



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

Office of Detention Oversight
Compliance Inspection

Enforcement and Removal Operations
ERO San Antonio Field Office

Webb County Detention Center
Laredo, Texas

July 16-18, 2019

COMPLIANCE INSPECTION
of the
WEBB COUNTY DETENTION CENTER
Laredo, Texas

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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 compliance inspection of the Webb County Detention Center (WCDC) in Laredo, Texas, from July 16 to 18, 2019.¹ The facility opened in 1998 and is owned and operated by CoreCivic. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at WCDC in 2018 under the oversight of ERO's Field Office Director (FOD) in San Antonio (ERO San Antonio). The facility operates under the Performance-Based National Detention Standards (PBNDS) 2011 (Revised 2016).

ERO has assigned a Detention Services Manager (DSM) to the facility. A CoreCivic warden handles daily facility operations and is supported by ██████ personnel. Trinity Service Group provides food services and CoreCivic provides medical care at the facility. The facility is accredited by the American Correctional Association.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity ²	449
Average ICE Detainee Population ³	421
Male Detainee Population (as of 7/16/2019)	508
Female Detainee Population (as of 7/16/2019)	N/A

This was ODO's first compliance inspection of WCDC.

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

² Data Source: ERO Facility List Report as of July 17, 2019.

³ *Ibid.*

COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population greater than ten, and where detainees are housed for longer than 72 hours, to assess compliance with ICE national detention standards. These inspections focus solely on facility compliance with detention standards that directly affect detainee life, health, safety, and/or well-being.⁴

ODO identifies violations of ICE detention standards, ICE policies, or operational procedures as “deficiencies.” For facilities governed by either the PBNDS 2008 or 2011, ODO specifically notes deficiencies related to ICE-designated “priority components,” which are considered critical to facility security and the legal and civil rights of detainees. ODO also 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.

Upon completion of each inspection, ODO conducts a closeout briefing with facility and local ERO officials to discuss preliminary findings. A summary of these findings is shared with ERO management officials. Thereafter, ODO provides ICE leadership with a final compliance inspection report to: (i) assist ERO in developing and initiating corrective action plans; and (ii) provide senior executives with an independent assessment of facility operations. ODO’s findings inform ICE executive management in their decision-making to better allocate resources across the agency’s entire detention inventory.

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

FINDINGS BY PERFORMANCE-BASED NATIONAL DETENTION STANDARDS 2011 MAJOR CATEGORIES

PBNDS 2011 Standards Inspected ⁵	Deficiencies
Part 1 – Safety	
Environmental Health and Safety	0
Sub-Total	0
Part 2 – Security	
Admission and Release	0
Custody Classification System	3
Funds and Personal Property	3
Sexual Abuse and Assault Prevention and Intervention	0
Special Management Units	2
Staff-Detainee Communication	2
Use of Force and Restraints	2
Sub-Total	12
Part 4 – Care	
Food Service	0
Medical Care	0
Personal Hygiene ⁶	1
Significant Self-harm and Suicide Prevention and Intervention	0
Disability Identification, Assessment, and Accommodation	0
Sub-Total	1
Part 5 – Activities	
Recreation	0
Religious Practices	0
Telephone Access	2
Visitation	2
Sub-Total	4
Part 6 – Justice	
Grievance System	0
Law Libraries and Legal Material	0
Sub-Total	0
Total Deficiencies	17

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

⁶ ODO did not review the Personal Hygiene standard in full. The related deficiency was identified while reviewing the Environmental Health and Safety standard.

DETAINEE RELATIONS

ODO interviewed seven 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.

Staff-Detainee Communication: Several detainees stated they do not have access to their Deportation Officers (DO).

- Action Taken: ODO reviewed facility visitor logs and spoke with facility and ERO San Antonio staff. ODO found ERO San Antonio does not have any DOs permanently assigned to WCDC and DOs do not sign into the facility visitor log when they conduct official business at the facility. Facility staff was unable to provide ODO with any documentation to verify when ERO San Antonio staff is on-site for official business. ODO was unable to verify detainees had frequent access to key ERO San Antonio staff and cited as a deficiency in the Compliance Inspection Findings section of the report.

COMPLIANCE INSPECTION FINDINGS

SECURITY

CUSTODY CLASSIFICATION SYSTEM (CCS)

ERO San Antonio classifies each detainee prior to their arrival at WCDC, then provides WCDC intake staff a copy of their completed Risk Classification Assessment (RCA) form. Although WCDC staff complete a detainee's classification within 24 hours of the detainee's arrival, they defer to the classification assigned by ERO San Antonio. The classification program utilized by WCDC, known as the Offender Management System (OMS), generates only low, moderate, and high classification levels, not the required low, medium-low, medium-high and high classification levels. ERO San Antonio did not approve the facility-generated classification system (**Deficiency CCS-1⁷**).

ODO reviewed 33 detainee detention files and found that ERO provides the facility with the RCA form; however, ERO does not provide WCDC with enough information to conduct objective classifications, including the deportable alien criminal record (Form I-213) (**Deficiency CCS-2⁸**). Additionally, ODO's review of the 33 detainee detention files found the facility classification form does not include supervisory approval.

The facility issued orange uniforms to all moderate level detainees (what should be medium-low and medium-high), which did not permit visual identification of a detainee's classification on site and increased the potential of prohibited co-mingling of a medium-high level detainee with a history of violence and a medium-low level detainee with no history of violent or assaultive behavior (**Deficiency CCS-3⁹**).

FUNDS AND PERSONAL PROPERTY (F&PP)

ODO inspected the property room at WCDC and found it to be well organized and clean. The room had ample space and shelves to store personal property bags. ODO inspected ten personal

⁷ "Each facility shall develop and implement a system for classifying detainees in accordance with this Detention Standard. Facilities may rely on the ICE Custody Classification Worksheet, or a similar locally established system, subject to ICE/ERO evaluation and approval, as long as the classification criteria are objective and uniformly applied, and all procedures meet ICE/ERT requirements." *See* ICE PBNDS 2011, Standard, Custody Classification System, Section (V)(A). **This is a Priority Component.**

⁸ "Each facility administrator shall require that the facility's classification system ensures the following:

1. All detainees shall be classified upon arrival and before being admitted into the general population of the facility. ICE/ERO staff shall provide facilities the data needed from each detainee's file to complete the classification process; ...
4. Each detainee's classification shall be reviewed and approved by a classification specialist, first line supervisor, or classification supervisor."

See ICE PBNDS 2011, Standard, Custody Classification System Standard, Section (V)(A)(1) and (4). **This is a Priority Component.**

⁹ "Upon completion of the classification process, at facilities where applicable, staff shall assign individual detainee's color-coded uniforms, wristbands, or other means of custody identification. A system of color-coding permits staff to identify a detainee's classification on sight, thereby eliminating confusion, preventing potentially serious miscommunication, and facilitating consistent treatment of detainees." *See* ICE PBNDS 2011, Standard, Custody Classification System, Section (V)(D).

property bags and found the facility documents foreign currency generally but does not list separately the kind or type of currency and the amount of each kind or type of currency (**Deficiency F&PP-1¹⁰**).

ODO's inspection of housing units found detainees stored their property in an unsecured shelf located under their beds and were not provided with securable space to store their personal property (**Deficiency F&PP-2¹¹**).

Corrective Action: Prior to completion of the inspection, the facility initiated corrective action by issuing a heavy duty, securable plastic bag and a small combination lock to each detainee (**C-1**).

ODO's review of the detainee handbook found it does not include procedures for obtaining a copy of identity documents from the detainee's A-file, filing a claim for lost or damaged property, accessing detainee personal funds to pay for legal services, or claiming property upon release, transfer, or removal (**Deficiency F&PP-3¹²**).

SPECIAL MANAGEMENT UNITS (SMU)

ODO reviewed the files of the three detainees the facility had housed in SMU during the inspection and the two detainees placed in SMU during the year preceding the inspection. ODO found Administrative Segregation (AS) and Disciplinary Segregation orders were issued; however, the AS orders were not issued in a language or manner the detainee could understand (**Deficiency SMU-1¹³**).

Additionally, for the two detainees housed in SMU during the year preceding the inspection, ODO found [REDACTED] checks of detainees, housed in SMU, were not documented on a consistent basis. During the inspection, ODO observed facility staff complete [REDACTED]; however, the checks were not documented (**Deficiency SMU-2¹⁴**).

¹⁰ "Removal and inventory of detainee funds shall be conducted by at least [REDACTED] officers and in the presence of the detainee. Separate documentation should be made for each kind of currency and negotiable instrument and should include detainee identification information and a description of the amount and type of currency or other negotiable instrument inventoried." See ICE PBNDS 2011, Funds and Personal Property, Section (V)(G)(1).

¹¹ "Every housing area shall have lockers or other securable space for storing detainees' authorized personal property." See ICE PBNDS 2011, revised 2016, Funds and Personal Property, Section (V)(E).

¹² "The detainee handbook or equivalent shall notify the detainees of facility policies and procedures related to personal property, including:...

2. that, upon request, they shall be provided an ICE/ERO-certified copy of any identity document (e.g., passport, birth certificate), which shall then be placed in their A-files;...

4. the procedure for claiming property upon release, transfer, or removal;

5. the procedure for filing a claim for lost or damaged property and

6. access to detainee personal funds to pay for legal services."

See ICE PBNDS 2011, revised 2016, Funds and Personal Property, Section (V)(C)(2) and (4-6).

¹³ "The administrative segregation order shall be immediately provided to the detainee in a language or manner the detainee can understand, unless delivery would jeopardize the safe, secure, or orderly operation of the facility." See ICE PBNDS 2011, Standard, Special Management Unit, Section (V)(A)(2)(e). **This is a Priority Component.**

¹⁴ "Detainees in SMU shall be personally observed and logged at least every [REDACTED]." See ICE PBNDS 2011, Standard, Special Management Unit, Section (V)(M). **This is a Priority Component.**

STAFF-DETAINEE COMMUNICATION (SDC)

ERO San Antonio staff did not log their SDC visit in the facility's visitor log and WCDC staff were unable to provide documentation verifying ERO San Antonio staff visited the facility. ODO was unable to substantiate that detainees have frequent informal contact with key ERO San Antonio staff (**Deficiency SDC-1¹⁵**).

The detainee handbook included procedures to submit written questions, requests, or concerns, as well as the availability of assistance to prepare requests. The handbook included the address for the ERO San Antonio sub-office, located in Laredo; however, the contact information does not include the hours and days of availability or a telephone number. Furthermore, this contact information was not posted in the housing units (**Deficiency SDC-2¹⁶**).

USE OF FORCE AND RESTRAINTS (UOF&R)

WCDC had three UOF incidents in the year preceding the inspection. ODO's documentation review found that in all three cases, the After-Action Review Team (AART) did not meet as a team. Instead, each of the three members reviewed the packet individually and signed the form electronically on a different date; furthermore, ERO did not participate in the AART or sign the form (**Deficiency UOF&R-1¹⁷**).

ODO reviewed the three UOF incident files and interviewed the Chief of Security and Investigations Officer. One UOF incident file noted that an audiovisual record was maintained; however, the facility was unable to locate the audiovisual record and provide it to ODO for review during the inspection (**Deficiency UOF&R-2¹⁸**).

CARE

PERSONAL HYGIENE (PH)

¹⁵ "ICE/ERO detainees shall not be restricted from having frequent informal access to and interaction with key facility staff members, as well as key ICE/ERO staff, in a language they can understand." See ICE PBNDS 2011, Standard, Staff-Detainee Communication, Section (V)(A). **This is a Priority Component.**

¹⁶ "The local supplement to the detainee handbook shall include contact information for the ICE/ERO Field Office and the scheduled hours and days that ICE/ERO staff is available to be contacted by detainees at the facility. The same information shall be posted in the living areas (or "pods") of the facilities." See ICE PBNDS 2011, Standard, Staff-Detainee Communication, Section (V)(A).

¹⁷ "The facility administrator, the assistant facility administrator, the Field Office Director's designee and the health services administrator (HAS) shall conduct the after-action-review. This [REDACTED] after-action-review team shall convene on the work day after the incident. The after-action-review team shall gather relevant information, determine whether policy and procedures were followed, make recommendations for improvement, if any, and complete an after-action report to record the nature of its review and findings. The after-action report is due within two workdays of the detainee's release from restraints." See ICE PBNDS 2011, Standard, Use of Force and Restraints, Section (V)(P)(3).

¹⁸ "All facilities shall assign a designated individual to maintain all use-of-force documentation.

The designated individual shall maintain all use of force documentation, including the audiovisual record and the original after-action review form for a minimum of six years. A separate file shall be established on each of use of force incident". See ICE PBNDS 2011, Standard, Use of Force and Restraints, Section (V)(O)(4).

ODO's inspection found the general housekeeping in the facility to be good. However, ODO's inspection of the housing units found there were 92 temporary beds being used to accommodate the increased detainee population; as a result, WCDC did not meet the recognized standards of hygiene, which is a minimum ratio of 1 shower to 12 detainees (**Deficiency PH-1¹⁹**). Specifically, [REDACTED] had 3 showers for 46 detainees; [REDACTED] and [REDACTED] each had 3 showers for 48 detainees; [REDACTED] and [REDACTED] each had 1 shower for 20 detainees; and [REDACTED] and [REDACTED] each had 1 shower for 24 detainees.

ACTIVITIES

TELEPHONE ACCESS (TA)

Detainees are notified of the telephone rules and hours in the detainee handbook; however, the rules are not posted in each housing unit as required (**Deficiency TA-1²⁰**).

[REDACTED]

(**Deficiency TA-2²¹**).

VISITATION (V)

Detainees are permitted to have non-contact visitation with family and friends, legal representatives and their assistants, consular officials, and representatives of community service organizations. However, the facility does not require attorneys to complete a Notice of Entry of Appearance as Attorney or Accredited Representative (Form G-28) (**Deficiency V-1²²**).

Detainees housed in administrative segregation and disciplinary segregation have visitation

¹⁹ "Detainees shall be provided:

1. an adequate number of toilets, 24 hours per day, which can be used without staff assistance when detainees are confined to their cells or sleeping areas. ACA Expected Practice 4-ALDF-4B-08 requires that toilets be provided at a minimum ratio of one for every 12 male detainees....
3. operable showers that are thermostatically controlled between 100 and 120 F degrees, to ensure safety and promote hygienic practices. ACA Expected Practice 4-ALDF-4B-09 requires a minimum ratio of one shower for every 12 detainees."

See ICE PBNDS 2011, Standard, Personal Hygiene, Section (V)(E)(1) and (3).

²⁰ "Telephone access hours shall be posted near the telephones" See ICE PBNDS 2011, Standard, Telephone Access, Section (V)(D).

²¹

²² "... Once an attorney-client relationship has been established, or if an attorney-client relationship already exists, the legal representative shall complete and submit a Form G-28, available in the legal visitation reception area. Staff shall collect completed forms and forward them to ICE/ERO" See ICE PBNDS 2011, Standard, Visitation, Section (V)(J)(8).

privileges, which are communicated in facility policy and the facility local supplement to the ICE National Detainee Handbook. ODO verified separate legal and general visitation logs; however, the general visitation log does not require visitors to provide their address or the Alien number of the detainee they are visiting (**Deficiency V-2²³**).

CONCLUSION

During this inspection, ODO assessed the facility’s compliance with 19 standards under PBNDS 2011 and found the facility to be in compliance with 11 of those standards. ODO found 17 deficiencies in the remaining 8 standards. Although ODO found five deficiencies against priority components, ODO notes there were no deficiencies found in Medical Care, Food Service, or Environmental Health and Safety, which are three standards vital to the health, life, and safety of detainees. ODO recommends ERO San Antonio work with the facility to remedy any outstanding deficiencies as applicable and in accordance with contractual obligations.

Compliance Inspection Results Compared	FY 2018 (PBNDS 2011)	FY 2019 (PBNDS 2011)
Standards Reviewed	N/A	19
Deficient Standards	N/A	8
Overall Number of Deficiencies	N/A	17
Deficient Priority Components	N/A	5
Repeat Deficiencies	N/A	N/A
Corrective Actions	N/A	1

²³ “Each facility shall maintain a log of all general visitors, and a separate log of legal visitors... Staff shall record in the general visitors’ log:

1. the name and alien-registration number (A-number) of the detainee visited;
2. the visitor’s name and address.”

See ICE PBNDS 2011, Standard, Visitation, Section (V)(D)(1) and (2).