



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 Harlingen Field Office**

**Webb County Detention Center (CCA)
Laredo, Texas**

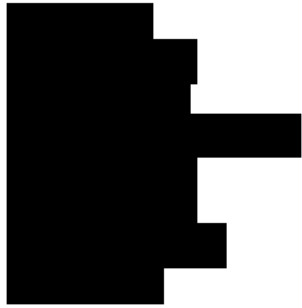
February 14-17, 2022

COMPLIANCE INSPECTION
of the
WEBB COUNTY DETENTION CENTER (CCA)
Laredo, Texas

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COMPLIANCE INSPECTION TEAM MEMBERS



| | |
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| Acting 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 Webb County Detention Center (CCA) (WCDC) in Laredo, Texas, from February 14 to 17, 2022.¹ The facility opened in 1998 and is owned and operated by CoreCivic. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at WCDC 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).

ERO has no staff assigned to the facility. A WCDC warden handles daily facility operations and manages [REDACTED] support personnel. Trinity Food Service provides food services, and CoreCivic provides medical care and commissary services at the facility. The facility was accredited by the American Correctional Association in January 2020. In August 2019, WCDC 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 February 14, 2022) | [REDACTED] |
| Adult Female Population (as of February 14, 2022) | [REDACTED] |

During its last inspection, in Fiscal Year (FY) 2021, ODO conducted an inspection of WCDC and found no deficiencies.

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

² Data Source: ERO Facility List as of February 14, 2022.

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 PERFORMANCE-BASED NATIONAL DETENTION STANDARDS (PBNDS) 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 |
| Sub-Total | 0 |
| Part 2 – Security | |
| Admission and Release | 0 |
| Custody Classification System | 0 |
| Funds and Personal Property | 0 |
| Post Orders | 0 |
| Searches of Detainees | 0 |
| Sexual Abuse and Assault Prevention and Intervention | 0 |
| Special Management Units | 0 |
| Use of Force and Restraints | 0 |
| Sub-Total | 0 |
| Part 4 – Care | |
| Food Service | 0 |
| Hunger Strikes | 0 |
| Medical Care | 0 |
| Medical Care (Women) | 0 |
| Personal Hygiene | 0 |
| Significant Self-harm and Suicide Prevention and Intervention | 0 |
| Sub-Total | 0 |
| Part 5 – Activities | |
| Correspondence and Other Mail | 0 |
| 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 | |
| Detention Files | 1 |
| Interview 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.

| | |
|---------------------------|----------|
| Detainee Transfers | 0 |
| Sub-Total | 1 |
| Total Deficiencies | 1 |

DETAINEE RELATIONS

ODO interviewed 12 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. ODO attempted to conduct detainee interviews via video teleconference; however, ERO San Antonio and the facility were not able to accommodate this request due to technology issues. As such, ODO conducted the detainee interviews via telephone.

Admission and Release: Three out of 12 detainees stated they did not receive the ICE National Detainee Handbook and WCDC detainee handbook in their respective native languages upon admission to WCDC.

- Action Taken: ODO reviewed the detainees' Intake Orientation Acknowledgement Forms and interviewed the WCDC classification and records supervisor. ODO found all three acknowledgement forms documented the dates of issue for the handbooks but did not reference the native languages of the detainees. On February 15, 2022, WCDC staff issued new ICE National Detainee Handbooks and the WCDC detainee handbook printed in the native language for two of the three detainees. The facility released the third detainee prior to issuing the translated handbooks.

COMPLIANCE INSPECTION FINDINGS

ADMINISTRATION AND MANAGEMENT

DETENTION FILES (DF)

ODO reviewed █ detainee detention files and found all █ files did not contain housing identifications cards (**Deficiency DF-9⁷**).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 24 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 23 of those standards. ODO found one deficiency in the remaining one standard. ODO commends facility staff members for their responsiveness during this inspection. ODO recommends ERO Harlingen work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations. A

⁷ "The file shall, at a minimum, contain the following documentation: ...
d. Housing Identification Card."

See ICE PBNDS 2011, Standard, Detention Files, Section (V)(B)(1)(d).

uniform corrective action plan was not required for ODO’s last inspection of WCDC which occurred in August 2021.

| Compliance Inspection Results Compared | Prior Inspection FY 2021 (PBNDS 2011) (Revised 2016) | Current Inspection FY 2022 (PBNDS 2011) (Revised 2016) |
|---|---|---|
| Standards Reviewed | 13 | 24 |
| Deficient Standards | 0 | 1 |
| Overall Number of Deficiencies | 0 | 1 |
| Repeat Deficiencies | 0 | 0 |
| Areas Of Concern | 0 | 0 |
| Corrective Actions | 0 | 0 |
| Facility Rating | N/A | Superior |