



U.S. Department of Homeland Security
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 Residential Center
Karnes City, Texas**

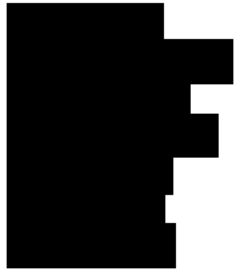
November 1-4, 2021

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

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COMPLIANCE INSPECTION TEAM MEMBERS



Team Lead	ODO
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 Karnes County Residential Center (KCRC) in Karnes City, Texas, from November 1 to 4, 2021.¹ The facility opened in 2012 and is owned and operated by GEO Group, Inc. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at KCRC in 2014 under the oversight of ERO’s Field Office Director in ERO San Antonio. The facility operates under the Family Residential Standards (FRS) (Revised 2020).

ERO has assigned deportation officers and a detention services manager to the facility. A facility administrator handles daily facility operations and supervises [REDACTED] support personnel. GEO Group, Inc. provides food services, medical care, and commissary services at the facility. The facility does not hold any accreditations from outside entities. In February 2020, KCRC received an audit for the Department of Homeland Security (DHS) Prison Rape Elimination Act (PREA) and received its DHS PREA certification.

Capacity and Population Statistics	Quantity
ICE Resident Bed Capacity ²	[REDACTED]
Average ICE Resident Population ³	[REDACTED]
Male Resident Population (as of November 1, 2021)	[REDACTED]
Female Resident Population (as of November 1, 2021)	[REDACTED]

During its last inspection, in Fiscal Year (FY) 21, ODO conducted an inspection of KCRC and found zero deficiencies.

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

² Data Source: ERO Facility List as of September 27, 2021.

³ *Ibid.*

COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population greater than 10, and where detainees are housed for over 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 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 its 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 FAMILY RESIDENTIAL STANDARDS (FRS) MAJOR CATEGORIES

FRS Standards Inspected ^{5,6}	Deficiencies
Part 1 - Safety	
Emergency Plans	0
Environmental Health and Safety	0
Housekeeping Program	0
Sub-Total	0
Part 2 - Security	
Admission and Release	0
Funds and Personal Property	0
Post Orders	0
Searches and Inspections	0
Sexual Abuse and Assault Prevention and Intervention	0
Use of Physical Control Measures and Restraints	0
Sub-Total	0
Part 4 - Care	
Food Service	0
Health Care	0
Health Care (Females)	0
Hunger Strikes	0
Personal Hygiene	0
Significant Self-harm and Suicide Prevention and Intervention	0
Sub-Total	0
Part 5 - Activities	
Correspondence and Other Mail	0
Educational Policy	0
Escorted Trips for Non-Medical Emergencies	0
Marriage Requests	0
Voluntary Work Program	0
Sub-Total	0
Part 6 - Justice	
Legal Rights Group Presentations	0
Sub-Total	0
Part 7 - Administration and Management	
Resident Files	0
News Media Interviews and Tours	0

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

⁶ Beginning in FY 2022, ODO instituted a process of rotating all standards on a 3-year basis. As a result, some standard components may not be present in all standards.

Resident Transfers	0
Sub-Total	0
Total Deficiencies	0

DETAINEE RELATIONS

ODO interviewed eight residents, who each voluntarily agreed to participate. ODO could not interview 12 residents because the remaining 4 residents were in a COVID-19 lockdown unit. None of the residents made allegations of discrimination, mistreatment, or abuse. Most residents reported satisfaction with facility services except for the concern listed below. ODO conducted resident interviews via video teleconference.

Visitation: One resident stated he did not receive visitation.

- Action Taken: ODO interviewed the supervisory detention and deportation officer assigned to the facility, and he stated the ICE Pandemic Response Plan, dated October 21, 2021, did not permit in-person social visitation while the facility was housing COVID-19 positive residents, who have been there during this reporting period. However, the facility afforded residents the option of social visitation via tablets or cell phones by request. This option includes visits with family members held in the facility, visiting families, and legal visitation. After 72 hours, the facility allows non-COVID-19 positive (non-symptomatic) residents the use of dayrooms, parks, and other program areas in the facility. The facility also permits these families to conduct in-person visits with their relatives in the facility.

COMPLIANCE INSPECTION FINDINGS

There were no findings during this inspection.

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 24 standards under FRS 2020 and found the facility in compliance with all 24 of those standards. ODO commends the center staff members for their responsiveness during the inspections. The facility did not have a uniform corrective action plan for ODO's last inspection in May 2021.

Compliance Inspection Results Compared	FY 2021 (FRS 2020)	FY 2022 (FRS 2020)
Standards Reviewed	12	24
Deficient Standards	0	0
Overall Number of Deficiencies	0	0
Repeat Deficiencies	0	0
Areas Of Concern	0	0
Corrective Actions	0	0
Facility Rating	N/A	Superior