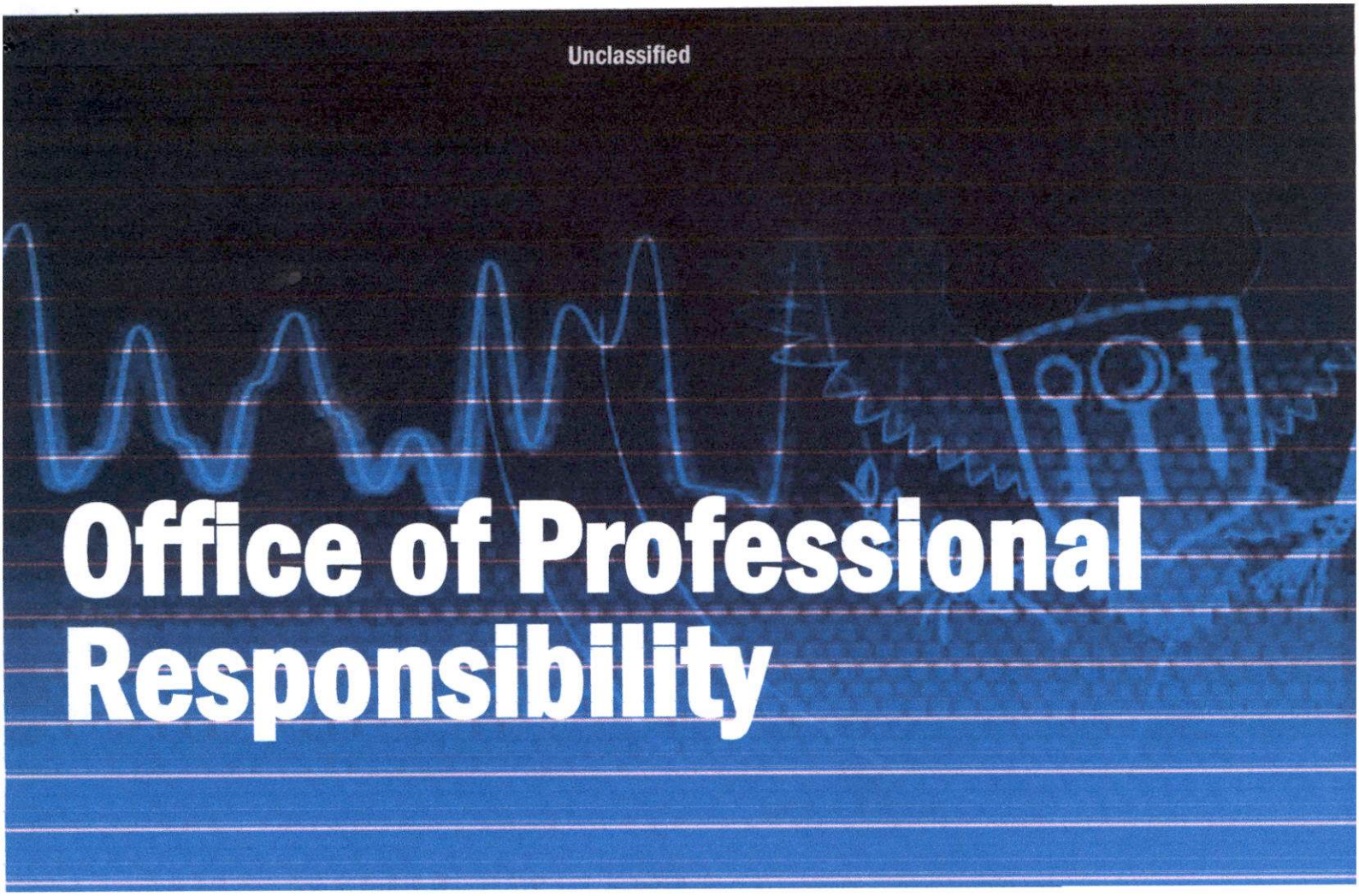

Office of Professional Responsibility

Webb County Detention Center

Inspection 2026-001-041

February 3-5, 2026

U.S. Immigration and Customs Enforcement

INSPECTION
of the
WEBB COUNTY DETENTION CENTER
Laredo, Texas

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INSPECTION TEAM MEMBERS

[redacted]	Team Lead	ODO
	Assistant Team Lead	ODO
	Senior Inspections and Compliance Specialist	ODO
	Senior Inspections and Compliance Specialist	ODO
	Senior Inspections and Compliance Specialist	ODO
	Contractor	Creative Corrections
	Contractor	Creative Corrections
	Contractor	Creative Corrections
	Contractor	Creative Corrections

FACILITY OVERVIEW

The U.S. Immigration and Customs Enforcement (ICE) Office of Professional Responsibility (OPR) Office of Detention Oversight (ODO) conducted an inspection of the Webb County Detention Center (WCDC) in Laredo, Texas from February 3 to 5, 2026.[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 is a dedicated ICE detention facility and operates under Performance-Based National Detention Standards (PBNDS) 2011 (Revised 2016).

ERO Harlingen does not have deportation officers assigned full-time to the facility, but deportation officers do conduct weekly scheduled visits on Tuesdays between 8 a.m. to 4p.m. A warden handles daily facility operations and manages [redacted] support personnel. Trinity Food Services 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 2023 and National Commission on Correctional Health Care in October 2021. In May 2025, 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 3, 2026)	[redacted]
Adult Female Population (as of February 3, 2026)	[redacted]

During its last rated inspection in Fiscal Year (FY) 2025, ODO found 1 deficiency in Grievance System.

[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 January 29, 2026.
[3] *Ibid.*

INSPECTION PROCESS

ODO conducts the following annual and biennial oversight inspections of ICE detention facilities to assess and rate each facility's compliance with their contractually obligated detention standards as noted in the Facility Overview section above.

- Dedicated facility: ODO conducts annual on-site inspections of dedicated inter-governmental service agreement (IGSA) facilities, contract detention facilities (CDF), family residential centers, and service processing centers.

- Non-dedicated IGSA facility:
  - For facilities with an average daily population (ADP) of 50 or more, ODO conducts biennial on-site inspections.
  - For facilities with an ADP of or 50 or less,
    - If the facility has not previously had a rated ODO inspection, then ODO conducts an initial on-site inspection, and
    - If the facility has had an ODO inspection, then the facility completes a biennial ODO-assisted self-inspection process (OASIP).

- U.S. Marshal Service (USMS): USMS CDF and intergovernmental agreement facilities complete biennial OASIPs.

In FY 2025, ODO implemented OASIPs, which replaced the annual Special Review inspections ODO conducted at most low ADP and/or short-term use facilities. This new inspection framework is more reflective of the actual operation demand of facilities with a low ADP and/or short-term use. OASIP inspections focus on facility compliance with detention standard requirements that directly affect detainee life, health, safety, and/or well-being. Facilities have 30 calendar days to complete the OASIP inspection and ODO staff will go on-site for 1 day towards the end of the 30-day inspection window to observe facility conditions, interview ICE detainees, and spot-check the facility's reported findings.[4]

ODO defines a "deficiency" as any violation of detention standards, policies, or operational procedures, as applicable. ODO highlights instances when the facility resolves deficiencies prior to the completion of the ODO inspection as corrective actions. Where applicable, these corrective actions are annotated with a "C" in the *Inspection Findings* section of the report.

Upon completion of each inspection, ODO conducts a closeout briefing with facility and local ERO officials to discuss preliminary findings. ODO shares a summary of these findings with ERO management officials. Thereafter, ODO provides ICE leadership with a final report to: (i) assist ERO in developing and initiating a uniform corrective action plan (UCAP); 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.

[4] When ODO conducts on-site inspections for non-OASIP facilities, the facility is notified 4 weeks before the inspection and ODO is on-site for 2-3 business days conducting the inspection.

FINDINGS BY PERFORMANCE-BASED NATIONAL DETENTION STANDARDS 2011 (REVISED 2016) MAJOR CATEGORIES

PBNDS 2011 (Revised 2016) Standards Inspected[5]	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
Facility Security and Control	0
Funds and Personal Property	0
Population Counts	0
Post Orders	0
Searches of Detainees	0
Sexual Abuse and Assault Prevention and Intervention	0
Special Management Units	0
Staff-Detainee Communication	0
Use of Force and Restraints	0
Sub-Total	**0**
Part 4 - Care	
Food Service	3
Hunger Strikes	1
Medical Care	3
Medical Care (Women)	0
Personal Hygiene	0
Significant Self-harm and Suicide Prevention and Intervention	2
Sub-Total	**9**
Part 5 - Activities	
Correspondence and Other Mail	0
Trips for Non-Medical Emergencies	0
Marriage Requests	0
Religious Practices	0
Telephone Access	0
Voluntary Work Program	0
Sub-Total	**0**
Part 6 - Justice	
Grievance System	0

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

Law Libraries and Legal Materials	0
Sub-Total	**0**
Part 7 - Administration and Management	
Detention Files	0
Detainee Transfers	0
Sub-Total	**0**
Total Deficiencies	**9**

DETAINEE RELATIONS

ODO interviewed 31 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. All detainees reported satisfaction with facility services.

INSPECTION FINDINGS

CARE

FOOD SERVICE (FS)

ODO toured the FS area and found low polish sausage temperature readings of 131.5 Fahrenheit (F) degrees on the FS serving line **(Deficiency FS-81[6]). This is a priority component**.

ODO reviewed 546 multi-tank conveyor machine temperature log entries and found 44 out of 546 with low final rinse temperatures between 171- and 179-F degrees. Also, ODO observed a low final rinse temperature at 160 F degrees during the inspection **(Deficiency FS-371[7])**.

ODO observed the FS area and found high temperatures for sack lunch meals with turkey, ham, and cheese at 44 F degrees **(Deficiency FS-438[8])**.

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[6] "Before and during the meal, the CS in charge shall inspect the food service line to ensure: …
3) sanitary guidelines are observed, with hot foods maintained at a temperature of at least 140 F degrees (120 F degrees in food trays) and foods that require refrigeration maintained at 41 F degrees or below."
See ICE PBNDS 2011 (Revised 2016), Standard, Food Service, Section (V)(D)(2)(a)(3).

[7] "The following temperatures must be maintained for hot-water sanitizing: …
c. Multi-tank, conveyor machine: wash temperature of 150 F degrees; pumped rinse, 160 F degrees; final rinse, 180 F degrees."
See ICE PBNDS 2011 (Revised 2016), Standard, Food Service, Section (V)(J)(7)(g)(3)(c).

[8] "The following procedures apply when receiving or storing food: …
e. Store perishables at 35-40 F degrees to prevent spoilage and other bacterial action, and maintain frozen foods at or below zero degrees."
See ICE PBNDS 2011 (Revised 2016), Standard, Food Service, Section (V)(K)(3)(e).

HUNGER STRIKES (HS)

ODO reviewed 24 medical staff training records and found in 1 out of 24 medical staff training records, no documented annual hunger strike training **(Deficiency HS-1.[9])**.

MEDICAL CARE (MC)

ODO reviewed 25 detainee medical records and found in 1 out of 25 detainee medical records, the facility's health care provider did not conduct a comprehensive health assessment, including a physical examination and mental health screening until 25 days after the detainee's arrival at the facility **(Deficiency MC-137.[10]). This is a priority component.**

ODO reviewed the medical records of 10 detainees who were administered psychotropic medications and found in 2 out of 10 medical records, facility medical staff did not obtain a separate documented informed consent that included a description of the medication's side effects **(Deficiency MC-241.[11])**.

ODO reviewed all 11 medical care summaries of detainees for the inspection period and found in 2 out of 11 summaries, facility medical staff did not include the suicide watch history for a detainee and the pregnancy history for another detainee **(Deficiency MC-278.[12])**.

SIGNIFICANT SELF-HARM AND SUICIDE PREVENTION AND INTERVENTION (SSHSPI)

ODO reviewed 7 suicide watch records and found in each record facility clinical staff did not conduct welfare checks at least every 8 hours for suicidal detainees placed in isolated confinement. Specifically, staff conducted 36 welfare checks between May 9, 2025, and January 18, 2026, at intervals ranging from 9 to 22 hours. Additionally, a facility qualified clinician also did not provide documented daily mental health treatment for three of seven suicidal detainees **(Deficiency SSHSPI-35.[13])**.

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[9] "All staff shall be trained initially and annually thereafter to recognize the signs of a hunger strike, and to implement the procedures for referral for medical assessment and for management of a detainee on a hunger strike." *See* ICE PBNDS 2011 (Revised 2016), Standard, Hunger Strikes, Section (V)(A).

[10] "Each facility's health care provider shall conduct a comprehensive health assessment, including a physical examination and mental health screening, on each detainee within 14 days of the detainee's arrival unless more immediate attention is required due to an acute or identifiable chronic condition." *See* ICE PBNDS 2011 (Revised 2016), Standard, Medical Care, Section (V)(M).

[11] "Prior to the administration of psychotropic medications, a separate documented informed consent, that includes a description of the medication's side effects, shall be obtained." *See* ICE PBNDS 2011 (Revised 2016), Standard, Medical Care, Section (V)(AA)(4).

[12] "Upon removal or release from ICE custody, the detainee shall be provided medication, referrals to community-based providers as medically appropriate, and a detailed medical care summary. This summary should include instructions that the detainee can understand and health history that would be meaningful to future medical providers." *See* ICE PBNDS 2011 (Revised 2016), Standard, Medical Care, Section (V)(BB)(4)(c)(2).

[13] "All suicidal detainees placed in an isolated confinement setting will receive continuous one-to-one monitoring, welfare checks at least every 8 hours conducted by clinical staff, and daily mental health treatment by a qualified clinician." *See* ICE PBNDS 2011 (Revised 2016), Standard, Significant Self-Harm and Suicide Prevention and Intervention, Section (V)(F).

ODO reviewed 4 transfer records for detainees on suicide watch and found in 1 out of 4 records facility medical staff did not include the suicide watch history from August 9 to 19, 2025, in the medical summary report for a detainee transferred on September 11, 2025 **(Deficiency SSHSPI-58.[14])**.

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 29 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 25 of those standards. ODO found 9 deficiencies in the remaining 4 standards. Since WCDC's last inspection in February 2025, the facility has trended downward. WCDC went from 1 deficient standard and 1 deficiency in February 2025, to 5 deficient standards and 11 deficiencies, including 2 priority deficiencies, during this most recent inspection. ODO received WCDC's completed UCAP for its last inspection in May 2025. ODO recommends ERO Harlingen continue to work with the facility to resolve the deficiencies that remain outstanding in accordance with contractual obligations.

Inspection Results Compared	FY 2025 Full Inspection (PBNDS 2011 (Revised 2016))	FY 2026 Full Inspection (PBNDS 2011 (Revised 2016))
Standards Reviewed	28	29
Deficient Standards	1	4
Overall Number of Deficiencies	1	9
Priority Component Deficiencies	0	2
Repeat Deficiencies	0	0
Areas Of Concern	0	0
Corrective Actions	0	0
Facility Rating	Superior	Good

[14] "The patient's "medical summary report" shall be transferred in accordance with standard "7.4 Detainee Transfers."" *See* ICE PBNDS 2011 (Revised 2016), Standard, Significant Self-Harm and Suicide Prevention and Intervention, Section (V)(G)(1).

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