



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
2024-002-373**

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

**Montgomery ICE Processing Center
Conroe, Texas**

May 14-16, 2024

FOLLOW-UP COMPLIANCE INSPECTION
of the
MONTGOMERY ICE PROCESSING CENTER
Conroe, Texas

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FOLLOW-UP COMPLIANCE INSPECTION TEAM MEMBERS



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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 Montgomery ICE Processing Center (MIPC) in Conroe, Texas, from May 14 to 16, 2024.¹ This inspection focused on the standards found deficient during ODO’s last inspection of MIPC from December 5 to 7, 2023. The facility opened in 2018 and is owned and operated by The Geo Group, Inc. (GEO). The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at MIPC in 2018 under the oversight of ERO’s Field Office Director in Houston (ERO Houston). The facility operates under the Performance-Based National Detention Standards (PBNDS) 2011 (Revised 2016).

[REDACTED] A facility administrator handles daily operations and manages [REDACTED] support personnel. GEO provides food services, ICE Health Service Corps provides medical care, and Keefe Commissary provides commissary services at the facility. The facility was accredited by the American Correctional Association in November 2020, and the National Commission on Correctional Health Care in December 2023. In November 2022, MIPC 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 May 14, 2024)	[REDACTED]
Adult Female Population (as of May 14, 2024)	[REDACTED]

During its last rated inspection, in Fiscal Year (FY) 2024, ODO found 10 deficiencies in the following areas: Environmental Health and Safety (4); Food Service (2); Medical Care (3); 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 May 20, 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 PERFORMANCE-BASED NATIONAL DETENTION STANDARDS 2011 (REVISED 2016) MAJOR CATEGORIES

PBNDS 2011 (Revised 2016) Standards Inspected ^{5,6}	Deficiencies
Part 1 - Safety	
Emergency Plans	0
Environmental Health and Safety	0
Sub-Total	0
Part 2 - Security	
Admission and Release	0
Custody Classification System	0
Facility Security and Control	1
Funds and Personal Property	0
Special Management Units	0
Staff-Detainee Communication	0
Use of Force and Restraints	0
Sub-Total	1
Part 4 - Care	
Food Service	0
Hunger Strikes	0
Medical Care	2
Medical Care (Women)	0
Personal Hygiene	0
Significant Self-harm and Suicide Prevention and Intervention	0
Sub-Total	2
Part 5 - Activities	
Recreation	0
Telephone Access	0
Sub-Total	0
Part 6 - Justice	
Grievance System	0
Sub-Total	0
Total Deficiencies	3

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 26 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination and mistreatment; however, two detainees alleged sexual abuse by staff and another detainee. ODO followed-up with ERO Houston staff to ensure proper reporting of the allegations. Most detainees reported satisfaction with facility services except for the concerns listed below.

Sexual Abuse and Assault Prevention and Intervention: One detainee stated an MIPC officer inappropriately touched his lower backside during transfer from the housing unit.

- Action Taken: On May 16, 2024, ODO interviewed a detainee who stated an MIPC officer touched his lower backside during transfer from his housing unit for disciplinary reasons. The detainee stated the incident occurred on approximately April 23, 2024, but he did not report it to the MIPC Sexual Abuse and Assault Prevention and Intervention (SAAPI) coordinator. ODO reported the information to the facility administrator and the ERO Houston acting AFOD. MIPC medical, mental health, and classification staff examined and cleared the detainee to return to general housing. The detainee could not provide MIPC with the name of the staff member who touched his lower backside. MIPC started a SAAPI investigation and reported the incident to ERO Houston. ERO Houston submitted the ICE Sexual Abuse and Assault Reporting Worksheet to the ERO sexual assault unit, and the sexual assault unit determined the incident did not involve sexual abuse and assault.

Sexual Abuse and Assault Prevention and Intervention: One detainee stated another detainee intentionally reached out for her breast.

- Action Taken: On May 14, 2024, ODO interviewed a detainee who stated another detainee touched her breast. The detainee stated the incident happened in March 2024. ODO reported the information to the facility administrator and the ERO Houston acting AFOD. MIPC medical, mental health, and classification staff examined and cleared the detainee to return to her housing unit. Facility staff escorted the alleged assailant to MIPC medical, mental health, and classification staff for evaluation and transferred him to another housing unit. MIPC started a SAAPI investigation and reported the incident to ERO Houston. ERO Houston submitted the ICE Sexual Abuse and Assault Reporting Worksheet to the ERO sexual assault unit, and the sexual assault unit determined the incident did not involve sexual abuse and assault.

FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

SECURITY

FACILITY SECURITY AND CONTROL (FSC)

ODO reviewed the MIPC visitor logbook and found in 13 out of 32 entries, staff did not record the required vehicle information in the appropriate columns (**Deficiency FSC-59⁷**).

CARE

MEDICAL CARE (MC)

ODO reviewed 1 detainee's medical record, interviewed the acting health services administrator (HSA) and acting assistant HSA, and found medical staff did not administer 5 prescribed multi-drug, anti-tuberculous therapy medications using directly observed therapy in accordance guidelines on April 20, 21, and 22, 2024 (**Deficiency MC-38⁸**).

ODO reviewed medical records for 6 detainees, interviewed the acting HSA and acting assistant HSA, and found for 1 out of 6 detainees, MIPC medical staff did not administer 5 prescribed daily medications to a detainee on April 20, 21, and 22, 2024 (**Deficiency MC-209⁹**).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 18 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 16 of those standards. ODO found three deficiencies in the remaining two standards. Since MIPC's last full inspection in December 2023, the facility has trended upward. MIPC went from 4 deficient standards and 10 deficiencies in December 2023 to 2 deficient standards and 3 deficiencies during this most recent inspection. ODO received the UCAP for MIPC in December 2023, which likely resolved deficiencies found during ODO's last full inspection. ODO recommends ERO Houston continue to work with the facility to resolve the deficiencies that remain outstanding in accordance with contractual obligations.

⁷ "The post officer shall log the following information regarding every vehicle: tag number, driver's name, firm represented, purpose of the visit, (e.g., repairs, delivery, etc.), vehicle contents, date, time in, time out and facility employee responsible for the vehicle on-site." See ICE PBNDS 2011 (Revised 2016), Standard, Facility Security and Control, Section (V)(C)(2)(b).

⁸ "When treatment is indicated, multi-drug, anti-TB therapy shall be administered using directly observed therapy (DOT) in accordance with American Thoracic Society (ATS) and CDC guidelines." See ICE PBNDS 2011 (Revised 2016), Standard, Medical Care, Section (V)(C)(2).

⁹ "All prescribed medications and medically necessary treatments shall be provided to detainees on schedule and without interruption, absent exigent circumstances." See ICE PBNDS 2011 (Revised 2016), Standard, Medical Care, Section (V)(U)(4).

Compliance Inspection Results Compared	FY 2024 Full Inspection (PBNDS 2011) (Revised 2016)	FY 2024 Follow-Up Inspection (PBNDS 2011) (Revised 2016)
Standards Reviewed	29	18
Deficient Standards	4	2
Overall Number of Deficiencies	10	3
Priority Component Deficiencies	1	0
Repeat Deficiencies	0	0
Areas Of Concern	0	0
Corrective Actions	0	0
Facility Rating	Good	N/A