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Office of Professional Responsibility
ICE Inspections
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**Office of Detention Oversight
Compliance Inspection**

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

**Val Verde Correctional Facility
Del Rio, Texas**

December 6-8, 2022

COMPLIANCE INSPECTION
of the
VAL VERDE CORRECTIONAL FACILITY
Del Rio, Texas

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COMPLIANCE INSPECTION TEAM MEMBERS



Acting Team Lead
Senior Inspections and Compliance Specialist
Contractor
Contractor

ODO
ODO
Creative Corrections
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 Val Verde Correctional Facility (VVCF) in Del Rio, Texas, from December 6 to 8, 2022.¹ The facility opened in 2001 and is owned and operated by The Geo Group, Inc. (GEO). The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at VVCF in 2001 under the oversight of ERO's Field Office Director in San Antonio (ERO San Antonio). VVCF was inspected against the National Detention Standards (NDS) 2019.²

ERO has no staff assigned to the facility. A VVCF facility administrator handles daily operations and manages [REDACTED] support personnel. Single Source provides food services, GEO provides medical care, and US Commissary Solutions provides commissary services at the facility. The facility was accredited by the American Correctional Association in 2022. In July 2020, VVCF was audited for the Department of Justice (DOJ) Prison Rape Elimination Act (PREA) and was DOJ PREA certified.

Capacity and Population Statistics	Quantity
ICE Bed Capacity ³	[REDACTED]
Average ICE Population ⁴	[REDACTED]
Adult Male Population (as of December 6, 2022)	[REDACTED]
Adult Female Population (as of December 6, 2022)	[REDACTED]

This was ODO's first compliance inspection of VVCF.

¹ This facility holds male and female detainees with a low security classification level for periods less than 72 hours.

² ICE is an authorized user of this facility under a United States Marshals Service intergovernmental agreement contract, which does not specify an ICE NDS, and ODO inspected to the NDS listed on the ERO Facility List as of December 5, 2022.

³ Data Source: ERO Facility List as of December 5, 2022.

⁴ *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 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.⁵

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.

Beginning fiscal year (FY) 2022, ODO will conduct focused reviews of under 72-hour ICE detention facilities with an average daily population (ADP) of 1 or more detainees and over 72-hour ICE detention facilities with an ADP of 1-9 detainees. Additionally, ODO will conduct unannounced inspections of ICE detention facilities, regardless of ADP of detainees, as well as reviews of ICE special/emerging detention facilities/programs. As such, these facility inspections will result in an ODO Inspection Compliance Rating. ODO will conduct a complete review of several core standards, in accordance with the facility’s new contractually required ICE National Detention Standards, which include but are not limited to Medical Care/Health Care, Medical Care (Women)/Health Care (Females), Hunger Strikes, Suicide Prevention, Food Service, Environmental Health and Safety, Emergency Plans, Use of Force and Restraints/Use of Physical Control Measures and Restraints, Special Management Units, Educational Policy (FRS only), Behavior Management (FRS only), Admission and Release, Classification, and Funds and Personal Property.

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.

⁵ ODO reviews the facility’s compliance with selected standards in their entirety.

FINDINGS BY NATIONAL DETENTION STANDARDS 2019 MAJOR CATEGORIES

NDS 2019 Standards Inspected ^{6,7}	Deficiencies
Part 1 - Safety	
Environmental Health and Safety	0
Sub-Total	0
Part 2 - Security	
Use of Force and Restraints	0
Special Management Units	0
Sexual Abuse and Assault Prevention and Intervention	6
Sub-Total	6
Part 4 - Care	
Food Service	0
Hunger Strikes	0
Medical Care	0
Significant Self-Harm and Suicide Prevention and Intervention	0
Sub-Total	0
Part 5 - Activities	
Correspondence and Other Mail	4
Recreation	0
Sub-Total	4
Total Deficiencies	10

⁶ For greater detail on ODO's findings, see the *Compliance Inspection Findings* section of this report.

⁷ 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.

DETAINEE RELATIONS

ODO did not conduct any detainee interviews since the facility detainee population remained at zero throughout the inspection. Despite a zero-detainee population count, the facility maintains an active contract to house ICE detainees. Additionally, the VVCF ADP met ODO inspection criteria for focused reviews of under 72-hour ICE detention facilities.

COMPLIANCE INSPECTION FINDINGS

SECURITY

SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION (SAAPI)

ODO reviewed the facility SAAPI policy, interviewed facility staff, and found the policy did not include the following procedures:

- Coordinating with ERO San Antonio to ensure completion of an administrative and/or criminal investigation for all allegations of sexual abuse and assault (**Deficiency SAAPI-9⁸**);
- Coordinating with the ICE OPR (**Deficiency SAAPI-11⁹**); and
- The facility requirement to cooperate with all ICE/ERO audits to monitor facility compliance with sexual abuse and assault policies and standards (**Deficiency SAAPI-13¹⁰**).

ODO interviewed the facility PREA manager, reviewed facility written policy and procedures, and found no ERO San Antonio review nor approval of the facility SAAPI policy and procedures (**Deficiency SAAPI-14¹¹**).

⁸ “This policy must mandate zero tolerance toward all forms of sexual abuse and assault, outline the facility’s approach to preventing, detecting, and responding to such conduct, and include, at a minimum:

- a. Coordinating with ICE/ERO and other appropriate investigative agencies to ensure that an administrative and/or criminal investigation is completed for all allegations of sexual abuse and assault.”

See ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(A)(5)(a).

⁹ “This policy must mandate zero tolerance toward all forms of sexual abuse and assault, outline the facility’s approach to preventing, detecting, and responding to such conduct, and include, at a minimum: ...

- c. Procedures for coordination of internal administrative investigations with the assigned criminal investigative entity to ensure non-interference with criminal investigations, as well as coordination with the ICE Office of Professional Responsibility.”

See ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(A)(5)(c).

¹⁰ “This policy must mandate zero tolerance toward all forms of sexual abuse and assault, outline the facility’s approach to preventing, detecting, and responding to such conduct, and include, at a minimum: ...

7. The facility’s requirement to cooperate with all ICE/ERO audits and monitoring of facility compliance with sexual abuse and assault policies and standards.”

See ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(A)(7).

¹¹ “The facility’s written policy and procedures must be reviewed and approved by ICE/ERO.” *See* ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(A).

ODO reviewed the facility SAAPI program and found the facility administrator did not ensure full compliance of the facility with the detention standard within 90 days of adopting it (**Deficiency SAAPI-15**¹²).

ODO reviewed the VVCF SAAPI training program, interviewed the facility compliance manager, and found the facility does not conduct SAAPI refresher training biannually (**Deficiency SAAPI-26**¹³). **This is a priority component.**

ACTIVITIES

CORRESPONDENCE AND OTHER MAIL (COM)

ODO reviewed the facility COM policy and the site-specific detainee handbook and found the handbook did not include the following items:

- Information on sending and receiving correspondence (**Deficiency COM-2**¹⁴);
- Notification that a detainee may send mail, the procedure for sending mail, nor the instructions for addressing outgoing mail (**Deficiency COM-4**¹⁵);
- Notification that special correspondence may be opened in the detainee’s presence, inspected for contraband, but not read (**Deficiency COM-6**¹⁶); and
- The procedure to obtain writing implements, paper, and envelopes (**Deficiency COM-10**¹⁷).

¹² “The facility administrator shall ensure that, within 90 days of the adoption of this detention standard, written policy and procedures are in place and that the facility is in full compliance with its requirements and guidelines.” *See* ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(A).

¹³ “Training on the facility’s Sexual Abuse and Assault Prevention and Intervention Program shall be included in training for all employees and shall also be included in biannual refresher training thereafter.” *See* ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(E).

¹⁴ “The facility shall notify detainees in a language or manner that they understand of its policy on correspondence and other mail and shall include information on sending and receiving correspondence in the facility handbook.” *See* ICE NDS 2019, Standard, Correspondence and Other Mail, Section (II)(B).

¹⁵ “The facility shall notify detainees in a language or manner that they understand of its policy on correspondence and other mail and shall include information on sending and receiving correspondence in the facility handbook. At a minimum, the notification shall specify: ...

2. That a detainee may send mail, the procedure for sending mail, and instructions on how outgoing mail must be addressed.”

See ICE NDS 2019, Standard, Correspondence and Other Mail, Section (II)(B)(2).

¹⁶ “The facility shall notify detainees in a language or manner that they understand of its policy on correspondence and other mail and shall include information on sending and receiving correspondence in the facility handbook. At a minimum, the notification shall specify: ...

4. That special correspondence may only be opened in the detainee’s presence, and may be inspected for contraband, but not read.”

See ICE NDS 2019, Standard, Correspondence and Other Mail, Section (II)(B)(4).

¹⁷ “The facility shall notify detainees in a language or manner that they understand of its policy on correspondence and other mail and shall include information on sending and receiving correspondence in the facility handbook. At a minimum, the notification shall specify: ...

8. How to obtain writing implements, paper, and envelopes.”

See ICE NDS 2019, Standard, Correspondence and Other Mail, Section (II)(B)(8).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 10 standards under NDS 2019 and found the facility in compliance with 8 of those standards. ODO found 10 deficiencies in the remaining 2 standards. ODO recommends ERO San Antonio work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations. A uniform corrective action plan was not required for VVCF as this was ODO's first inspection of VVCF.

Compliance Inspection Results Compared	FY 2022 NDS 2019	FY 2023 NDS 2019
Standards Reviewed	N/A	10
Deficient Standards	N/A	2
Overall Number of Deficiencies	N/A	10
Priority Component Deficiencies	N/A	1
Repeat Deficiencies	N/A	N/A
Areas Of Concern	N/A	0
Corrective Actions	N/A	0
Facility Rating	N/A	Good