U.S. Department of Homeland Security 500 12th St., SW Washington, D.C. 20536



September 6, 2023

Ms. Jacqueline Stevens 601 University Place, 2d floor Political Science Department Evanston, IL 60208

RE: <u>Stevens v. ICE 20-cv-2725</u>

ICE FOIA Case Number 2020-ICLI-00042

Supplemental Release

Dear Ms. Stevens:

This letter is a supplemental response to your client's Freedom of Information Act (FOIA) requests to U.S. Immigration and Customs Enforcement (ICE). Your client seeks records relating to the following Freedom of Information Act requests: 2018-ICFO-56530, 2020-ICFO-18634, 2019-ICFO-33429, 2019-ICFO-29171, 2018-ICFO-59138, and 2019-ICFO-24680. ICE has considered your request under the FOIA, 5 U.S.C. § 552.

For this production, ICE is making a discretionary re-release of 199 pages of records. ICE has reviewed the pages and determined that 77 pages will be released in full and portions of the remaining 122 pages will be withheld pursuant to FOIA Exemptions (b)(4), (b)(6), (b)(7)(C) and (b)(7)(E) as described below. The pages will retain their original Bates numbers.

FOIA Exemption 4 protects trade secrets and commercial or financial information obtained from a person that is privileged or confidential. This exemption covers two categories of information in federal agency records: (1) trade secrets; and (2) information that is commercial or financial, obtained from a person (which may include corporations or state governments), and privileged or confidential, which is both customarily and actually treated as private by the submitter of the information. *See Food Marketing Institute v. Argus Leader Media*, 139 S. Ct. 2356, 2362-63 (2019). I have reviewed the responsive documents, the submitter's objections to release, and relevant case law, and I have determined that portions of the responsive records are exempt from disclosure under subsection (b)(4) of the FOIA and must be withheld in order to protect the submitter's proprietary interests.

ICE has applied FOIA Exemptions 6 and 7(C) to protect from disclosure the personally identifiable information of DHS employees and third parties contained within the records.

FOIA Exemption 6 exempts from disclosure personnel or medical files and similar files the release of which would cause a clearly unwarranted invasion of personal privacy. This requires a balancing of the public's right to disclosure against the individual's right to privacy. The privacy

interests of the non-public-facing individuals in the records you have requested outweigh any minimal public interest in disclosure of the information. Any private interest you may have in that information does not factor into the aforementioned balancing test.

FOIA Exemption 7(C) protects records or information compiled for law enforcement purposes that could reasonably be expected to constitute an unwarranted invasion of personal privacy. This exemption takes note of the strong interests of individuals, whether they are suspects, witnesses, investigators, or individuals performing their official duties in connection with a law enforcement agency, in not being unwarrantably associated with alleged criminal activity or becoming targets for revenge by begrudged individuals. Based upon the traditional recognition of strong privacy interest in law enforcement records, categorical withholding of information that identifies third parties in law enforcement records is ordinarily appropriate. As such, I have determined that the privacy interest in the identities of the non-public-facing individuals in the records you have requested clearly outweigh any minimal public interest in disclosure of the information. Please note that any private interest you may have in that information does not factor into this determination.

FOIA Exemption 7(E) protects records compiled for law enforcement purposes, the release of which would disclose techniques and/or procedures for law enforcement investigations or prosecutions or would disclose guidelines for law enforcement investigations or prosecutions if such disclosure could reasonably be expected to risk circumvention of the law. I have determined that disclosure of certain law enforcement sensitive information contained within the responsive records could reasonably be expected to risk circumvention of the law. Additionally, the techniques and procedures at issue are not well known to the public.

If you have any questions about this letter, please contact Assistant United States Attorney Alex Hartzler at Alex.Hartzler@usdoi.gov.

Sincerely,

Marcus K. Francis Sr. Supervisory Paralegal Specialist

Enclosure: 199 pages

From (b)(6); (b)(7)(C)		
Sent: Sunday, October 28, 20	018 9:50 AM	
To: '(b)(6); (b)(7)(C)	<pre>@CorrectCareSolutions.com>;(b)(6);</pre>	(b)(7)(C)
(b)(6); (b)(7)(C) @CorrectCareSol	utions.com>	
Cc:(b)(6); (b)(7)(C)	<u>/@ice.dhs.gov</u> >; '(b)(6); (b)(7)(C)	@correct caresolutions.com>;
(b)(6); (b)(7)(C)	@ice.dhs.gov>;(b)(6); (b)(7)(C)	@ice.dhs.gov>;
(b)(6); (b)(7)(C) @correctcaresolu	utions.com' <(b)(6): @correctcare	solutions.com>
Subject: RE: Detainee with re	ecent broken wrists medical update n	eeded
All		
All,		
why it was not completed. He Meanwhile you can do the reget an authorization, send it follow the same process if he	had no paperwork or authorization se owever, they did complete x-rays so pe eferral for a CT now, enter it into Med	lease call and get those sent to you. PAR for approval first, then once you needs referred to an orthopedist, then olled then let us know so we can get
Very Respectfully,		
CDR (b)(6); (b)(7)(C) RN, BSN, 6 Houston Field Medical Coord ICE Health Service Corps / US	dinator	
Montgomery Processing Cent 806 Hilbig Rd, ICE Suites 2 nd I Conroe, TX 77301		
eFax- (866) 703-(b)(6); (b)(7)(C) Work Cell- (202) Desk- (936) 520 (b)(6); (b)(7)(C) @ice.dhs.gov	v	

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From (b)(6); (b)(7)(C)	
Sent: Thursday, October 25, 2018 3:23 PM	
To (b)(6); (b)(7)(C)	

(b)(6); (b)(7)(C) @ice.dhs.gov> Subject: Re: Detainee with recent broken wrists medical update needed
As explained by (b)(6); the facility is declining to perform CT, based on patient's insurance inegilibility (Brookdale is talking about his private insurance)
called the facility twice, referred to radiology supervisor. She has already explained he is an ICE detainee.
As of now , I cannot provide a definitive answer regarding when the test will be done and further follow up scheduled either.
I believe ICE should contact the facility and confirm that all procedures/ tests/ follow up visits will be paid by ICE.
(b)(6); (b)(7)(C) M.D
From (b)(6); (b)(7)(C) Sent: Thursday, October 25, 2018 3:46 PM To:(b)(6); (b)(7)(C) Subject: RE: Detainee with recent broken wrists medical update needed DR Sterlin please respond to this email below in regard to detainee with broken wrists (b)(6);
DR Sterlin please respond to this email below in regard to detainee with broken wrists (b)(6); (b)(7)(C) Thanks, Tess
From: (b)(6); (b)(7)(C) Sent: Thursday, October 25, 2018 3:22 PM To(b)(6); (b)(7)(C) Subject: RE: Detainee with recent broken wrists medical update needed
Good afternoon;
I have contacted the office several times spoke to Mr ^{(b)(6); (b)(7)(C)} and explained
how the medpar is their insurance card, however she said they did not understand and passed
the call $to^{(b)(6); (b)(7)(C)}$ office supervisor $^{(b)(6); (b)(7)(C)}$ left a vm, no answer as of yet. Called this
afternoon all 1 got was the supervisor will call you back.

Thank you in advance;

(b)(6); (b)(7)(C)	
Hudson County Scheduler	
201-395-(b)(6);	
OCREDITATION NEWTON	

Hudson County Department of Corrections

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Fron (b)(6); (b)(7)(C)

Sent: Thursday, October 25, 2018 2:58 PM

To: (b)(6); (b)(7)(C)

Subject: FW: Detainee with recent broken wrists medical update needed

From: (b)(6); (b)(7)(C) [mailto (b)(6); (b)(7)(C) (d) (e)(c).dhs.gov]

Sent: Wednesday. October 24. 2018 10:10 PM

To: (b)(6); (b)(7)(C)

Cc:

Subject: Detainee with recent broken wrists medical update needed

All,

I received the below email from $DO_{(b)(5)}^{(b)(5)}$ and ask that you provide me with his medical record and with a medical update to answer the below questions:

- Is this detainee being followed by the medical clinic for his recent wrist fractures?
- What is his plan of care? Has he been referred and seen an orthopedic specialist?
- According to notes in EARM he was taken to an appointment at One Brookdale Plaza CHC BLDG, 2nd floor, Station L on 10/11 only to be rescheduled on 10/18 and then turned away without being seen due to insurance questions (see below), can someone explain what that means...did he have a MedPAR created? I do not see a referral in the system on my side.

Thanks in advance for your assistance.

@ice.dhs.gov> From: (b)(6); (b)(7)(C) **Date:** Wednesday, Oct 24, 2018, 8:16 AM **To:** (b)(6); (b)(7)(C) @ice.dhs.gov>, (b)(6); (b)(7)(C) @ice.dhs.gov> Cc: (b)(6); (b)(7)(C) @ice.dhs.gov>,(b)(6); (b)(7)(C) <(b)(6); (b)(7)(C) @ice.dhs.gov>, (b)(6); (b)(7)(C) @ice.dhs.gov> **Subject:** FW: (b)(6); (b)(7)(C) appointment on 10/11/2018 @ 10am at One Brookdale

Plaza CHC BLDG 2nd floor Station L Brooklyn NY

Good morning all,

I am not sure that this subject is on anyone's radar. I don't believe he is on the list of NYC significant medical cases. The subject entered custody with both wrists having been recently fractured.

We encountered him at the facility and he appears to have still have significant issues with his wrists.

He went to the below appointment and claims that he wasn't seen because his "private insurance wasn't accepted."

Very Respectfully,

CDR(b)(6); (b)(7)(C) RN, BSN, CCNM Houston Field Medical Coordinator ICE Health Service Corps / USPHS

Montgomery Processing Center 806 Hilbig Rd, ICE Suites 2nd Floor #(b)(1, Office #(b)(6); Conroe, TX 77301

eFax- (866) 703(b)(6); (b)(7)(C) Work Cell- (202 Desk- (936) 52 (b)(6); (b)(7)(C) @ice.dhs.gov

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From: (b)(6); (b)(7)(C)

Sent: 17 Mar 2018 14:24:46 +0000

To: (b)(6); (b)(7)(C)

Subject: Re: EXTERNAL: (b)(6); (b)(7)(C)

At the time incident occurred he had no loc was aao x3. He was monitored for 3 days neuro checks in infirmary, all wnl.

(b)(6); (b)(7)(C)

Sent from my iPhone

On Mar 17, 2018, at 6:00 AM, (b)(6); (b)(7)(C) @ice.dhs.gov > wrote:

Thanks, was there any evaluation regarding the head injury or testing related to that?

CDR (b)(6); , FMC NYC

Ofc:212-863 (b)(6); MOBL:202-302 (b)(6); Fax(secure): 866-(b)(6); (b)(7)(C) Warning: This document is UNCLASSIFIED/FOR OFFICIAL USE ONLY (U/FOUO) It contains information that may be exempt from public release under the Freedom of Information Act (5 USC. 552). It is to be controlled, stored, handled, transmitted, and disposed of in accordance with DHS policy relating to FOUO information and is not to be released to the public or other personnel who do not have a valid 'need-to-know' without prior approval of an authorized DHS official. No portion of this report should be furnished to the media, either in written or verbal form.

Good morning,

Patient returned from ER, negative findings at this time. If anything should change in official report will update you

(b)(6); (b)(7)(C)

Sent from my iPhone

On Mar 16, 2018, at 5:14 PM, (b)(6); (b)(7)(C) @cfgpc.com> wrote:

CDR(b)(6); (b)(7)(C)

Patient went to ER for lumbar X-rays. Since last email regarding patient, there has been no changes. Will update upon return from hospital.

(b)(6); (b)(7)(C)

Sent from my iPhone

On Mar 16, 2018, at 1:10 PM, (b)(6); (b)(7)(C) (c)(b)(6); (b)(7)(C) (o)(c)(d)s.gov> wrote:

Good afternoon, I received the following concerning this detainee, can you let me know his status regarding the head injury complaints?

I am writing regarding our client (b)(6); (b)(7)(C)

met with Mr. (b)(6); today at the Hudson County

Correctional Facility (HCCF) and am extremely
concerned about his medical condition. As you all know,

Mr. (b)(6); suffered a fall in the facility and hit his head.

My understanding is that this fall took place in or about a couple of weeks ago. Our client is not able to read and write and suffers from cognitive limitations so I was not able to ascertain the exact date of the fall.

Our client reported to me today that he has had persistent headaches since the fall in both the front and back of his head. Due to his cognitive limitations, I asked our client to point to where his head is hurting and he pointed to the forehead, both sides of the head and the back of his head. He advised that he has only received one pill but that has not alleviated the pain. Our client also is only Spanish speaking and therefore I am also concerned about whether the medical staff at the HCCF has been able to effectively communicate with him in order to ensure that his medical needs are properly attended to following a fall that has impacted his head.

As I know you all understand, head injuries must be attended to in a manner that fully explores and addresses any and all pain and symptoms. Therefore, Mr. (b)(6); should be immediately sent for an MRI and/or a MRI should be conducted by the HCCF. If it is not possible to arrange for a MRI at the HCCF and/or an outside provider, Mr (b)(6); should be released so that we can assist him with accessing the necessary medical care that is required following a fall and impact to an individual's head.

CDR (b)(6); (b)(7)(C) RN FMC NYC
Ofc:212-863 (b)(6); MOBL:202-302 (b)(6);
Fax(secure): 866-(b)(6): (b)(7)(C)

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From: (b)(6); (b)(7)(C)	
[mailto:(<u>(b)(6):</u> @cf	fgpc.com]
Sent: Thursday, Marc	h 15, 2018 8:00 AM
To: (b)(6); (b)(7)(C)	@ice.dhs.gov>;
(b)(6); (b)(7)(C)	@cfgpc.com>; (b)(6);
	spc.com>
Subject: RE: EXTERNA	(b)(6); (b)(7)(C)
(6); (b)(7)(C)	
Respectfully,	_
(b)(6); (b)(7)(C)	RN, BSN, MBA/HA, CCHP

Regional Manager CFG Health Systems

From: [b)(6); (b)(7)(C)

Sent: Thursday, March 15, 2018 7:56 AM

(b)(6); (b)(7)(C)

Subject: RE: EXTERNA (b)(6); (b)(7)(C)

Thank you, the A# the lawyer gave us was not correct, do you have his A# and date of birth or alias name?

CDR (b)(6); , FMC NYC Ofc:212-863-(b)(6); MOBL:202-302-(b)(6); Fax(secure): 866-(b)(6); Warning: This document is UNCLASSIFIED/FOR OFFICIAL USE ONLY (U/FOUO) It contains information that may be exempt from public release under the Freedom of Information Act (5 USC. 552). It is to be controlled, stored, handled, transmitted, and disposed of in accordance with DHS policy relating to FOUO information and is not to be released to the public or other personnel who do not have a valid 'need-to-know' without prior approval of an authorized DHS official. No portion of this report should be furnished to the media, either in written or verbal form.

From: (b)(6); (b)(7)(C)	@cfgpc.com>
Date: Thursday, Mar 15, 2	018, 7:52 AM
To:(b)(6); (b)(7)(C)	@ice.dhs.gov>,
(b)(6); (b)(7)(C)	@cfgpc.com>,(b)(6);
(b)(6); (b)(7)(C) @cfgpc.co	om>
Subject: RE: EXTERNAI	(b)(6); (b)(7)(C)
	l

Good Morning,

On date of incident, patient was evaluated, exam showed no abnormalities, he was monitored in medical housing for 3 days for complaint of hitting head. During that time neuro checks were within norn=mal limits.

Patient was evaluated on last evening by NP. Language line was used for interpretation, during the call the interpreter asked the patient to speak a little louder, patient got angry, left the room.

From the assessment and evaluation the NP was able to perform patient was complaining of elbow and back pain. Previous record from 8/22/17 shows that patient was diagnosed with epicondylitis (degeneration of tendon around the elbow). Patient was ambulating with steady gait.

X-ray of lumbar spine and analgesic was ordered.

Please let me know if you have any further questions.

Respectfully.

(b)(6); (b)(7)(C)

RN, BSN, MBA/HA, CCHP

Regional Manager

CFG Health Systems

Good afternoon, we recieved the following, can you check on him and let me know his status?

Today, our office was informed of an incredibly disturbing series of incidents that my client, (b)(6); (b)(7)(C) suffered while in ICE custody at Hudson County Jail. Last week, my client — who was granted asylum on 1/11/18 and has yet to be released from ICE custody — fell while cleaning the facility. As a result of his fall, several parts of his body are now injured. However, when he asked to see a doctor, he was punished and put in solitary confinement/isolation for three days.

CDR (b)(6); (b)(7)(C) FMC NYC
Ofc:212-863 (b)(6); MOBL:202-302 (b)(6);
Fax(secure): 866(b)(6); (b)(7)(C)

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