

**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

Karnes County Family Residential Center Karnes City, Texas

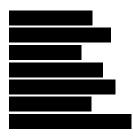
January 11-14, 2021

#### COMPLIANCE INSPECTION of the KARNES COUNTY FAMILY RESIDENTIAL CENTER Karnes City, Texas

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#### **COMPLIANCE INSPECTION TEAM MEMBERS**



Team Lead Inspections and Compliance Specialist Inspections and Compliance Specialist Contractor Contractor Contractor Contractor

ODO ODO ODO Creative Corrections Creative Corrections Creative Corrections Creative Corrections

#### 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 Karnes County Family Residential Center (KCFRC) in Karnes City, Texas, from January 11-14, 2021.<sup>1</sup> The facility opened in 2012 and is owned and operated by the GEO Group. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at KCFRC in 2012 under the oversight of ERO's Field Office Director (FOD) in San Antonio (ERO San Antonio). The facility operates under the Family Residential Standards (FRS) 2020.

ERO has deportation officers and a detention services manager assigned to the facility. A KCFRC administrator handles daily facility operations and is supported by personnel. The GEO Group provides food services and medical care at the facility. In May 2017, KCFRC 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 Detainee Bed Capacity <sup>2</sup>	830
Average ICE Detainee Population <sup>3</sup>	
Male Detainee Population (as of 1/11/2021)	
Female Detainee Population (as of 1/11/2021)	

During its last inspection, in Fiscal Year 2020, ODO found four deficiencies in the following areas: Use of Physical Control Measures and Restraints (1), Food Service (2), and Educational Policy (1).

<sup>&</sup>lt;sup>1</sup> This facility holds male and female adult residents and male and female children with low security classification levels for periods longer than 72 hours.

<sup>&</sup>lt;sup>2</sup> Data Source: ERO Facility List Report as of January 11, 2021.

<sup>&</sup>lt;sup>3</sup> 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.<sup>4</sup>

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 in which 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.

ODO was unable to conduct an on-site inspection of this facility, as a result of the COVID-19 pandemic and instead, conducted a remote inspection of the facility. During this remote inspection, ODO interviewed facility staff, ERO field office staff, and detainees, reviewed files and detention records, and was able to assess compliance for at least 90 percent or more of the ICE national detention standards reviewed during the inspection.

<sup>&</sup>lt;sup>4</sup> ODO reviews the facility's compliance with selected standards in their entirety.

#### FINDINGS BY FAMILY RESIDENTIAL STANDARDS 2020 MAJOR CATEGORIES

FRS 2020 Standards Inspected <sup>5</sup>	Deficiencies
Part 1 – Safety	
Emergency Plans	0
Environmental Health and Safety	0
Sub-Total	0
Part 2 – Security	
Admission and Release	0
Funds and Personal Property	0
Resident Census	0
Sexual Abuse and Assault Prevention and Intervention	0
Staff-Resident Communications	0
Use of Physical Control Measures and Restraints	0
Sub-Total	
Part 3 – Order	
Behavior Management	0
Sub-Total	0
Part 4 – Care	
Food Service	0
Hunger Strikes	0
Health Care	0
Health Care (Females)	0
Significant Self-harm and Suicide Prevention and Intervention	0
Disability Identification, Assessment, and Accommodation	0
Sub-Total	0
Part 5 – Activities	
Educational Policy	0
Religious Practices	0
Telephone Access	0
Sub-Total	0
Part 6 – Justice	
Grievance System	0
Law Libraries and Legal Material	0
Sub-Total	0
Total Deficiencies	0

<sup>&</sup>lt;sup>5</sup> For greater detail on ODO's findings, see the *Compliance Inspection Findings* section of this report.

### **RESIDENT RELATIONS**

ODO interviewed five residents, who each voluntarily agreed to participate. Six additional residents declined an interview with ODO. The remaining residents had not completed their 14-day quarantine period and the facility was unable to move them to the location interviews took place. None of the residents made allegations of discrimination, mistreatment, or abuse. All of the residents reported satisfaction with the facility's services. ODO attempted to conduct resident interviews via video teleconference; however, the ERO field office and facility were not able to accommodate this request due to technology issues. As such, ODO conducted the resident interviews via telephone.

### **COMPLIANCE INSPECTION FINDINGS**

There were no findings during this inspection.

### CONCLUSION

During this inspection, ODO assessed the facility's compliance with 20 standards under FRS 2020 and found the facility in compliance with all 20 standards. ODO commends center staff for their responsiveness during this inspection.

Compliance Inspection Results Compared	FY 2020 (FRS 2007)	FY 2021 (FRS 2020)
Standards Reviewed	18	20
Deficient Standards	3	0
Overall Number of Deficiencies	4	0
Areas of Concern	0	0
Repeat Deficiencies	N/A	N/A
Corrective Actions	0	0