

Office of Professional Responsibility

El Valle Detention Facility

Compliance Inspection 2025-001-063

March 4-6, 2025



U.S. Immigration
and Customs
Enforcement

**COMPLIANCE INSPECTION
of the
EL VALLE DETENTION FACILITY
Raymondville, Texas**

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COMPLIANCE INSPECTION TEAM MEMBERS



Team Lead	ODO
Senior Inspections and Compliance Specialist	ODO
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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 El Valle Detention Facility (EVDF) in Raymondville, Texas, from March 4 to 6, 2025.¹ The facility opened in 2018 and is owned and operated by Management Training Corporation (MTC). The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at EVDF in 2018 under the oversight of ERO's Field Office Director in Harlingen (ERO Harlingen). The facility operates under the Performance-Based National Detention Standards (PBNDS) 2011 (Revised 2016).

[REDACTED]

[REDACTED] A facility administrator handles daily operations and manages [REDACTED] support personnel. MTC provides food services and medical care, and US Commissary Solutions provides commissary services at the facility. The facility was accredited by the American Correctional Association in December 2022 and the National Commission on Correctional Health Care in January 2025. In June 2022, EVDF 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 Bed Capacity. ²	[REDACTED]
Average ICE Population. ³	[REDACTED]
Adult Male Population (as of March 4, 2025)	[REDACTED]
Adult Female Population (as of March 4, 2025)	[REDACTED]

During its last rated inspection, in Fiscal Year (FY) 2024, ODO found 11 deficiencies in the following areas: Detainee Transfers (6); Detention Files (3); Personal Hygiene (1); and Telephone Access (1).

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

² Data Source: ERO Custody Management Division Authorized Facility List as of March 3, 2025.

³ *Ibid.*

COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population of 10 or more, and where detainees are housed for over 72 hours, to assess compliance with ICE national detention standards. While these inspections focus on facility compliance with detention standards that directly affect detainee life, health, safety, and/or well-being, in FY 2024 ODO added additional standards to the scope of each full inspection to ensure ODO inspects every standard at each facility at least once every other year.⁴

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.

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 (REVISED 2016) MAJOR CATEGORIES

PBNDS 2011 (Revised 2016) Standards Inspected ^{5,6}	Deficiencies
Part 1 - Safety	
Emergency Plans	0
Environmental Health and Safety	0
Transportation (By Land)	0
Sub-Total	0
Part 2 - Security	
Admission and Release	0
Custody Classification System	0
Contraband	0
Funds and Personal Property	1
Hold Rooms in Detention Facilities	1
Key and Lock Control	0
Sexual Abuse and Assault Prevention and Intervention	0
Special Management Units	0
Staff-Detainee Communication	0
Tool Control	0
Use of Force and Restraints	0
Sub-Total	2
Part 3 - Order	
Disciplinary System	0
Sub-Total	0
Part 4 - Care	
Food Service	0
Medical Care	0
Medical Care (Women)	0
Significant Self-harm and Suicide Prevention and Intervention	0
Terminal Illness, Advance Directives and Death	0
Sub-Total	0
Part 5 - Activities	
Recreation	1
Visitation	0
Sub-Total	1
Part 6 - Justice	

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

⁶ 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.

Detainee Handbook	0
Legal Rights Group Presentations	0
Sub-Total	0
Part 7 - Administration and Management	
Interview and Tours	0
Sub-Total	0
Total Deficiencies	3

DETAINEE RELATIONS

ODO interviewed 40 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 concerns listed below.

Medical Care: One detainee reported his difficulty resolving a toothache.

- **Action Taken:** ODO interviewed the facility's health services administrator (HSA) and confirmed the detainee arrived at the facility on November 5, 2024, with no complaint of tooth pain during his initial intake screening. On February 18, 2025, the detainee submitted a sick call request for pain in a lower left molar. On February 20, 2025, a facility dentist examined the detainee, observed decay and shallow fillings in teeth 17, 18, and 19. The facility dentist conducted X-rays and referred the detainee to an offsite specialist. On March 5, 2025, the offsite specialist examined the detainee and verified the facility dentist's findings, noting significant bone resorption in tooth 19. The offsite specialist prescribed PerioGard mouthwash, twice per day, for 2 weeks, and amoxicillin (500 mg), three times per day, for 7 days, and referred the detainee to an oral surgeon for further evaluation and treatment. At the conclusion of the ODO inspection, the facility medical staff had not found an oral surgeon willing to perform the required service due to previous non-payment for ICE detainee treatment. ODO followed up with the detainee to inform him of the facility's medical protocol and the correct procedure in completing sick call requests for tooth pain. The detainee acknowledged understanding.

Medical Care: One detainee expressed concern for her ongoing psoriasis symptoms.

- **Action Taken:** ODO interviewed the HSA and confirmed the detainee arrived at the facility on January 11, 2024, with no complaints of skin issues during her initial intake screening. On February 16, 2024, the detainee submitted a sick call request for whole body itchiness and patchy skin lesions. On the same day, the facility medical staff examined the detainee and prescribed hydrocortisone cream (1%), four times daily, as needed. The detainee submitted multiple sick call requests between May 15, 2024, and February 4, 2025, for the same issue and the facility medical staff responded to each request with prescription regimens of: hydrocortisone cream (1%), four times daily, as needed; Benadryl (25 mg), 1 tablet, 4 times per day; and triamcinolone ointment (0.1%), once daily. On February 2, 2025, a dermatologist diagnosed psoriasis and prescribed the following medications: Otezla (30 mg), twice daily, for 30 days;

methylprednisolone sodium (125 mg), injected once weekly, for 4 weeks; and methotrexate (2.5 mg), 5 tablets taken once weekly, for 30 days, following the completion of the methylprednisolone sodium injections. The facility medical staff met with the detainee after the ODO interview to explain the psoriasis treatment plan and the detainee acknowledged understanding. The detainee had a follow-up dermatology appointment scheduled for April 1, 2025, after ODO's inspection.

COMPLIANCE INSPECTION FINDINGS

SECURITY

FUNDS AND PERSONAL PROPERTY (FPP)

ODO reviewed 30 days of twice daily shift change records for oncoming and outgoing supervisory audits of detainee property envelopes and found in 7 out of 30 days, no audits conducted, and in 16 out of 30 days, only 1 out of 2 daily audits conducted (**Deficiency FPP-100⁷**).

HOLD ROOMS IN DETENTION FACILITIES (HRDF)

ODO reviewed 25 hold room logs and found in 20 out of 25 logs, the facility conducted visual monitoring checks every 15 minutes; however, they were not at irregular intervals (**Deficiency HRDF-54⁸**). **This is a priority component.**

ACTIVITIES

RECREATION (R)

ODO reviewed the facility's recreation policy and procedures, interviewed the facility recreation supervisor, and found the facility did not provide detainees with a wireless headset for television viewing (**Deficiency R-31⁹**).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 25 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 22 of those standards. ODO found three deficiencies in the remaining three standards. Since EVDF's last rated inspection in March 2024, the facility's overall compliance with the PBNDS 2011 (Revised 2016) has trended upward. EVDF went from 11 deficiencies in 4 standards in March 2024 to 3 deficiencies in 3 standards

⁷ "Both on-coming and off-going supervisors shall simultaneously conduct an audit of detainee funds, property envelopes and large valuables where physical custody of, or access to such items changes with facility shift changes." See ICE PBNDS 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(J).

⁸ "Officers shall closely and directly supervise hold rooms through the following means: ...

b. Visual monitoring at irregular intervals at least every 15 minutes, each time recorded in the detention log, to include the time, the officer's printed name, and any unusual behavior or complaints under "comments."

See ICE PBNDS 2011 (Revised 2016), Standard, Hold Rooms in Detention Facilities, Section (V)(D)(5)(b).

⁹ "Detainees shall be provided FM wireless headsets for television viewing, with access to appropriate language stations or choices." See ICE PBNDS 2011 (Revised 2016), Standard, Recreation, Section (V)(D)(11).

during this most recent compliance inspection, which includes 1 priority component deficiency in the HRDF standard. ODO received EVDF's completed uniform corrective action plan for its last rated inspection in March 2024, which likely resolved previous deficiencies ODO cited. ODO recommends ERO Harlingen work with the facility to resolve any deficiencies in accordance with contractual obligations.

Compliance Inspection Results Compared	FY 2024 Full Inspection (PBNS 2011) (Revised 2016)	FY 2025 Full Inspection (PBNS 2011) (Revised 2016)
Standards Reviewed	29	25
Deficient Standards	4	3
Overall Number of Deficiencies	11	3
Priority Component Deficiencies	0	1
Repeat Deficiencies	0	0
Areas Of Concern	0	0
Corrective Actions	0	0
Facility Rating	Acceptable/Adequate	Good



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