ICE concurs (Recommendations 2 through 9). Enclosed please find our detailed response to each recommendation. ICE previously submitted technical comments addressing several accuracy, contextual, and other issues under a separate cover for OIG's consideration, as appropriate.

Again, thank you for the opportunity to review and comment on this draft report. Please feel free to contact me if you have any questions. We look forward to working with you again in the future.

Enclosure



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U.S. Immigration and Customs Enforcement Response to Department of Homeland Security Office of Inspector General Recommendations Contained in Draft Report, *Violations of Detention Standards at ICE's Port Isabel Service Processing Center, (21-005-ISP-ICE(e))*

The Department of Homeland Security Office of Inspector General (DHS OIG) recommends the U.S. Immigration and Customs Enforcement (ICE) Executive Associate Director of Enforcement and Removal Operations (ERO) direct the Harlingen ERO Field Office responsible for Port Isabel apply the following recommendations:

Recommendation 1: Discontinue use of the building housing the segregation unit.

Non-concur. A new Special Management Unit (SMU) building is under construction. In the interim, steps were taken to ensure safety in the current building. In February 2022, the then existing Port Isabel SMU was inspected by the ICE Office of Asset and Facilities Management Facilities Management (OAFM). As a result, the following actions were recommended and implemented in March 2022 to ensure the safety of staff and occupants, on a temporary basis, until the new SMU building is constructed:

- (1) The entrance stairway was rendered safe for use by shoring up the structure and closing the ramp;
- (2) The interior, left side, was cordoned off due to the flooring being structurally unsound; and
- (3) The right side was inspected and found structurally sound for use.

OAFM will continue to inspect the existing SMU on a monthly basis and perform any emergent repairs to ensure it remains safe to occupy until the new SMU is completed.

ICE requests the DHS OIG consider recommendation resolved and closed as implemented.

Recommendation 2: Ensure compliance with segregation standards, including having a basis for use of restraints and providing access to recreation, library, mail, and religious services.

Concur. The use of restraints for detainees in SMU was addressed and corrected by facility staff. Specifically, in December 2022, at the direction of field office management, the facility revised local policies to indicate that placement in SMU does not constitute a valid basis for the use of restraints while in segregation, or during movement around the facility. Accordingly, restraints will only be used, if necessary, as a precaution against escape during transfer, for medical reasons when directed by the medical staff or to prevent self-injury, injury to others, or serious property damage.

In addition, Port Isabel will provide recreation, law and leisure library, mail and religious services to detainees placed in SMU according to ICE Performance-Based National Detention Standards 2011 (*revised* 2016) (2011 PBNDS) requirements. Port Isabel security staff will also



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U.S. Immigration and Customs Enforcement Response to Department of Homeland Security Office of Inspector General Recommendations Contained in Draft Report, *Violations of Detention Standards at ICE's Port Isabel Service Processing Center*, (21-005-ISP-ICE(e))
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maintain records of all services provided to detainees in SMU, and any discrepancies will be immediately reported to the security supervisor. ICE provided DHS OIG with documentation corroborating these efforts under a separate cover on December 13, 2022.

ICE requests the DHS OIG consider this recommendation resolved and closed as implemented.

Recommendation 3: Ensure all unaddressed facility conditions that we identified as deficient (torn bedding and plumbing issues) are corrected.

Concur. On April 26-27, 2022, Port Isabel Detention Center addressed plumbing issues in the housing units that were identified in the unannounced OIG's inspection. Accordingly, all plumbing issues (work orders: 54718, 54759, 54760, 54814, 54815, 54818, 54821, 54822 and 54944) were corrected within the inspection period. In addition, on September 15, 2022, unserviceable mattresses were identified, replaced, and excessed. ICE provided DHS OIG with documentation corroborating these efforts under a separate cover on December 13, 2022.

ICE requests the OIG consider this recommendation resolved and closed as implemented.

Recommendation 4: Ensure facility staff are aware of what criteria constitute a use of force event and reinforce the practice of documenting and reviewing such events.

Concur. ICE agrees with the importance of immediate supervisors ensuring that facility staff are reminded of existing protocols related to the use of force procedural guidelines. Accordingly, communication will be sent out by ERO Field Office Management to further remind the facility staff of the criteria that constitute a use of force event, and the procedures needed to properly document the event. Additionally, facility staff attend annual refresher training on proper use of force techniques and report writing in accordance with the 2011 PBNDS. Estimated Completion Date (ECD): January 31, 2023.

Recommendation 5: Ensure paper forms for facility requests are available, collected, logged, and responded to within 3 business days of receipt.

Concur. During the DHS OIG's inspection period, Port Isabel Field Office staff replenished all existing paper racks in all housing units with request forms. Furthermore, the ERO Field Office Management reminded Deportation Officers to maintain and respond to all ICE Request Forms within three business days, in accordance with 2011 PBNDS. ICE provided the DHS OIG documentation corroborating these efforts under a separate cover on December 19, 2022.

ICE requests DHS OIG consider this recommendation resolved and closed as implemented.



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U.S. Immigration and Customs Enforcement Response to Department of Homeland Security Office of Inspector General Recommendations Contained in Draft Report, *Violations of Detention Standards at ICE's Port Isabel Service Processing Center*, (21-005-ISP-ICE(e))
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Recommendation 6: Ensure paper forms for facility and medical grievances are available, collected, logged, and responded to by staff within 5 working days of receipt, where practicable.

Concur. During the DHS OIG's inspection period, Port Isabel Field Office staff replenished all existing paper racks in all housing units with grievance forms. Furthermore, the Port Isabel Detention Center Deportation Officers were reminded to maintain and respond to all Grievance Forms within five days, in accordance with 2011 PBNDS. ICE provided the DHS OIG documentation corroborating these efforts under a separate cover on December 19, 2022.

ICE requests the OIG consider this recommendation resolved and closed as implemented.

Recommendation 7: Ensure electronic request and grievance logs are available for inspection, as required.

Concur. The Port Isabel Detention Center Deportation Officer responsible for the electronic request and grievance logs was reminded to ensure all logs are maintained and readily available for inspections. Moving forward, Port Isabel will ensure compliance with the standards by readily producing and analyzing logs of detainee requests and grievances. ECD: February 28, 2023.

Recommendation 8: Ensure classification records document the date and time detainees are classified, as required.

Concur. During the DHS OIG's inspection period, the classification supervisor was notified to properly document the time and date on ICE Custody Classification Worksheets and intake paperwork, as well as to place a copy within the detention file. In March 2022, ERO field office management also revised the policy to reflect the practice of signing, dating, and time-stamping the Primary Assessment Form for intake classification. ICE provided DHS OIG with documentation corroborating these efforts under a separate cover on December 13, 2022.

ICE requests the DHS OIG consider this recommendation resolved and closed as implemented.

Recommendation 9: Ensure compliance with ICE's COVID-19 requirements for wearing masks and social distancing.

Concur. The Port Isabel Detention Center adheres to the ERO Pandemic Response Requirements (PRR), dated November 1, 2022, and "CDC Interim Guidance on Management of COVID-19 in Correctional and Detention Facilities," to continuously protect detainees at the lowest practicable risk of exposure to COVID-19. For example, flyers/posters in multiple languages have been posted in all housing units and common areas of the detention facility providing information on COVID-19 procedures and hand washing techniques. In addition, social-distancing and mask wearing procedures are emphasized to all facility staff during daily briefings prior to assuming



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U.S. Immigration and Customs Enforcement Response to Department of Homeland Security Office of Inspector General Recommendations Contained in Draft Report, *Violations of Detention Standards at ICE's Port Isabel Service Processing Center*, (21-005-ISP-ICE(e))
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their post. ERO Officers also instruct detainees on the importance of wearing a face mask while in, and out, of their living space.

Further, throughout the facility, including the Main Gate and front Lobby entrance, there are COVID-19 preventative measures and COVID-19 signage. The facility is continuously adapting and making timely changes to operating procedures to mitigate the spread of the COVID-19 virus. ICE provided the OIG documentation corroborating these efforts under a separate cover on December 13, 2022.

ICE requests DHS OIG consider this recommendation resolved and closed as implemented.



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Department of Homeland Security

Appendix C
Office of Inspections and Evaluations Major Contributors to
This Report

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Stephanie Christian, Lead Inspector
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Appendix D
Report Distribution

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