# ICE Detention Standards Compliance Review

**Houston Contract Detention Facility** 

February 3-5, 2009

REPORT DATE - February 10, 2009



# reative corrections

Contract Number: ODT-6-D-0001 Order Number: HSCEOP-07-F-01016

> Executive Vice President Creative Corrections 6415 Calder, Suite B Beaumont, TX 77706

U.S. Immigration and Customs Enforcement Detention Standards Compliance Unit 500 12th Street, SW Washington, DC 20536

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February 10, 2009

## MEMORANDUM FOR: James T. Hayes, Jr., Director Office of Detention and Removals Operations

FROM:

b6, b7c b6, b7c b6, b7c b6, b7c

SUBJECT:

Houston Contract Detention Facility Annual Detention Review

Creative Corrections conducted an Annual Detention Review (ADR) of the Houston Contract Detention Facility (HCDF), operated by Corrections Corporation of America for ICE, located in Houston, Texas, on February 3-5, 2009. As noted on the attached documents, the team of Subject Matter Experts included b6.67c Security; b6 Health Services; b6 Environmental Health and Safety, and b6 Food Services.

A closeout meeting was conducted on February 5, 2009, with Warden b6, b7c and a number of department heads and supervisors. ICE staff in attendance included b6, b7c Field Office Director, and b6, b7c Assistant Field Office Director. The closeout included a discussion of all aspects of this review.

## **Type of Review**

This review is a scheduled Detention Standard Review to determine general compliance with established ICE National Detention Standards for facilities used for over 72 hours.

## **Review Summary**

The HCDF is accredited by the National Commission on Correctional Health Care, the American Correctional Association, and the Joint Commission on Accreditation of Healthcare Organizations.

## **Standards Compliance**

The following statistical information provides a direct comparison of the 2008 ADR and this ADR conducted for 2009.

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February 2008 Review	February 2009 Review
Compliant 37	Compliant 37
Deficient 0	Deficient 0
At-Risk 0	At-Risk 0
Not-Applicable 1	Not-Applicable 1

# **Recommended Rating and Justification**

It is the RIC recommendation that the facility receive a rating of "Good."

# **<u><b>RIC**</u> Assurance Statement

All findings of this review have been documented on the Detention Review Worksheet and are supported by the written documentation contained in the review file.

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#### Department Of Homeland Security Immigration and Customs Enforcement

	•	· · ·		
A. Type of Faci	lity Review	ved	· · ·	
ICE Ser	vice Proces	ssing Center		
		ntion Facili		
		ental Servic		ent
		•		I
B. Current Insp	iection		•	· . ·
Type of Inspection			·····	· · · · ·
Field Office	🕅 HO Insi	pection		
Date[s] of Facility F			· · · ·	
February 3-5, 20		2		
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~				· · · · ·
C. Previous/Mo	st Recent I	Facility Revi	iew	
Date[s] of Last Faci	lity Review			••••••
February 5-7, 20	08	• •		· .
Previous Rating				
Superior C	iood 🛛 A	cceptable 🛄	Deficien	t 🗌 At-Risk
D. Name and L	ocation of ]	Facility		
Name				
<b>Houston Contra</b>		n Facility		
Address (Street and	Name)	n Facility		
Address (Street and 15850 Export Pla	Name) I <b>za Drive</b>	on Facility		
Address (Street and 15850 Export Pla City, State and Zip 6	Name) I <b>za Drive</b> Code	on Facility		
Address (Street and 15850 Export Pla	Name) I <b>za Drive</b> Code	on Facility		
Address (Street and 15850 Export Pla City, State and Zip 6	Name) I <b>za Drive</b> Code	on Facility		
Address (Street and 15850 Export Pla City, State and Zip 4 Houston, Texas 7 County Harris	Name) Iza Drive Code 17032			
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#### **E. ICE Information**

Name of Inspec	ctor (Last Name, Title and Duty Station)
b6, b7c	/ RIC / Creative Corrections
Name of Team	Member / Title / Duty Location
b6, b7c	/ SME / Security
Name of Team	Member / Title / Duty Location
b6	/ SME / Medical
Name of Team	Member / Title / Duty Location
	ME / Food Service
	Member / Title / Duty Location
b6 /	SME / Environmental Health and Safety

#### F. CDF/IGSA Information Only

Contract Number	Date of Contract or IGSA
ACD-3-C-0015	October 1, 2003
Basic Rates per Man-Day	
\$89.65	
Other Charges: (If None,	Indicate N/A)
	• •
Estimated Man-days Per Y	ear:

JCAHO, NCCHC Check box if facility has no accreditation[s] H. Problems / Complaints (Copies must be attached) The Facility is under Court Order or Class Action Finding Class Action Order Court Order The Facility has Significant Litigation Pending Major Litigation Life/Safety Issues

List all State or National Accreditation[s] received:

Check if None.

#### I. Facility History

Date Built

#### April 1984

Date Last Remodeled or Upgraded

G. Accreditation Certificates

## July 2005

Date New Construction / Bed space Added

#### **July 2005**

Future Construction P	: No date set
Current Bed space	Future Bed space (# New Beds only)
905	Number: 595 Date: No date set

#### J. Total Facility Population

Total Facility Intake for previous 12 months	
19,202	
Total ICE Man-days for Previous 12 months	
331,708	

#### K. Classification Level (ICE SPCs and CDFs Only)

		L-1	L-2	L-3
Adult Male		529	130	74
Adult Female		116	11	2
· .	·			

L. Facility Capacity Rated Operational Emergency

<b>Facility</b> holds	<b>Juveniles</b> Off	enders 16 and old	er as Adults	
Aduit Female	165	165	165	
Adult Male	740	- 740	740	•

## M. Average Daily Population

	ICE	USMS	Other
Adult Male	765.2	0	0
Adult Female	165	0	0

#### N. Facility Staffing Level

Security:	• •	Support:	•	•.

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331.230

#### Significant Incident Summary Worksheet

For ICE to complete its review of your facility, the following information <u>must be completed</u> prior to the scheduled review dates. The information on this form should contain data for the past twelve months in the boxes provided. The information on this form is used in conjunction with the ICE Detention Standards in assessing your Detention Operations against the needs of the ICE and its detained population. This form should be filled out by the facility prior to the start of any inspection. Failure to complete this section will result in a delay in processing this report and the possible reduction or removal of ICE' detainees at your facility.

Incidents	Description	Jan – Mär	Apr – Jun	Jul – Sept	Oct – Dec
Assault:	Types (Sexual <sup>2</sup> , Physical, etc.)	Р	· P	Р	Р
Offenders on Offenders <sup>1</sup>	With Weapon	0	0	0	0
	Without Weapon	8	15	3	7
Assault:	Types (Sexual Physical, etc.)	Р	Р	Р	P
Detainee on Staff	With Weapon	Ó	0	0	0
	Without Weapon	0.	1	0	1
Number of Forced Moves, incl. Forced Cell moves <sup>3</sup>		. 0	0	0	0
Disturbances <sup>4</sup>		0	· 0·	0	0
Number of Times Chemical Agents Used		1.	4	2	1
Number of Times Special Reaction Team Deployed/Used		0	0	0	0
# Times Four/Five Point	Number/Reason (M=Medical, V=Violent Behavior, O=Other)	N/A	N/A	N/A	N/A
Restraints applied/used	Type (C=Chair, B=Bed, BB=Board, O=Other)	N/A	N/A	N/A	N/A
Offender / Detainee Medical Referrals as a result of injuries sustained.		· 3	4	1	0
Escapes	Attempted	. 0	0	0	0
	Actual	0	0	0	0
Grievances:	# Received	2	5	5	8
	# Resolved in favor of Offender/Detaince	0	0	1	2
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)	N/A	N/A	N/A	N/A
	Number	0	0	0	0
Psychiatric / Medical Referrals	# Medical Cases referred for Outside Care	57	55	68	36
	# Psychiatric Cases referred for Outside Care	2	2	4	3

Any attempted physical contact or physical contact that involves two or more offenders

Oral, anal or vaginal penetration or attempted penetration involving at least 2 parties, whether it is consenting or non-consenting

Routine transportation of detainees/offenders is not considered "forced"

Any incident that involves four or more detainees/offenders, includes gang fights, organized multiple hunger strikes, work stoppages, hostage situations, major fires, or other large scale incidents.

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Пнял	CE Detention Standards Review Summary Report	
	eptable 2. Deficient 3. At Risk 4. Repeat Finding 5. Not Applicable	
	Access Standards	1. 2. 3. 4. 5.
1.	Access to Legal Materials	
2.	Group Presentations on Legal Rights	
3.	Visitation	
4.	Telephone Access	
Detain	ee Services	
5.	Admission and Release	
6.	Classification System	
7.	Correspondence and Other Mail	
8.	Detainee Handbook	
9.	Food Service	
10.	Funds and Personal Property	
11.	Detainee Grievance Procedures	
12.	Issuance and Exchange of Clothing, Bedding, and Towels	
13.	Marriage Requests	
14.	Non-Medical Emergency Escorted Trip	
15.	Recreation	
16.	Religious Practices	
17.	Voluntary Work Program	
and the owner of the owner own	Services	
18.	Hunger Strikes	
19.	Medical Care	
20.	Suicide Prevention and Intervention	
21.	Terminal Illness, Advanced Directives and Death	
	y and Control	
22.	Contraband	
23.	Detention Files	
24.	Disciplinary Policy	
25.	Emergency Plans	
26.	Environmental Health and Safety	
27.	Hold Rooms in Detention Facilities	
28.	Key and Lock Control Reputation Counts	
29. 30.	Population Counts Post Orders	
30. 31.	Security Inspections	
31. 32.	Special Management Units (Administrative Segregation)	
33 <b>.</b>	Special Management Units (Auministrative Segregation)	
34.	Tool Control	
35.	Transportation (Land management)	
36.	Use of Force	
37.	Staff / Detaince Communication (Added August 2003)	
38.	Detainee Transfer (Added September 2004)	

All findings (Deficient and At-Risk) require written comment describing the finding and what is necessary to meet compliance.

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#### **RIC Review Assurance Statement**

By signing below, the Reviewer-In-Charge (RIC) certifies that all findings of noncompliance with policy or inadequate controls contained in the Inspection Report are supported by evidence that is sufficient and reliable. Furthermore, findings of noteworthy accomplishments are supported by sufficient and reliable evidence. Within the scope of the review, the facility is operating in accordance with applicable law and policy, and property and resources are efficiently used and adequately safeguarded, except for the deficiencies noted in the report.

Reviewer-In-Charge: (Print Name)	Signature
b6, b7c	b6, b7c b6, b7c for
Title & Duty Location	Date
· ·	
RIC, Creative Corrections	February 5, 2009

Team Members		
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location	· · .
b6, b7c SME, Security	b6 , SME, Medical	
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location	· · ·
56 SME, Food Service	SME, Environmental Health and Safety	

<b>Recommended Rating:</b>	Superior
	Good Good
•	Acceptable
	Deficient
	At-Risk

Comments: This facility maintains a very high level of sanitation. Housing pods were clean and uncluttered, and detainees behaved in an orderly manner. All written policies and procedures are in compliance with ICE Detention Standards.

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