

Office of Detention Oversight Compliance Inspection

Enforcement and Removal Operations ERO San Antonio Field Office

South Texas Family Residential Center Dilley, Texas

February 8-11, 2021

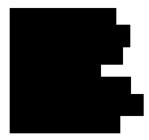
COMPLIANCE INSPECTION of the SOUTH TEXAS FAMILY RESIDENTIAL CENTER

Dilley, Texas

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COMPLIANCE INSPECTION TEAM MEMBERS



Acting Team Lead ODO
Inspections and Compliance Specialist ODO
Inspections and Compliance Specialist ODO
Contractor Contractor 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 South Texas Family Residential Center (STFRC) in Dilley, Texas, from February 8 to 11, 2021. The facility opened in 2012 and is owned by Target Logistics and operated by CoreCivic. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at STFRC in December 2014 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 assigned a detention services manager to the facility. A STFRC administrator handles daily facility operations and is supported by personnel. Target Logistics provides food services, CoreCivic provides commissary services, and ICE Health Services Corps provides medical care at the facility. The facility was accredited by the Temporary Shelter Program in May 2015 and the Texas Department of Family and Protective Services in May 2015. In August 2018, STFRC 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 ²	2400
Average ICE Detainee Population ³	
Male Detainee Population (as of 2/8/2021)	
Female Detainee Population (as of 2/8/2021)	

During its last inspection, in Fiscal Year (FY) 2020, ODO found 5 deficiencies in the following areas: Environmental Health and Safety (2); Food Service (1); and Staff-Resident Communication (2).

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¹ This facility holds male and female residents and male and female children with low security classification levels for periods longer than 72 hours.

² Data Source: ERO Facility List Report as of February 8, 2021

³ Thid

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." 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.

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

FINDINGS BY FAMILY RESIDENTIAL STANDARDS 2020 MAJOR CATEGORIES

FRS 2020 Standards Inspected ⁵	Deficiencies
Part 1 – Safety	•
Emergency Plans	0
Environmental Health and Safety	0
Sub-Total	0
Part 2 – Security	
Admission and Release	1
Funds and Personal Property	0
Resident Census	0
Searches and Inspections	0
Sexual Abuse and Assault Prevention and Intervention	0
Staff-Resident Communications	0
Use of Physical Control Measures and Restraints	0
Sub-Total	1
Part 3 – Order	
Discipline and Behavioral 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
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	1

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

DETAINEE RELATIONS

ODO interviewed 12 residents, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. Most residents reported satisfaction with facility services except for the concerns listed below. ODO attempted to conduct detainee interviews via video teleconference; however, ODO was unable to maintain a video teleconference connection with the detainees in the room the facility used for the interviews. As such, the detainee interviews were conducted via telephone.

Food Service: Three residents stated they had young children and their children did not like the food the facility served.

• Action Taken: ODO interviewed the food service manager (FSM), reviewed the facility's six-week cycle menu and associated nutritional analysis statement, and found the menus were varied and nutritionally adequate for both adults and children. The FSM confirmed the facility had 300 residents receiving their meals in their living units due to COVID-19 restrictions. The facility offered double portions on all meals delivered to the units. Additionally, the FSM informed ODO that each of the detainee living units had pantries, which the facility stocked twice a day with juices, milk, fruit, and snack items for the detainees to consume at their convenience.

Medical Care: One detainee stated she received an injection on February 4, 2021, for migraine pain, but it did not help with the pain and she does not feel well.

 Action Taken: ODO requested information from the facility's health service administrator (HSA) and the facility referred the complaint to their infection control officer, who conducted a medical record review. ODO found the facility's medical staff met with her on February 4, 2021, during a sick call visit for a headache and history of migraines during her menses. The medical provider diagnosed her with a severe migraine headache (a headache lasting longer than 72-hours), gave her an injection, prescribed her medication for nausea, and prescribed her another migraine medication for headache prevention. The medical provider monitored her after the injection for possible side effects, educated her on the treatment and side effects of the medications, and advised her to return to the medical clinic as needed. Medical staff scheduled her a follow-up appointment for March 4, 2021, and medical staff informed her to return to the clinic sooner if her symptoms worsen. The detainee returned to her living area on February 4, 2021, and prior to leaving the medical department, she informed the medical staff the pain from her headache was resolving and she was feeling better. The detainee had not submitted a sick call request since her last encounter on February 4, 2021.

COMPLIANCE INSPECTION FINDINGS

SECURITY

ADMISSION AND RELEASE

ODO reviewed the facility's A&R policies and procedures and found ERO's Juvenile and Family Residential Management Unit (ERO headquarters) had not approved the facility's orientation procedures (**Deficiency-77**6).

CARE

FOOD SERVICE (FS)

ODO reviewed the facility's annual inspections documentation from the Texas Department of Health (TDH), interviewed the FSM, and found the TDH did not inspect the facility in 2020 due to COVID-19 restrictions. ODO cited this as an **Area of Concern**. ODO reviewed Target Logistics' documentation regarding scheduling an inspection. The TDH advised Target Logistics they will schedule the facility for their next inspection once they resume conducting inspections. ODO reviewed the facility's food service license and found their license is current and does not expire until August 2022.

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 20 standards under FRS 2020 and found the facility in compliance with 19 of those standards. ODO found one deficiency in the one remaining standard. ODO commends facility staff for their responsiveness during this inspection. ODO recommends ERO work with the facility to resolve any deficiencies that remain outstanding in with contractual obligations.

Compliance Inspection Results Compared	FY 2020 (FRS 2020)	FY 2020 (FRS 2020)
Standards Reviewed	18	20
Deficient Standards	3	1
Overall Number of Deficiencies	4	1
Repeat Deficiencies	0	0
Areas of Concern	1	1
Corrective Actions	0	0

⁶ "G. Orientation. Centers will have a procedure to provide a Center orientation to residents. Orientation procedures must be approved in advance by the Juvenile and Family Residential Management Unit Chief."