



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
San Antonio Field Office
South Texas Family Residential Center
Dilley, TX**

December 11-13, 2018

**COMPLIANCE INSPECTION
for the
SOUTH TEXAS FAMILY RESIDENTIAL CENTER
Dilley, Texas**

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COMPLIANCE INSPECTION TEAM MEMBERS



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FACILITY OVERVIEW

The Office of Detention Oversight (ODO) conducted a compliance inspection of the South Texas Family Residential Center (STFRC), in Dilley, Texas (TX), from December 11-13, 2018¹. The STFRC opened in December 2014 and is owned and operated by CoreCivic. The U.S. Immigration and Customs Enforcement (ICE) Office of Enforcement and Removal Operations (ERO) began housing detainees at STFRC in 2014 under the oversight of ERO's Field Office Director (FOD) in San Antonio, Texas. The facility operates under the Family Residential Standards (FRS).

ERO Deportation Officers (DO) and a Detention Services Manager (DSM) are assigned to the facility. A facility administrator is responsible for daily facility operations and is supported by [REDACTED] personnel. Target Logistics manages STFRC's food services. ICE Health Services Corps provides medical services. The facility holds no accreditations.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity ²	2400
Average ICE Detainee Population ³	1443
Adult Female Resident Population (as of 12/11/2018)	713
Female Adolescent Population (10-17) (as of 12/11/2018)	123
Female Child Population (1-9) (as of 12/11/2018)	304
Adult Male Resident Population (as of 12/11/2018)	N/A
Male Adolescent Population (10-17) (as of 12/11/2018)	60
Male Child Population (1-9) (as of 12/11/2018)	277

This is ODO's first inspection of the STFRC. The Juvenile and Family Residential Management Unit (JFRMU), which maintains oversight of the facility, contracts with an independent private vendor (Danya International, LLC now DLH Corp.) to conduct annual inspections of the facility. The last yearly inspection conducted by DLH Corp. was completed in October 2018—inspectors found the facility compliant with all 36 standards.

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

² Data Source: ERO Facility List Report as of December 10, 2018.

³ *Ibid*

FY 2018 FINDINGS BY FRDS MAJOR CATEGORIES

FRDS STANDARDS INSPECTED ⁴	DEFICIENCIES
Part 1 – Safety	
Environmental Health and Safety	1
Sub-Total	1
Part 2 – Security	
Admission and Release	0
Funds and Personal Property	0
Searches of Residents	0
Sexual Abuse and Assault Prevention and Intervention	0
Staff-Resident Communication	1
Use of Physical Force and Restraints	0
Sub-Total	1
Part 3 – Order	
Discipline and Behavioral Management	0
Sub-Total	0
Part 4--Care	
Medical Care	0
Suicide Prevention and Intervention	0
Sub-Total	0
Part 5--Activities	
Education	0
Recreation	0
Telephone Access	1
Visitation	1
Sub-Total	2
Part 6--Justice	
Grievance System	0
Law Libraries and Legal Material	0
Sub-Total	0
Total Deficiencies	4

⁴For greater detail on ODO’s findings, see the *Inspection Findings* section of this report.

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 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-being¹. ODO identifies violations outlined in ICE detention standards, ICE policies, or operational procedures, as “deficiencies.” ODO also acknowledges instances where the facility resolves deficiencies prior to the completion of ODO’s inspection -- these corrective actions are annotated with “C” under the 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 also 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. Additionally, ODO’s findings inform ICE executive management in order to aid in the decision-making processes to better allocate resources across the agency’s entire detention inventory.

¹ ODO reviews the facility’s compliance with selected standards in their entirety.

DETAINEE RELATIONS

Fourteen randomly-selected female detainees voluntarily agreed to be interviewed by ODO. None of the residents made any allegations of abuse, discrimination, or mistreatment. Most residents reported satisfaction with facility services except for the concern listed below.

Medical Care: One resident claimed she arrived at the facility on November 19, 2018 with inhalers used to control her asthma which were taken away from her at intake. She claimed she went without an inhaler for four days before being seen by medical staff and prescribed one.

- Action Taken: ODO reviewed the resident's medical file and discussed the specifics of her concern with facility medical staff and determined the claim was unsubstantiated. After reviewing her medical file, ODO found documentation the resident indicated she had asthma during her initial pre-screening process, intake into the facility and subsequent physical assessment. Medical staff recorded her asthmatic medical condition on all three documents and a registered nurse (RN) referred the resident at intake to the facility physician on November 19, 2018. The physician conducted a physical examination the following day, November 20, 2018, and wrote an order for an albuterol inhaler to be used four times per day or as needed. Documentation showed the resident picked up the inhaler at 8:00 p.m. the same day. Additionally, ODO reviewed the resident's booking records in ICE's ENFORCE Alien Detention Module (EADM) and noted a U.S. Customs and Border Protection (CBP) Medical Alert was entered on November 17, 2018, which stated, "claims to have asthma."

COMPLIANCE INSPECTION FINDINGS

SAFETY

ENVIRONMENTAL HEALTH AND SAFETY (EH&S)

ISS Facility Services LLC, from Dilley, TX, is contracted to clean the resident's living quarters, shower, and toilet/sink areas. ODO observed the overall sanitation to be satisfactory throughout the facility, excluding the shower and toilet/sink areas in two different housing units (**Deficiency EH&S-1²**). Specifically, in housing units [REDACTED] and [REDACTED] ODO found what appeared to be black mold under two of the sinks, residue on the shower walls and floors, peeling tile and caulking at the threshold of the shower, and standing water in the crevices of the threshold.

Corrective Action: Prior to completion of the inspection, the facility initiated corrective action by immediately cleaning both sinks with a chlorine-based chemical, and the facility maintenance manager scheduled both counter tops to be replaced. Additionally, the facility advised ODO they would discuss the general sanitation of the shower and toilet/sink areas with the contract cleaning service.

ODO noted as an **Area of Concern** that the sanitation issues identified above were not identified during the most recent weekly inspections completed by the unit managers, or the monthly inspection completed by the safety manager.

SECURITY

STAFF-RESIDENT COMMUNICATION (SRC)

During inspection of the housing units, ODO found Department of Homeland Security (DHS) Office of Inspector General (OIG) Hotline Informational Posters were not posted in detainees' living suites, though they were posted in all common areas (**Deficiency SRC-1³**).

²"The facility administrator shall ensure that staff and residents maintain a high standard of facility sanitation and general cleanliness." See ICE FRS, Standard, Environmental Health and Safety, Section (IX)(2).

³ "Facility administrator shall ensure that posters are posted in every housing unit and in appropriate common areas (recreation areas, dining areas, processing areas, etc.)" See Family Residential Standard, Staff-Resident Communication, Section (V)(3)(c).

ACTIVITIES

TELEPHONE ACCESS (TA)

ODO found telephone access rules and hours both in the facility handbook and posted in all resident housing unit activity rooms. ODO observed posted information related to free legal services, pro bono lists, consulates lists, and OIG posters in every neighborhood complex and throughout the facility. However, ODO observed that the most up-to-date (February 23, 2018) version of the Free Call Platform List was posted in some, but not all, resident housing areas (**Deficiency-TA-1⁴**). Specifically, several dedicated rooms and suites had outdated Free Call Platform Lists from 2016 and 2017.



VISITATION (V)

The visiting hours for general and legal visits are from 8:00 a.m. to 8:00 p.m. daily, including weekends and holidays. There are no time restrictions on the length of visits. Visitors logs are maintained in the lobby area and the visiting room. ODO reviewed the separate logs for general and legal visits and found the legal visitors logs to be complete and in compliance with the requirements of the standard. The general visitors log was missing the component requiring visitors to state their immigration status (**Deficiency Visitation-1⁵**).

Corrective Action: Prior to completion of the inspection, the facility updated the general visitors logs by adding a column to ensure the immigration status of the visitor was specified.

CONCLUSION

During this inspection, ODO reviewed the facility's compliance with 16 standards under the FRS. ODO found the facility compliant with 12 standards. ODO identified four (4) deficiencies in the remaining four (4) standards. As described in the Compliance Findings section of this report, ODO observed two resident female bathrooms in the housing areas with what appeared to be mold under the sinks and standing water in the shower areas. ODO recommends ERO work with the facility to assess the quality controls in place as part of the facility's inspection process, as the issues outlined in the deficiency were the result of a continuous build-up of water/dirt over a period of time.

ODO recommends the ERO field office engage with the facility on this issue and consider whether

⁴"Current telephone numbers for the following will be posted in all housing areas and/or by public access telephones." See Family Residential Standards, Standard, Telephone Access, Section (V)(5).

⁵"Facility staff shall record the following information in the general visitor's log: c. The visitor's immigration status." See Family Residential Standard, Standard, Visitation, Section (V)(4)(c).

it is appropriate for ICE residents to have access to these rooms until a solution can be identified. Further, ODO recommends ERO work with the facility to resolve any other outstanding deficiencies as applicable and in accordance with contractual obligations.

Compliance Inspection Results Compared	FY 2018 (FRS)
Standards Reviewed	16
Deficient Standards	4
Overall Number of Deficiencies	4
Deficient Priority Components	N/A
Corrective Action	2