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Exhibit 1

IN THE UNITED STATES DISTRICT COURT FOR THE SOUTHERN DISTRICT OF MISSISSIPPI

JUANA GONZALES MORALES, et al.,

Petitioners

v.

SHAWN GILLIS, et al.,

Case No. 5:20-CV-00181-DCB-MTP

Respondents

DECLARATION OF ROBERT HAGAN

I, Robert Hagan, hereby declare under penalty of perjury that the foregoing is true and correct.

- 1. I am employed by U.S. Department of Homeland Security, Immigration and Customs Enforcement (ICE), Enforcement and Removal Operations (ERO), and currently serve as an Acting Assistant Field Office Director. I have held this position since March 4, 2020. I have been employed by ICE since June 22, 1997. In this capacity, I manage several aspects of the immigration enforcement process, including the identification and arrest, transportation, detention, case management, and removal of aliens. In this capacity, I manage ERO personnel and provide oversight over a number of detention facilities within the New Orleans Field Office, including the Adams County Detention Center (ACDC), in Natchez, Mississippi.
- 2. This declaration is based upon knowledge and information obtained from various records and systems maintained by DHS in the regular course of business. I provide this declaration based on the best of my knowledge, information, belief, and reasonable inquiry for the above captioned case.
- 3. ICE is charged with removing aliens who lack lawful immigration status in the United States. Detention is an important and necessary part of immigration enforcement. ICE detains people to secure their presence both for immigration proceedings and their

removal, with a special focus on those who represent a risk to public safety, or for whom detention is mandatory by law.

- 4. As an Acting AFOD, my primary responsibilities include supervising Supervisory Detention and Deportation Officers and other detention and deportation staff who are responsible for the review and tracking of aliens' removal proceedings and detention placements, detainee communication management for those at the ACDC and general oversight at the ACDC, including monitoring of adherence to the ICE Performance-Based National Detention Standards. I provide oversight of the Medical Case Management Unit to which the Field Medical Coordinators (FMCs) report. The FMCs serve as medical consultants to the ICE field offices and oversee clinical services at Inter-Governmental Service Agreement (ISGA) facilities that house ICE detainees, including the ACDC.
- 5. The ACDC is a private correctional center operated by CoreCivic (CC). CC is an independent contractor that provides the facility, management, and personnel and services for 24-hour supervision of the detainees at ACDC.
- 6. Conditions of detention at the ACDC are governed by the ICE Performance-Based National Detention Standards 2011, revised 2016 (PBNDS). The PBNDS reflects ICE's ongoing effort to tailor the conditions of civil immigration detention to its unique purpose while maintaining a safe and secure detention environment for detainees and staff.
- 7. ICE Health Service Corps (IHSC) provides direct medical, dental, and mental health patient care to approximately 13,500 detainees housed as 20 IHSC-staffed facilities throughout the nation.
- 8. IHSC's FMCs ensure that the provision of medical care by contractors to the ICE detainees within the IGSA facilities meets detention standards, as required by the IGSA contract. The FMCs do not provide hands-on care or direct care within the IGSAs but monitor the medical care and services provided by the contract facilities. Medical staff at the contract facilities are directly responsible for medical care at the facility.
- 9. IHSC comprises a multidisciplinary workforce that consists of U.S. Public Health Service Commissioned Corps (USPHS) officers, federal civil servants, and contract health professionals.
- 10. ICE has maintained a pandemic workforce protection plan since February 2014, which was last updated in May 2017. This plan provides specific guidance for biological threats such as COVID-19. ICE instituted applicable parts of the plan in January 2020 upon the discovery of the potential threat of COVID-19. In January 2020, the DHS Workforce Safety and Health Division provided DHS components additional guidance to address assumed risks and interim workplace controls. This includes the use of N95 masks, available respirators, and additional personal protective equipment (PPE). In addition, in March 2020, IHSC issued the *IHSC Interim Recommendations for Risk*

Assessment of Persons with Potential 2019-Novel Coronavirus (COVID-19) Exposure in Travel-, Community-, Custody Settings.

- 11. The ACDC is inspected regularly by the proper governing authorities and has passed all inspections which include: the Office of Detention Oversight (ODO) conducted and passed with excellence on July 6-9, 2020, CoreCivic Corporate Quarterly Audit conducted and passed September 28-29, 2020, Nakamoto Uniform Corrective Action Plans (UCAP) and Quality of Medical Care (QMC) conducted and passed with excellence on November 19-21, 2019 with an upcoming inspection scheduled for November 2020, American Correctional Standards Audit (ACA) conducted and passed with 100% compliance on July 5, 2019, with an upcoming inspection scheduled for October 2020, and was certified by the National Commission on Correctional Health Care on January 15, 2020.
- 12. The ACDC has the capacity to house 2,300 detainees. The ACDC houses only ICE detainees. As of September 30, 2020, there are 797 ICE detainees housed at the facility. The ACDC maintains populations well within its approved capacities and is not overcrowded.
- 13. There is daily monitoring of the population percentage at each housing unit. The goal is to facilitate social distancing, as much as practicable.
- 14. All detainees are encouraged to stay 6 feet apart. All benches and seating are marked with red Xs to indicate where detainees should not sit to ensure proper distances are maintained.
- 15. The ACDC has reduced the number of detainees that are called to the dining hall in controlled groups to maintain social distancing.
- 16. Security staff monitors detainee movement to ensure detainees don't crowd around telephones and communal tables or stand too close while waiting in line for any activity.
- 17. CDC and ICE posters are displayed throughout the housing units and common areas that explain social distancing, hygiene practices, and general information on COVID-19. See Attached COVID-19 flyer.
- 18. COVID-19 education is provided to all detainees through instructional videos delivered to personal tablets and postings in the detainees' housing units. Posters and communications are delivered in multiple languages consistent with the various languages of the detainees in custody at the time.
- 19. Since the onset of reports of Coronavirus Disease 2019 (COVID-19), ICE epidemiologists have been tracking the outbreak, regularly updating infection

prevention and control protocols, and issuing guidance to field staff on screening and management of potential exposure among detainees.¹

- 20. In testing for COVID-19, ACDC medical staff is also following guidance issued by the Centers for Disease Control and Prevention (CDC) to safeguard those in ICE custody and care.
- On April 10, 2020, ICE ERO released its ERO COVID-19 Pandemic Response 21. Requirements (PRR), a guidance document that builds upon previously issued guidance and sets forth specific mandatory requirements expected to be adopted by all detention facilities housing ICE detainees, as well as best practices for such facilities, to ensure that detainees are appropriately housed and that available mitigation measures are implemented during this pandemic.² On June 22, 2020, ICE ERO released a revised version of the PRR, which expanded the list of COVID-19 symptoms; identified additional vulnerable populations potentially at higher risk for serious illness from COVID-19; provided that if single isolations rooms are unavailable, individuals with confirmed COVID-19 should be isolated together as a cohort separate from other detainees, including those with pending test results and that suspected or confirmed COVID-19 cases maintain separation of groups by common criteria; and added facility compliance measures and updated visitation protocols. On July 28, 2020, ICE released a newly revised version of the PRR, which identifies additional populations potentially at higher risk for serious illness from COVID-19; provides updated guidance on personal protective equipment (PPE); updated guidance on hygiene practices; offers additional guidance when transporting a detainee with confirmed or suspected cases of COVID-19; includes direct reference to CDC guidance for individuals in medical isolation in detention facilities; and includes an updated testing section based on recently released CDC guidance. On September 4, 2020, ICE released a newly revised version of the PRR, which updates the list of COVID-19 symptoms recognized by the CDC; provides additional guidance on protocols for asymptomatic staff who have been identified as close contacts of a confirmed COVID-19 case; clarifies that whenever possible, ICE will limit transfers of both Ice detainees and non-ICE detained populations to and from other jurisdictions and facilities unless necessary for medical evaluation, medical isolation/quarantine, clinical care, extenuating security concerns, to facilitate release or removal, or to prevent overcrowding; updates isolation protocols for COVID-19 cases to incorporate the latest CDC guidance on discontinuing transmission-based precautions using symptom-based strategy rather than a testingbased strategy; and provides additional information on testing for asymptomatic individuals with known or suspected recent exposure.

¹Specifically, ICE closely follows the CDC's *Interim Guidance on Management of Coronavirus 2019 (COVID-19) in Correctional and Detention Facilities* at <u>https://www.cdc.gov/coronavirus/2019-ncov/community/correction-</u> <u>detention/guidance-correctional-detention.html</u>, and its general public guidance at <u>https://www.cdc.gov/coronavirus/2019-ncov/index.html</u>.

²https://www.ice.gov/doclib/coronavirus/eroCOVID19responseReqsCleanFacilities.pdf.

- 22. Each detainee is screened for disabilities upon admission by a medical professional. Identified disabilities are further evaluated and reasonable accommodations are provided as medically appropriate.
- 23. On September 3, 2020, all detainees at the ACDC were tested for COVID-19. Since that time, all newly admitted detainees at the ACDC, are tested for COVID-19 during intake medical screenings and are cohorted for 14 days. The facility usually receives results in an average of 2-7 days.
- 24. Detainees who present symptoms compatible with COVID-19 will be placed in isolation as addressed in paragraphs 24-25, and they will be tested for COVID-19. If testing positive, they will remain isolated and treated. In case of any clinical deterioration, they will be referred to a local hospital.
- 25. At the ACDC, all detainees are placed in cohorts with restricted movement for the duration of the most recent incubation period (14 days after most recent exposure) and are monitored daily for fever and symptoms of respiratory illness. Cohorting is an infection-prevention strategy which involves housing detainees together who were exposed to a person with an infectious organism but are asymptomatic. As identified in the PRR, a cohort is a group of persons with a similar condition grouped or housed together for observation over a period of time. Given the significant variance in facility attributes and characteristics, cohorting options and capabilities will differ across the various detention facilities housing ICE detainees.
- 26. In the ACDC, cohorting is achieved in the following manners:
 - The ACDC has identified housing units for the quarantine of patients who are suspected of or test positive for COVID-19 infection.
 - If a detainee exhibits symptoms suspicious of COVID-19, the detainee is place in single cell isolation pending test results. Suspected or confirmed cases remain in isolation for a period of 14 days after the detainee is symptom-free. After the 14-day period of being symptom-free, the detainee is housed in a separate housing unit designed for detainees that have completed their isolation period, instead of the general population.
 - Full PPE is required by all staff entering housing units where suspected COVID-19 cases are housed. Further, only limited staff can enter areas where individuals have had or are suspected to have COVID-19 are housed.
 - Detainees having tested positive, are isolated until they have achieved 72 consecutive hours without fever-reducing medication, symptoms have improved, and two tests are returned as negative at least 24 hours apart.
- 27. The ACDC has the following medical capabilities:
 - The ACDC, which houses both males and females, provides daily access to sick calls in a clinical setting, six medical holding cells, two negative pressure

observation rooms, a medical clinic and access to specialty services and hospital care.

- 28. As of 12 p.m. on September 30, 2020, IHSC has the following information:
 - a. There are eight confirmed cases of COVID-19 among the detainees at ACDC. All eight detainees are receiving treatment by medical professionals at the ACDC consistent with CDC guidelines. Each detainee is housed in a single-cell isolation pod in a separate housing unit from general population housing units.
 - None of the petitioners are housed in the same housing unit as any of the confirmed cases.
 - All eight of the confirmed cases at the ACDC were discovered during intake. The detainees have been in isolation since entering the facility.
 - b. There are no suspected cases of COVID-19 among the remaining detainees at ACDC.
 - c. Only three housing units at the ACDC have ever experienced any positive COVID-19 diagnoses, and those units have been quarantined since the first detainee became symptomatic.
- 29. The ACDC has increased sanitation frequency and provide sanitation supplies as follows:
 - The ACDC provides hand sanitizer, disinfectant sprays and wipes, soap, gloves, masks to staff and detainees. Appropriate personal protective equipment (PPE), such as gowns, gloves, masks, face shields, are provided for use as medically appropriate. All staff are required to wear masks while in the facility. The administration is encouraging both staff and the facility general population to use these tools often and liberally.
 - In addition to bleach, the ACDC uses a chemical, HDQ, known to kill the COVID-19 virus.
 - The ACDC has increased the frequency of sanitation through the frequent disinfection of high touch surfaces; the dining hall and recreation yard are sanitized after each pod moves through; and there are increased number of sanitation workers across the facility.
 - Masks are issued to the detainees and staff three times per week. Each detainee and staff member have been trained on proper use of masks and are required to wear them. Each detainees and staff member are trained on proper use of masks.
 - Each detainee is provided with shampoo/bodywash, tissue paper, and other hygiene products twice weekly. Additional hygiene products are furnished upon request.

- There have been no shortage of supplies and facility inventory levels are monitored to assure adequate supplies are readily available for future use.
- CC has implemented intensified cleaning of surfaces and objects that are frequently touched, especially common areas including telecommunication devices, telephones and adjoining areas, etc.
- Living areas are sanitized within every hour and more frequently during high traffic times.
- 30. The ACDC has suspended all non-legal visits to the facility. This includes suspension of all in-person social visitation and facility tours. The limited legal professional visits are noncontact and require gloves, masks and eye protection to be worn at all times.
- 31. The ACDC is screening all staff and vendors when they enter the facilities including body temperatures and travel history.
- 32. The ACDC is screening all detainee intakes when they enter the facilities including travel histories, medical histories and checking body temperatures and have procedures to continue monitoring the populations' health.
- 33. The ACDC provides education on COVID-19 to staff and detainees to include the importance of hand washing and hand hygiene, covering coughs with the elbow instead of with hands, and requesting to seek medical care if they feel ill. The facilities provide detainees daily access to sick call.
- 34. ICE reviews its detained population of people who are "at higher risk for severe illness," as identified by the CDC,³ to determine if detention remains appropriate, considering the detainee's health, public safety and mandatory detention requirements, and adjusted custody conditions, when appropriate, to protect health, safety and well-being of its detainees. ICE also reviews all medical lists for chronic care detainees who may be at higher risk.

Executed this 1st day of October, 2020, at Natchez, Mississippi.

Robert Hagan ⁷ Acting Assistant Field Office Director Department of Homeland Security U.S. Immigration and Customs Enforcement

³ See <u>https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/groups-at-higher-risk.html</u>. The CDC includes in this list all individuals age 65 or older. ICE expanded this to include all detainees age 60 or older.

COVID-19

VIRUS INFORMATION FOR DETAIMED INDIVIDUALS

ICE is monitoring COVID-19 and continues to follow the Centers for Disease Control and Prevention (CDC) guidelines, including:

- Screening all new detainees who arrive at facilities for symptoms and risk of exposure to COVID.
- Housing separately and monitoring detainees with symptoms for a period of 14 days.
- ICE personnel and facility staff who have been exposed to the virus are instructed to report exposure and to practice selfquarantine protocols per CDC guidance.
- ICE will continue to share information on COVID-19 cases in your facility and post it on the ICE website as it becomes available.

WHAT CAN YOU DO?

If you feel ill or have reason to believe you have been exposed to someone with COVID-19, you are encouraged to submit a medical request form as soon as possible.

WASH HANDS

If additional hygiene supplies are needed, complete a Detainee Request Form. LÁVESE LAS MANOS

Si se necesitan suministros de higiene adicionales, rellene un Formulario de Solicitud de Detenido.

SOCIAL DISTANCING

Visitation with family members has been suspended temporarily at all detention facilities to mitigate the potential transmission of COVID-19, however ICE is taking steps to facilitate communication with families via extended access to telephones and tablets, where available. You can submit a Detainee Request Form for extended access to telephones/tablets.

DISTANCIAMIENTO SOCIAL

Las visitas con los miembros de la familia se han suspendido temporalmente en todos los centros de detención para mitigar la posible transmisión de COVID-19, sin embargo, el ICE está tomando medidas para facilitar la comunicación con las familias a través de ampliación de acceso a teléfonos y tabletas, cuando estén disponibles. Puede enviar un Formulario de Solicitud de Detenido para ampliación de acceso a teléfonos/tabletas.

QUESTIONS ABOUT ATTORNEY VISITATION?

Non-contact legal visitation (e.g. Skype or teleconference) will be encouraged as a first option to limit the facility's exposure to COVID-19. If an in-person legal visit is required, all legal visitors will be required to provide and wear personal protective equipment (PPE) (e.g., gloves, N-95 masks, and eye protection) and undergo the same medical screening procedures as facility staff members. If you need to speak with your attorney, you can submit a Detainee Request Form.

¿PREGUNTAS SOBRE LA VISITA DEL ABOGADO?

Se fomentarán las visitas de ámbito legal sin contacto (por ejemplo, Skype o teleconferencia) como primera opción para limitar la exposición de la instalación al COVID-19. Si se requiere una visita de ámbito legal en persona, todos los visitantes jurídicos deberán proporcionar y usar equipo de protección personal (EPP) (por ejemplo, guantes, máscaras N-95 y protección ocular) y someterse a los mismos procedimientos de detección médica que los miembros del personal de la instalación. Si necesita hablar con su abogado, puede enviar un Formulario de Solicitud de Detenido.



In addition to reaching out to staff at your facility, detainees can call the Detention Reporting Information Line (DRIL): SPEED DIAL 91168 (on Free Call Platform). For information about your immigration hearing, call: SPEED DIAL 1118 (on Free Call Platform).

INFORMACION DE VIRUS PARA INDIVIDUOS DETENIDOS

ICE está monitoreando el COMD-19 y continúa siguiendo los pautas de los Centros para el Control y la Prevención de Enfermedades (CDC, por sus siglas en inglés), incluyendo:

- Exámenes de detección a todos los nuevos detenidos que llegan a las instalaciones con síntomas y riesgo de exposició _____3.
- Alojamiento por separado y monitoreo de detenidos con síntomas por un período de 14 días.
- Instrucción al personal del ICE y al personal de las instalaciones que han estado expuestos al virus para que informen de la exposición y practiquen los protocolos de cuarentena según las indicaciones de los CDC.
- ICE continuará compartiendo información sobre los casos de COVID-19 en sus instalaciones y la publicará en el sitio web de ICE a medida que esté disponible.

¿QUÉ PUEDE HACER?

Si se siente enfermo o tiene razones para creer que ha estado expuesto a alguien con el COVID-19, se le anima a enviar un formulario de solicitud médica tan pronto como sea posible.



Además de ponerse en contacto con el personal de su instalación, los detenidos pueden llamar a la Línea de Información de Detención (URIL, por sus siglas en inglés): MARCACIÓN RÁPIDA 9115# (en la plataforma de llamadas gratuítas). Para obtener información acerca de su audiencia de inmigración, llame a: MARCACIÓN RÁPIDA 111# (en la plataforma de llamadas gratuítas).





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