



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

South Texas ICE Processing Center
Pearsall, Texas

March 1-5, 2021

COMPLIANCE INSPECTION
of the
SOUTH TEXAS ICE PROCESSING CENTER
Pearsall, Texas

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COMPLIANCE INSPECTION TEAM MEMBERS

[REDACTED]	Acting Team Lead	ODO
[REDACTED]	Inspections and Compliance Specialist	ODO
[REDACTED]	Inspections and Compliance Specialist	ODO
[REDACTED]	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 ICE Processing Center (STIPC) in Pearsall, Texas, from March 1-5, 2021.¹ The facility opened in May 2005 and is owned and operated by Geo Group, Inc. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at STIPC in June 2005 under the oversight of ERO’s Field Office Director in San Antonio (ERO San Antonio). The facility operates under the Performance-Based National Detention Standards (PBNDS) 2011 (Revised 2016).

ERO has assigned deportation officers to the facility. A STIPC facility administrator handles daily facility operations and is supported by ██████ personnel. Geo Group, Inc. provides food services, ICE Health Service Corps provides medical care, and Keefe Supply Company provides commissary services at the facility. The facility was accredited by the American Correctional Association in December 2019, by the National Commission on Correctional Health Care in February 2019. In July 2020, STIPC 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	1890
Average ICE Detainee Population ³	████
Male Detainee Population (as of February 25, 2021)	████
Female Detainee Population (as of February 25, 2021)	0

During its last inspection, in Fiscal Year (FY) 2020, ODO found 14 deficiencies in the following areas: Admission and Release (1); Custody Classification System (1); Facility Security and Control (1); Use of Force and Restraints (1); Food Service (1); Medical Care (2); Disability Identification, Assessment, and Accommodation (1); Recreation (2); Telephone Access (1); Visitation (2); and Grievance Systems (1).

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 February 22, 2021.

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.” 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.

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

**FINDINGS BY PERFORMANCE-BASED NATIONAL
DETENTION STANDARDS 2011 (REVISED 2016)
MAJOR CATEGORIES**

PBNDS 2011 (Revised 2016) Standards Inspected⁵	Deficiencies
Part 1 – Safety	
Emergency Plans	2
Environmental Health and Safety	0
Sub-Total	2
Part 2 – Security	
Admission and Release	0
Custody Classification System	0
Facility Security and Control	1
Funds and Personal Property	0
Population Counts	0
Sexual Abuse and Assault Prevention and Intervention	0
Special Management Units	0
Staff-Detainee Communication	2
Use of Force and Restraints	1
Sub-Total	4
Part 4 – Care	
Food Service	0
Hunger Strikes	0
Medical Care	0
Medical Care (Women)	0
Significant Self-harm and Suicide Prevention and Intervention	0
Disability Identification, Assessment, and Accommodation	0
Sub-Total	0
Part 5 – Activities	
Religious Practices	0
Telephone Access	1
Sub-Total	1
Part 6 – Justice	
Grievance Systems	0
Law Libraries and Legal Material	0
Sub-Total	0
Total Deficiencies	7

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

DETAINEE RELATIONS

ODO interviewed 12 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, nor abuse. Most detainees reported satisfaction with facility services except for the concerns listed below. ODO conducted detainee interviews via video teleconference.

Admission and Release: One detainee stated he did not understand the language of the handbooks he received upon his arrival at the facility.

- Action Taken: On March 3, 2021, the facility's admission and release supervisor interviewed the detainee, determined the detainee's primary language is French, and provided the detainee a French version of the STIPC handbook and a French version of the ICE National Detainee Handbook. Additionally, the detainee signed and acknowledged receipt of both handbooks.

Staff-Detainee Communication: One detainee stated the facility's GEO female staff members do not announce themselves when delivering mail.

- Action Taken: On March 2, 2021, ODO interviewed facility leadership and reviewed the facility's policies and procedures concerning opposite gender announcements. ODO found the facility has prominently posted opposite gender announcement signage at the entrance for each housing unit and facility leadership informed ODO they have reminded all staff to ensure they announced their presence when entering housing units of the opposite gender. Additionally, ODO confirmed the facility will provide refresher training on gender announcements to all facility staff by March 20, 2021.

COMPLIANCE INSPECTION FINDINGS

SAFETY

EMERGENCY PLANS (EP)

ODO reviewed the facility's EP program and found the facility does not specify how often nor where the specialized training shall occur (**EP-160**⁶).

ODO reviewed the facility's EP program and found the facility does not specify the number of employees nor detainees who will receive the specialized training (**EP-161**⁷).

SECURITY

FACILITY SECURITY AND CONTROL (FSC)

ODO reviewed the facility's FSC program and found the facility does not have a separate sally

⁶ "The plan shall specify how often and where specialized training shall occur." See ICE PBNDS 2011 (Revised 2016), Standard Emergency Plans, Section (V)(E)(10)(b)(1)(b).

⁷ "The plan shall specify the number of employees and detainees to receive the training." See ICE PBNDS 2011 (Revised 2016), Standard Emergency Plans, Section (V)(E)(10)(b)(1)(c).

port to control the entrance into one of the two special management units (**FSC-88⁸**).

STAFF-DETAINEE COMMUNICATION (SDC)

ODO reviewed the facility's SDC program and found the detainee request logbook does not record the detainees' nationality nor the name of the staff member who logged the request (**SDC-20⁹**).

ODO reviewed the facility's SDC program and found ERO San Antonio does not ensure all detainee accessible phones are tested weekly (**SDC-24¹⁰**).

USE OF FORCE AND RESTRAINTS (UOFR)

ODO reviewed the facility's UOFR program and found the facility's after-action review team does not investigate all breaks nor sequences missing from the audiovisual record (**UOFR-169¹¹**).

ACTIVITIES

TELEPHONE ACCESS (TA)

ODO reviewed the facility's TA program and found ERO San Antonio did not provide the facility with current pro bono legal service information (**TA-12¹²**).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 21 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 16 of those standards. ODO found seven deficiencies in the remaining five standards. 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 accordance with contractual obligations.

⁸ "In facilities with the ability to do so, the SMU entrance in regular use shall have a [REDACTED] [REDACTED] See ICE PBNDS 2011 (Revised 2016), Standard Facility Security and Control, Section (V)(E)(2). **This is a Repeat Deficiency.**

⁹ "At a minimum, the log shall record: ...

d. detainee's nationality;

e. name of the staff member who logged the request." See ICE PBNDS 2011 (Revised 2016), Standard Staff-Detainee Communication, Section (V)(B)(2)(d) and (e).

¹⁰ "Field Office Directors shall ensure that all phones for detainee use are tested at least weekly in accordance with standard "5.6 Telephone Access." See ICE PBNDS 2011 (Revised 2016), Standard Staff-Detainee Communication, Section (V)(C).

¹¹ "The after-action review team shall also review the audiovisual recording of any use of force incidents for compliance with all provisions of this standard, with particular attention paid to: ...

k. whether there was continuous audiovisual coverage from the time the camera started recording until the incident concluded. The review team shall investigate any breaks or sequences missing from the audiovisual record;" See ICE PBNDS 2011 (Revised 2016), Standard Use of Force and Restraints, Section (V)(P)(4)(k).

¹² "All Field Offices are responsible for ensuring facilities which house ICE detainees under their jurisdiction are provided with current pro bono legal service information." See ICE PBNDS 2011 (Revised 2016), Standard Telephone Access, Section (V)(A)(3).

Compliance Inspection Results Compared	FY 2020 (PBNDS 2011) (Revised 2016)	FY 2021 (PBNDS 2011) (Revised 2016)
Standards Reviewed	19	21
Deficient Standards	11	5
Overall Number of Deficiencies	14	7
Repeat Deficiencies	1	1
Areas of Concern	0	0
Corrective Actions	4	0