



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

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**Office of Detention Oversight  
Follow-Up Compliance Inspection  
2024-005-363**

**Enforcement and Removal Operations  
ERO San Antonio Field Office**

**South Texas Family Residential Center (Dilley)  
Dilley, Texas**

**June 4-6, 2024**

**FOLLOW-UP COMPLIANCE INSPECTION**  
**of the**  
**SOUTH TEXAS FAMILY RESIDENTIAL CENTER (DILLEY)**  
Dilley, Texas

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## FOLLOW-UP COMPLIANCE INSPECTION TEAM MEMBERS

[REDACTED]	Team Lead	ODO
[REDACTED]	Senior Inspections and Compliance Specialist	ODO
[REDACTED]	Senior Inspections and Compliance Specialist	ODO
[REDACTED]	Inspections and Compliance Specialist	ODO
[REDACTED]	Contractor	Creative Corrections
[REDACTED]	Contractor	Creative Corrections
[REDACTED]	Contractor	Creative Corrections
[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 follow-up compliance inspection of the South Texas Family Residential Center (Dilley) (STFRC) in Dilley, Texas, from June 4 to 6, 2024.<sup>1</sup> This inspection focused on the standards found deficient during ODO's last inspection of STFRC from November 14 to 16, 2023. The facility opened in 2014 and is owned by Target Logistics and operated by Core Civic. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at STFRC in 2014 under the oversight of ERO's Field Office Director in San Antonio (ERO San Antonio). The facility operates under the Family Residential Standards (FRS) 2020 and the Performance-Based National Detention Standards (PBNDS) 2011 (Revised 2016).

[REDACTED] An STFRC facility administrator handles daily operations and manages [REDACTED] personnel. Target Hospitality provides food services, STG International provides medical care, and Keefe Supply Company provides commissary services at the facility. The facility does not hold any accreditations from any outside entities. In May 2021, 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 Resident Bed Capacity <sup>2</sup>	[REDACTED]
Average ICE Resident Population <sup>3</sup>	[REDACTED]
Male Resident Population (as of June 4, 2024)	[REDACTED]
Female Resident Population (as of June 4, 2024)	[REDACTED]

During its last rated inspection, in Fiscal Year (FY) 2024, ODO found 8 deficiencies in the following areas: Admission and Release (1); Post Orders (4); Staff-Resident Communication (2); and Telephone Access (1).

<sup>1</sup> This facility holds male and female detainees with low security classification levels for periods greater than 72 hours.

<sup>2</sup> Data Source: ERO Custody Management Division Authorized Facility List as of June 3, 2024.

<sup>3</sup> *Ibid.*

## **FOLLOW-UP COMPLIANCE INSPECTION PROCESS**

ODO conducts biannual oversight inspections of ICE detention facilities with an average daily population (ADP) of 10 or more detainees, and where detainees are housed for longer than 72-hours, to assess compliance with ICE National Detention Standards. In FY 2021, to meet congressional requirements, ODO began conducting follow-up inspections at all over-72-hour ICE detention facilities with an ADP of 10 or more detainees that ODO conducted a full inspection of earlier in the FY. Follow-up inspections focus on facility compliance with detention standards that directly affect detainee life, health, safety, and/or well-being, and other standards ODO found deficient during the previous rated inspection to assess the facility's corrective actions taken to address those previously cited deficiencies.<sup>4</sup>

ODO identifies violations of ICE detention standards, ICE policies, or operational procedures, as "deficiencies." ODO 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.

While follow-up inspections are intended to focus on previously identified deficiencies, ODO will conduct a complete review of several core standards, which include but are not limited to Medical Care, Hunger Strikes, Suicide Prevention, Food Service, Environmental Health and Safety, Emergency Plans, Use of Force and Restraints/Use of Physical Control Measures and Restraints, Admission and Release, Classification, and Funds and Personal Property. ODO may decide to conduct a second full inspection of a facility in the same FY based on additional information obtained prior to ODO's arrival on-site. Factors ODO will consider when deciding to conduct a second full inspection will include the total number of deficiencies cited during the first inspection, the number of deficient standards found during the first inspection, the completion status of the first inspection's uniform corrective action plan (UCAP), and other information ODO obtains from internal and external sources ahead of the follow-up compliance inspection. Conditions found during the inspection may also lead ODO to assess new areas and identify new deficiencies or areas of concern should facility practices run contrary to ICE standards. Any areas found non-compliant during both inspections are annotated as "Repeat Deficiencies" in this report.

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

## FINDINGS BY FAMILY RESIDENTIAL STANDARDS 2020 AND PERFORMANCE BASED NATIONAL DETENTION STANDARDS 2011 (REVISED 2016) MAJOR CATEGORIES

FRS Standards Inspected <sup>5,6</sup>	Deficiencies
<b>Part 1 - Safety</b>	
Emergency Plans	0
Environmental Health and Safety	0
<b>Sub-Total</b>	<b>0</b>
<b>Part 2 - Security</b>	
Admission and Release	0
Funds and Personal Property	0
Staff-Resident Communications	0
<b>Sub-Total</b>	<b>0</b>
<b>Part 3 - Order</b>	
Behavior Management	0
<b>Sub-Total</b>	<b>0</b>
<b>Part 4 - Care</b>	
Food Service	0
Hunger Strikes	0
Health Care	0
Health Care (Females)	0
Personal Hygiene	0
Significant Self-harm and Suicide Prevention and Intervention	0
<b>Sub-Total</b>	<b>0</b>
<b>Part 5 - Activities</b>	
Telephone Access	0
<b>Sub-Total</b>	<b>0</b>
<b>Part 6 - Justice</b>	
Grievance System	0
<b>Sub-Total</b>	<b>0</b>
<b>Part 7 – Administration and Management</b>	
Post Orders	0
<b>Sub- Total</b>	<b>0</b>
<b>PBNS 2011 (Revised 2016) Reviewed</b>	
Custody Classification System	0
Use of Force and Restraints	0
Recreation	0
<b>Sub-Total</b>	<b>0</b>

<sup>5</sup> For greater detail on ODO’s findings, see the *Follow-up Compliance Inspection Findings* section of this report.

<sup>6</sup> Beginning in FY 2024, ODO instituted a process of rotating all standards every other year. As a result, some standards may not be present in all inspections.

<b>Total Deficiencies</b>	<b>0</b>
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## DETAINEE RELATIONS

ODO interviewed 26 residents who each voluntarily agreed to participate. None of the residents made allegations of discrimination, mistreatment, or abuse. Twenty-four residents reported satisfaction with facility services and two declined to provide any additional comments.

## FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

ODO found no deficiencies during the inspection.

## CONCLUSION

During this inspection, ODO assessed the facility's compliance with 18 standards under FRS 2020 and 6 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with all 18 of those standards. Since STFRC's last full compliance inspection in November 2023, the facility's performance trended upward. STFRC went from 4 deficient standards and 8 deficiencies in November 2023 to no deficient standards in this follow-up compliance inspection. ODO has not received a UCAP for the facility's last ODO inspection in November 2023, but ERO San Antonio's daily oversight of the facility likely helped ensure the facility's overall compliance with the FRS 2020 and PBNDS 2011 (Revised 2016) standards. ODO recommends ERO San Antonio continue to work with the facility to maintain its current state of compliance in accordance with contractual obligations.

<b>Compliance Inspection Results Compared</b>	<b>FY 2024 Full Inspection (FRS 2020)</b>	<b>FY 2024 Follow-Up Inspection (FRS 2020)/ (PBNDS 2011) (Revised 2016)</b>
Standards Reviewed	28	18
Deficient Standards	4	0
Overall Number of Deficiencies	8	0
Priority Component Deficiencies	0	0
Repeat Deficiencies	0	0
Areas Of Concern	0	0
Corrective Actions	0	0
Facility Rating	Superior	N/A