

June 08, 2007

MEN	$I \cap R$	ANDI	$\mathbf{I}\mathbf{M}$	$FOR \cdot$

John P. Torres

Director of Detention and Removal

Headquarters Detention and Removal Operations

FROM:

Reviewer- in Charg

San Antonio Detention and Removal Operations

SUBJECT:

Review Summary Report for Kinney County Detention Center

Annual Detention Review

On May 22, through May 24, 2007 a review of the Kinney County Detention County Center located within the San Antonio Region was conducted. This review was performed under the supervision of Reviewer- in Charge (RIC).

Below:

Reviewer- in Charge (RIC).

Below:

IEA, from the Laredo Texas Sub Office, which is also in the San Antonio Region, assisted the RIC.

The review measured compliance with the National Detention Standards Operations; Attached to this memorandum is a copy of the original G-324a Detention Inspection Form and a copy of the worksheet. All original worksheets and working papers are maintained in the appropriate file system and are available for review by the Review Authority.

Type of Review:

This is the second annual review conducted by officers assigned to the San Antonio Region as directed by HQDRO. This review was conducted again to ensure the facility complies with the National Detention Standards Operations. At the time this inspection was conducted, the Agency had no detainees at this facility.

Review Summary:

Although this facility had no detainees at the time of our inspection, it was determined through the review that the Kinney County Detention Center is presently operating at overall "Acceptable" level. The team members have identified a couple of minor issues. All of these issues have been discussed with the facility's Administrators, and they have indicated that they would be in full compliance with all the elements in each standard discussed.

Subject: Detention Review Summary Report

Page 2

Review Findings:

Considering that this facility had no detainee at the time of our inspection, they have kept up with all the elements in the National Detention Standards. We identified a couple of minor issues on some of the standards during our inspection. Each of those standards are identified and a short summary have been provided regarding those standards or procedures that we discussed with their Administrator.

Standards Summary Findings:

There were several standards that were modified, corrected, and implemented during our inspection, which placed this facility overall in compliance with the National Detention Standards.

Admission and Release

The findings under the standard for the Detainees Fund and Personal Property were determined to be in compliance with the ICE National Detention Standards. During our inspection and after their corporate office personnel modified their funds and personal property receipts to have two officers' signatures did they meet the ICE National Detention Standards. The Administrator was going to put an SOP for all staffs involved in the process within a week to notify them of the new changes.

Health Service

Their Hunger Strike syllabus policy was not notated in their training curriculum. The Administrator indicated that this subject is always discussed during their orientation by their medical staff. They submitted a modified training curriculum with the changes during our inspection to meet the National Detention Standards.

Classification

At the time this inspection was conducted, the Agency had no detainees at this facility. The San Antonio Resident office has a Standard Operation Procedure (SOP) pending regarding the classification of detainees place in the San Antonio Resident Region. All detainees placed within the San Antonio Resident Region will have the initial classification on their I-203. This facility's classification procedures comply with the National Detention Standards, which will be utilized in case a detainee needs to be reclassified after being place in their jail.

Detainee Telephone Access

At the time of this inspection was conducted the Agency had no detainees at this facility. This facility was given the latest Pro- Bono list during the inspection to post in their units. Arrangements to install the PCS telephone system will be made once ICE approves the placement of detainees in this facility. Preferably before detainees are place in this facility. They meet the minimum ratio of one telephone per 25 detainees in their dorm areas. Currently this facility telephone system had a telephone message that notifies detainees that their telephone calls might be monitored, but the Administrator went ahead and made signs and had them posted next to the detainee's telephones as require under the National Detention Standards.

Correspondence and other mail

Subject: Detention Review Summary Report

Page 3

This facility amended their policy to read that if their staffs encounter original identity documents (passport, birth certificates etc.) they will immediately removed and forward them to ICE staff for placement in A-files. It also states that they would automatically provide a copy to the detainee and place them in their property.

Issuance and Exchange of Clothing, Bedding, and Towels

This facility issues three pair of socks and undergarments to all incoming detainees. This facility meets the National Detention Standards in regards to having daily exchange of these items. The facility conducts laundry twice a week giving the detainees the opportunity to exchange their socks and undergarments and provide them with clean exchanged daily as required under the National Detention Standards.

Terminal Illness, Advanced Directives, Do Not Resituate Order

This facility has and meets the National Detention Standards under these elements, but the Administrator modified their policy during our inspection to read that if they receive detainees that are Terminal Illness they would notify the ICE personnel and have the detainee moved from their facility. The facility Administrator said that their facility is not equipped to handle these types of detainees. They made the modification in their policy to read that, otherwise their policies will difference their practice.

Voluntary Work Program

At the time this inspection was conducted, the Agency had no detainees at this facility will not have ICE detainees participating in the Voluntary Work Program. ICE detainees will still be responsible to maintain their living areas clean.

RIC Observations:

I was impressed with the way this facility was ready for our inspection and with their cooperation throughout the inspection. At the time this inspection was conducted, the Agency had no detainees at this facility. The facility was well kept and their staffs were sharp in answering any questions we had.

RIC Issues and Concerns

I had no issues or concerns with this facility.

Recommended Rating and Justification:

It is the Reviewer in Charge recommendation that the facility receive a rating of "overall." Acceptable ".

RIC Assurance Statement:

All findings of this review have been documented on Form G-324A and are supported by the written documentations contained in the review file.

Review Authority The signature below constitutes review of this report and acceptance by the Review Authority. OIC/CEO will have 30 days from receipt of this report to respond to all findings and recommendations. HQDRO EXECUTIVE REVIEW: (Please Print Name) Title JUL 1 3 2007 Chief **Superior** Final Rating: Good Acceptable Deficient At-Risk No Rating Comments: The Review Authority concurs with the Acceptable rating.

HEADQUARTERS EXECUTIVE REVIEW

Name of Team Member / Title / Duty Location

Other Charges: (If None, Indicate N/A)

\$12.71 per hours; ; ;

\$51.20



	A. Type of Facility Reviewed				
	ICE Service Processing Center				
	ICE Contract Detention Facility	G. Accreditation	n Certificate	es	
	ICE Intergovernmental Service Agreement	List all State or N	lational Accre	editation[s] recei	ved:
Ł	TOLING GOVERNMENT DEL VICE I STEEMENT			[.]	
	B. Current Inspection	Check box if	facility has n	o accreditation[s	1
ſ	Type of Inspection				<u> </u>
		H. Problems / C	Complaints	(Conjec must be	attached)
1	Field Office HQ Inspection	The Facility is un			
	Date[s] of Facility Review	Court Order			
	May 22- May 23, 2007			Class Action Ord	
		The Facility has S			
	C. Previous/Most Recent Facility Review	Major Litigati		Life/Safety Issue	es
	Date[s] of Last Facility Review	☐ Check if Non	ie.		
	Apri.1 27-28, 2006				
	Previous Rating	I. Facility Hist	tory		
	Superior Good Acceptable Deficient At-Risk	Date Built			
l		December 2004			
	D. Name and Location of Facility	Date Last Remod	leled or Unor	aded	
١	Name	N/A	icica or opgi	udod	
	Kinney County Detention Center	Date New Constr	nuction / Dode	maga Addad	
ı	Address (Street and Name)		luction / Beus	space Added	
	1501 RR 1331	N/A	. 51 1		
	City, State and Zip Code	Future Construct			
Ì	Bracketville, Texas 78832	Xes No			
	County	Current Bedspace		Bedspace (# Ne	
	Kinney Name and Title of Chief Evecutive Officer (Wander/OIC/Superintendent)	384	Numb	er: 400 Date: 01	/08
	Name and Title of Chief Executive Officer (Warden/OIC/Superintendent)	V-11.1.			
Ì	Telephone # (Include Area Code)	J. Total Facilit	ty Population	n	
	830 b6,b7c	Total Facility Int			
	Field Office / Sub-Office (List Office with oversight responsibilities)	1483	F		
Ì	San Antonio, Texas	Total ICE Manda	ve for Previo	us 12 months	
	Distance from Field Office	0	tys for 1 fevio	us 12 months	
	136 miles	<u> </u>			
		** 60 In In			
	E. ICE Information	K. Classification			
	Name of Inspector (Last Name, Title and Duty Station)		L-		L-3
	/ Supervisory Immigration Customs Agent /	Adult Male	N/.	A N/A	N/A
	San Antonio	Adult Female	N/A	A N/A	N/A
	Name of Team Member / Title / Duty Location				
	/ Immigration Customs Enforcment / San	L. Facility Cap	pacity		
	Antonio, Texas		Rated	Operational	Emergency
١	Name of Team Member / Title / Duty Location	Adult Male	384	384	400
1	/ /	Adult Female	0	0	0
	1 1 1	1 A Addit I Ciliale	v	ı U	ı U

		M. Average Daily Population			
F. CDF/IGSA Inform	ation Only		ICE	USMS	Other
Contract Number	Date of Contract or IGSA	Adult Male	0	393	0
M80-05-0010	April 01, 2007	Adult Female	0	42	27
Basic Rates per Man-Day	y				

Addit Pelliate	U	42	2/
N. Facility Staffing	Level		
Security:	Sur	port:	

Facility holds Juveniles Offenders 16 and older as Adults

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 – Mar	Apr – Jun	Jul – Sept	Oct – Dec
		S-0	S-0	S-0	S-0
Assault:	Types (Sexual ² , Physical, etc.)	P-7	P-0	P-3	P-3
Offenders on Offenders ¹	With Weapon	0	0	0,	0
Officiacis	with weapon	7	0	3	3
	Without Weapon	,			
		S-0	S-0	S-0	S-0
Assault:	Types (Sexual Physical, etc.)	P-0	P-0	P-0	P-0
Detainee on Staff	With Weapon	0	0	0	0
	Without Weapon	0	0	0	0
Number of Forced Moves,		1	0	1	0
incl. Forced Cell moves ³		1		1	
Disturbances ⁴		0	0	0	0
Number of Times Chemical		0	0	1	0
Agents Used					
Number of Times Special		0	0	0	0
Reaction Team					
Deployed/Used	Number/Reason (M=Medical,	M-0	M-0	M-0	M-0
# Times Four/Five Point	V=Violent Behavior, O=Other)	V-0	V-0	V-0	V-0
Restraints applied/used	, totom Bonavion, o concer)	O-0	0-0	O-0	O-0
	Type (C=Chair, B=Bed,	C-0	C-0	C-0	C-0
	BB=Board, O=Other)	B-0	B-0	B-0	B-0
		BB-0	BB-0	BB-0	BB-0
		O-0	O-0	O-0	O-0
Offender / Detainee Medical Referrals as a result of injuries sustained.		0	0	0	15
Escapes	Attempted	0	0	0	0
	Actual	0	0	0	0
Grievances:	1101441	1	0	1	1
	# Received				·
	# Resolved in favor of Offender/Detainee	0	0	0	0
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)	NONE	NONE	NONE	NONE
	Number	0	0	0	0
Psychiatric / Medical Referrals	# Medical Cases referred for Outside Care	7	4	10	5

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.

# Psychiatric Cases referred for	2	1	1	1
Outside Care				

DHS/	ICE Detention Standards Review Summary Report	
1. Acc	ceptable 2. Deficient 3. At Risk 4. Repeat Finding 5.Not Applicable	
Legal	Access Standards	1. 2. 3. 4. 5.
1.	Access to Legal Materials	
2.	Group Presentations on Legal Rights	
3.	Visitation	
4.	Telephone Access	
Detai	nee 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	
	th Services	
18.	Hunger Strikes	
19.	Medical Care	
20.	Suicide Prevention and Intervention	
21.	Terminal Illness, Advanced Directives and Death	
	rity 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	
29.	Population Counts	
30.	Post Orders	
31.	Security Inspections	
32.	Special Management Units (Administrative Segregation)	
33.	Special Management Units (Disciplinary Segregation)	
34.	Tool Control	
35.	Transportation (Land management)	
36.	Use of Force	
37.	Staff / Detainee 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.

RIC Review Assurance Statement				
contained in the Inspection Report are supported by evidence th accomplishments are supported by sufficient and reliable evider	all findings of noncompliance with policy or inadequate controls at is sufficient and reliable. Furthermore, findings of noteworthy ace. Within the scope of the review, the facility is operating in sources are efficiently used and adequately safeguarded, except for the			
Reviewer-In-Charge: (Print Name)	b6,b7c			
Title & Duty Location				
Superviasory Immgration Customs Agent / San Antonio, Texas	June 7, 2007			
Team Members				
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location			
b6,b7c Immigartion Customs Enforcement Officer San Antonio, Texas				
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location			
Recommended Rating: Good Acceptable Deficient				

Comments: The finding of are supported by the findings of the review team and are documented within the Form G-324A and accompanying worksheets.

At-Risk

MANAGEMENT REVIEW	
Review Authority	
The signature below constitutes review of this report a days from receipt of this report to respond to all fin	nd acceptance by the Office of Detention and Removal. The Facility has 30 adings and recommendations.
HQDRO MANAGEMENT REVIEW: (Print Name)	Signature
Title	Date
Final Rating: Superior Good Acceptable Deficient At-Risk	

Comments: