

Office of Professional Responsibility

Laredo Processing Center Inspection 2024-002-396

September 10-12, 2024



U.S. Immigration
and Customs
Enforcement



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

**Office of Detention Oversight
Follow-Up Compliance Inspection
2024-002-396**

**Enforcement and Removal Operations
ERO Harlingen Field Office**

**Laredo Processing Center
Laredo, Texas**

September 10-12, 2024

FOLLOW-UP COMPLIANCE INSPECTION
of the
LAREDO PROCESSING CENTER
Laredo, Texas

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FOLLOW-UP COMPLIANCE INSPECTION TEAM MEMBERS



Team Lead	ODO
Senior Inspections and Compliance Specialist	ODO
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FACILITY OVERVIEW

The U.S. Immigration and Customs Enforcement (ICE) Office of Professional Responsibility (OPR) Office of Detention Oversight (ODO) conducted a follow-up compliance inspection of the Laredo Processing Center (LPC) in Laredo, Texas, from September 10 to 12, 2024.¹ This inspection focused on the standards found deficient during ODO’s last inspection of LPC from March 19 to 21, 2024. The facility opened in 1985 and is owned and operated by CoreCivic. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at LPC in 1983 under the oversight of ERO’s Field Office Director in Harlingen (ERO Harlingen). The facility operates under the National Detention Standards (NDS) 2019.

[REDACTED]

[REDACTED] A warden handles daily facility operations and manages [REDACTED] support personnel. Trinity Services provides food services, Clinical Solutions provides medical care, and Keefe Supply Company provides commissary services at the facility. The facility does not hold any accreditations from any outside entities. In February 2022, LPC was audited for the Department of Homeland Security (DHS) Prison Rape Elimination Act (PREA) and was DHS PREA certified.

Capacity and Population Statistics	Quantity
ICE Bed Capacity ²	[REDACTED]
Average ICE Population ³	[REDACTED]
Adult Male Population (as of September 10, 2024)	[REDACTED]
Adult Female Population (as of September 10, 2024)	[REDACTED]

During its last rated inspection, in Fiscal Year (FY) 2024, ODO found 3 deficiencies in the following areas: Facility Security and Control (1); Post Orders (1); and Significant Self-Harm and Suicide Prevention and Intervention (1).

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

² Data Source: ERO Custody Management Division Authorized Facility List as of September 9, 2024.

³ *Ibid.*

FOLLOW-UP COMPLIANCE INSPECTION PROCESS

ODO conducts biannual oversight inspections of ICE detention facilities with an average daily population (ADP) of 10 or more detainees, and where detainees are housed for longer than 72-hours, to assess compliance with ICE National Detention Standards. In FY 2021, to meet congressional requirements, ODO began conducting follow-up inspections at all over-72-hour ICE detention facilities with an ADP of 10 or more detainees that ODO conducted a full inspection of earlier in the FY. Follow-up inspections focus on facility compliance with detention standards that directly affect detainee life, health, safety, and/or well-being, and other standards ODO found deficient during the previous rated inspection to assess the facility's corrective actions taken to address those previously cited deficiencies.⁴

ODO identifies violations of ICE detention standards, ICE policies, or operational procedures, as "deficiencies." ODO highlights instances when 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.

While follow-up inspections are intended to focus on previously identified deficiencies, ODO will conduct a complete review of several core standards, which include but are not limited to Medical Care, Hunger Strikes, Suicide Prevention, Food Service, Environmental Health and Safety, Emergency Plans, Use of Force and Restraints/Use of Physical Control Measures and Restraints, Admission and Release, Classification, and Funds and Personal Property. ODO may decide to conduct a second full inspection of a facility in the same FY based on additional information obtained prior to ODO's arrival on-site. Factors ODO will consider when deciding to conduct a second full inspection will include the total number of deficiencies cited during the first inspection, the number of deficient standards found during the first inspection, the completion status of the first inspection's uniform corrective action plan (UCAP), and other information ODO obtains from internal and external sources ahead of the follow-up compliance inspection. Conditions found during the inspection may also lead ODO to assess new areas and identify new deficiencies or areas of concern should facility practices run contrary to ICE standards. Any areas found non-compliant during both the full and follow-up inspection are annotated as "Repeat Deficiencies" in this report.

⁴ ODO reviews the facility's compliance with selected standards in their entirety.

FINDINGS BY NATIONAL DETENTION STANDARDS 2019 MAJOR CATEGORIES

NDS 2019 Standards Inspected ^{5,6}	Deficiencies
Part 1 - Safety	
Environmental Health and Safety	0
Sub-Total	0
Part 2 - Security	
Admission and Release	0
Custody Classification System	0
Facility Security and Control	0
Funds and Personal Property	0
Post Orders	0
Use of Force and Restraints	0
Special Management Units	1
Staff-Detainee Communication	0
Sub-Total	1
Part 4 - Care	
Food Service	0
Hunger Strikes	0
Medical Care	0
Significant Self-Harm and Suicide Prevention and Intervention	0
Sub-Total	0
Part 5 - Activities	
Recreation	2
Telephone Access	0
Sub-Total	2
Part 6 - Justice	
Grievance System	1
Sub-Total	1
Total Deficiencies	4

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

⁶ Beginning in FY 2024, ODO instituted a process of rotating all standards every other year. As a result, some standards may not be present in all inspections.

DETAINEE RELATIONS

ODO interviewed 27 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. Most detainees reported satisfaction with facility services except for the concern listed below.

Personal Hygiene: One detainee stated she received stained undergarments upon arrival to the facility.

- Action Taken: ODO toured the facility's laundry and supply room, reviewed the facility's personal hygiene policy, and interviewed a facility lieutenant. The facility lieutenant stated all clothing items are cleaned and laundered before issuance to detainees, laundry staff are trained to discard laundered undergarments that show evidence of stains or damage, and the facility is currently in the procurement process of transitioning from white undergarments to brown. ODO examined the clean laundry inventory and observed one undergarment with brown stains and one with visible tears, and facility staff discarded both before they could be distributed to detainees. The facility lieutenant reiterated to laundry staff the requirement to discard any visibly stained or damaged undergarments after laundering. At the request of ODO, the facility lieutenant followed-up with the detainee and ensured the detainee did not have any stained or damaged undergarments.

FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

SECURITY

SPECIAL MANAGEMENT UNITS (SMU)

ODO reviewed 20 SMU log entries and found in 13 out of 20 entries, no signature of the facility officer who recorded the detainee's SMU activities (**Deficiency SMU-66**⁷).

ACTIVITIES

RECREATION (R)

ODO interviewed the facility administrator (FA), reviewed the detention file of an SMU detainee denied recreation privileges, and found no FA written authorization for the detainee's denial of recreation (**Deficiency R-17**⁸).

ODO interviewed the recreation supervisor, reviewed one SMU detainee detention file, and found

⁷ "The special housing unit officer shall immediately record: ...

1) The officer that conducts the activity shall print his or her name and sign the record."

See ICE NDS 2019, Standard, Special Management Unit, Section (II)(D)(2)(a)(3).

⁸ "A detainee may be denied recreation privileges only with the facility administrator's written authorization." See ICE NDS 2019, Standard, Recreation, Section (II)(D)(1).

the facility did not provide the detainee with written notification of their suspended recreation privileges, the reason for suspension, conditions for recreation restoration, nor the duration of the suspension (**Deficiency R-18**⁹).

JUSTICE

GRIEVANCE SYSTEM (GS)

ODO interviewed the grievance officer, reviewed one detainee grievance containing an allegation of staff misconduct, and found the facility did not forward the grievance to ERO Harlingen (**Deficiency GS-29**¹⁰). **This is a priority component.**

CONCLUSION

During this inspection, ODO assessed the facility’s compliance with 16 standards under NDS 2019 and found the facility in compliance with 13 of those standards. ODO found four deficiencies in the remaining three standards. Since LPC’s last rated inspection in March 2024, the facility has remained consistent in its compliance with the NDS 2019. LPC went from three deficient standards and three deficiencies in March 2024 to three deficient standards and four deficiencies during this follow-up compliance inspection. LPC completed its UCAP for its last inspection in March 2024, which likely resolved the previous deficiencies ODO cited. ODO recommends ERO Harlingen continue to work with the facility to resolve the remaining deficiencies in accordance with its contractual obligations.

Compliance Inspection Results Compared	FY 2024 Full Inspection (NDS 2019)	FY 2024 Follow-Up Inspection (NDS 2019)
Standards Reviewed	24	16
Deficient Standards	3	3
Overall Number of Deficiencies	3	4
Priority Component Deficiencies	0	1
Repeat Deficiencies	0	0
Areas Of Concern	0	0
Corrective Actions	0	0
Facility Rating	Superior	N/A

⁹ “The facility shall provide the detainee with written notification of the suspension of recreation privileges, the reason for the suspension, any conditions that must be met before restoration of privileges, and the duration of the suspension (assuming the requisite conditions are met).” *See* ICE NDS 2019, Standard, Recreation, Section (II)(D)(2).

¹⁰ “The facility must forward all detainee grievances containing allegations of staff misconduct to ICE/ERO.” *See* ICE NDS 2019, Standard, Grievance System, Section (II)(F).



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