

September 27, 2007

MEMORANDUM FOR:

John P. Torres

Director

Office of Detention and Removal

FROM:

Deportation Officer
San Antonio

b6,b7c

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SUBJECT:

Laredo Processing Center Review

The San Antonio Field Office, Office of Detention and Removal conducted a detention review of the Laredo Processing Center on September  $25^{th} - 27^{th}$ , 2007. This review was conducted by DO b6,b7c and this writer. This facility is used for detainees requiring housing over 72 hours.

#### Type of Review:

This review is a scheduled Operational Review to determine general compliance with established Immigration and Customs Enforcement (ICE) National Detention Standards. Several detention reviews have been conducted at this facility.

#### **Review Summary:**

Corrections Corporation of America (CCA) Laredo Processing Center (LPC), located in Laredo, Texas, is under the direct supervision and control of the San Antonio Field Office. Currently, LPC has a capacity of 403 beds that houses adult male and female. Prior to the current IGSA, the facility has no prior accreditations.

#### **Review Findings:**

The following information summarizes those standards <u>not</u> in compliance. Each standard is identified and a short summary provided regarding standards or procedures not currently in compliance.

Compliant - 18
Deficient - 17
At-Risk - 0
Non-Applicable - 3

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Prior to reviewing the facility, 3 of the 38 standards were pre-determined as not applicable to LPC. The following are examples of these standards:

1. **Non-Medical Escorted Trips:** All ICE Non-Medical Emergency Escorted Trips are handled only by the ICE Field Office or Sub-Office in control of the detainee case.

- 2. **Terminal Ilness, Advanced Directives and Death:** This facility does not accept ICE detainees who are severely or terminally ill, even though, CCA still needs to incorporate the ICE standards into current medical policy and procedures (i.e., Death; Medical Care; Suicide; Hunger strike; etc.).
- 3. **Transportation (Land):** All ICE Transportation is handled only by the ICE Field Office or Sub-Office in control of the detainee case, unless an outside contractor other than CCA is providing transportation for detainees. Quality Assurance Manager advised the facility is currently establishing policy with the ICE standard incorporated into its procedures and operations for emergent transportation of ICE detainees.

These standards were marked as Non-Applicable and an explanation was provided.

# **Standards Summary Findings:**

### Detainee Telephone Access - Best Practice:

• Even though, CCA policy does not reflect the verbiage from the standard, ICE and CCA personnel are to be commended for their attentiveness and collaborated effort in maintaining this standard in an exemplary level. The smooth operations in this area with the concurrence from the detainee population, allows this writer to bestow the facility with a "Best Practice" rating for this standard.

#### Access to Legal Materials – Deficient:

- The facility is lacking documentation on access and/or denial for the use of the law library.
- No schedule is posted in the housing units and/or detainee handbook.
- Several grievances were submitted for lack of accessibility to the Law Library.

#### Food Service - Deficient:

- Food Service does not have a Common Fare Program in place to address the special and religious diets. Currently, there is no accountability system on the special diets being prescribed by the medical department.
- Food Service Department is utilizing detainees in the food service areas with no voluntary work program (i.e., policy; job descriptions; payroll; etc.) in place.

#### Funds and Personal Property – Deficient:

- The facility has not practiced the policy and procedures regarding the handling of abandoned property.
- Three notables were encountered during the review of this standard:
  - Receipts located inside the sealed clear bag, did not have two signatures verifying the contents.



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> Valuables of two detainees that had been released over thirty days were still in the drawer with no final disposition annotated.

➤ Personal property (other than valuables) was stored in a brown paper bag with no tamper proof seal or an equivalent form to an I-77 for accountability purposes. In addition, no logbook was present.

# Detainee Grievance Procedures – Deficient:

- Upon review of the grievance forms and log, three grievances were reviewed and discrepancies were noted referencing the final disposition. The formal grievances were forwarded and/or did not display a resolution. Unfortunately, all three detainees had been released (deport) from the facility, therefore, no follow-up was conducted.
- The facility is not adhering to grievance procedures and/or providing training to their personnel, therefore staff in unable to resolve the detainees' complaints at any level (Informal/Formal) in an orderly and timely manner.
- The grievance officer is making the entries into the logbook, but unfortunately the grievances are not being dealt with as "Informal" or "Formal".

### Issuance and Exchange of Clothing, Bedding, and Towels - Deficient:

- The facility does not meet the excess-clothing inventory of 200 percent of the maximum funded detainee capacity allowing adequate clothing exchanges and for unforeseen circumstances (i.e., more frequent exchanges in hot and humid climates, etc.).
- The exchange (clothing/linen/towel) schedule does not meet the exchange frequency as per the standard.
- Detainees are not provided with sufficient amounts to ensure proper hygiene and exchange limits
- Laundry schedule needs to be revised to accommodate the detainee population for the laundering services.

#### Religious Practices – Deficient:

- The schedule that is currently posted in the housing units but is not adhering to listing a variety of denominations. In addition, the facility was unable to provide a record (logbook/form) of any detainee participating in the Religious Program.
- According to detainee population, chaplain (designee) does not introduce or make visible of
  oneself in housing areas and addressing if counseling services are needed. After checking
  log books, the chaplain is not making the rounds throughout the facility.
- Common-fare program is in operation, but the Chaplain (designee) (not assisting in accommodating/verifying a detainee's religious dietary requirements) and Food Service department are not adhering to the religious diet procedures mentioned in CCA Policy in accordance to ICE standard.

# <u>Voluntary Work Program – Deficient:</u>

• Currently, the facility is utilizing the detainees to work throughout all areas (i.e., food service; janitorial; maintenance; etc.) with no established policy and/or procedures in place for the voluntary work program.





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• During the review, CCA established policies and forms, to include the work areas (job descriptions) and training for the program. The program shall commence, soon after all personnel has received training. Due to classification, selective detainees will participate in work assignments. Policy indicates that detainees are still responsible for clean-up in all common settings and/or areas such as sleeping, dayroom, program and service. This responsibility will be considered as acquired "Life Skills" and not receive monetary compensation. Detainees will receive familiarization and/or instruction for use of chemical/tools utilized for cleaning these areas. The contractor will furnish such equipment.

### <u>Disciplinary Policy - Deficient:</u>

- Currently, CCA staff is adhering to the set procedures of the CCA Corporate Policy for the Disciplinary process, but policy is not in accordance to the ICE standard. The forms being utilized are not the appropriate forms to establish the Disciplinary file in the correct manner. The form "Notice of Rights" is not being served on any detainee.
- The proper forms are not being utilized and no folders are being established for each detainee processed through the disciplinary program.

### Emergency Plans - Deficient:

- Unfortunately, CCA plans do not have the ICE Detention Standards incorporated into the facilities emergency response plans. The facility is operating under CCA corporate emergency plans that are not site-specific.
- Diagrams need to be revised and/or established safe harbor areas and evacuation paths.
- The ICE personnel have not received familiarization training on Emergency Plans and/or facility floor plan, in case of emergency response from ICE. San Antonio Field Office Special Response Team has already conducted a threat assessment of facility for their response plans, but information not to be utilized for on-site ICE personnel. The facility is lacking a memorandum from the San Antonio Field Office, listing the authorized chemical agents to be utilized by CCA staff on ICE detainees during an emergent situation(s).
- Emergency Plans were not signed by proper authority.
  - ✓ Contractor will address the aforementioned and will submit the Emergency Plan package for ICE approval.

# Environmental Health and Safety - Deficient:

- Currently, the accountability is only from the concentrated form to the dilution stage of chemicals, but staff is not maintaining accountability of the usage per clean-up or housing unit (morning/evening clean-up).
- Specified protective equipment (i.e. googles, gloves, etc.) utilized for standard cleaning was not available in some Food Service and janitorial (housing unit) areas.
- The contractor shall maintain a more effective process concerning chemicals in regards to dilution, storage and general control or accountability of chemicals.
- No designated area has been established for the barbershop. Currently, detainee population is performing their own barbering services in the housing units. Sanitation of barbering equipment is not annotated in a logbook or whether it is being conducted appropriate.
- The following is a listing of some notables the facility is lacking regarding the environmental health and safety program:

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\* A person has been designated to oversee the Health and Safety program, but has not received any adequate OSHA training.

\* No Housekeeping Plan available for the site-specific facility.

### <u>Hold Rooms – Deficient:</u>

• Currently, no hold room logs or accountability is in place to address the annotation of behavior or compaints. The logs are needed for accountability of each specific detainee (i.e.; time in; meals; medical clearance; time out; etc.). The only annotation referencing the hold rooms is logged into the Central Control logbook.

### Key and Lock Control - Deficient:

- Unfortunately, CCA policy and procedures do not have the ICE Detention Standards incorporated into the facilities normal daily operations. The facility is operating under CCA corporate policy.
- Emergency key box is not anchored to a secure area in Central Control.
- Currently, no authorization cards for the restricted boxes are in place.
- No drop-safe is available for the "Dump or Flush" of keys, to be utilized during emergent situations (i.e., facility takeover; hostage; riot; etc.).
- During the review, the pharmacy was left open and unsecured throughout the day with all medical staff having access to the area with no restrictions and/or accountability (i.e., keys; pharmaceuticals; etc.).
- The following is a listing of some notables the facility is lacking regarding key control:
  - \* Keys have not been identified (restrictive/institutional/emergency/vehicle/gun locker),
  - \* Preventive maintenance program, and
  - \* Training has not been established and/or presented to staff

### Special Management Unit (Administrative Segregation) – Deficient:

- Unfortunately, CCA policy and procedures do not have the ICE Detention Standards incorporated into the facilities normal daily operations. The facility is operating under CCA corporate policy.
- SMU facility procedures conducted and services rendered are not accordance to ICE standards, furthermore, files are not being established for segregation or disciplinary purposes. The appropriate forms, segregation orders and/or reviews are not being performed appropriately.

# Special Management Unit (Disciplinary Segregation) – Deficient:

- Unfortunately, CCA policy and procedures do not have the ICE Detention Standards incorporated into the facilities normal daily operations. The facility is operating under CCA corporate policy.
- SMU facility procedures conducted and services rendered are not accordance to ICE standards, furthermore, files are not being established for segregation or disciplinary purposes. The appropriate forms, segregation orders and/or reviews are not being performed appropriately.



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# <u>Tool Control – Deficient:</u>

- The following is a listing of some notables the facility is lacking regarding tool control:
  - \* No Tool Classification (Janitorial Restricted/Non-restricted)
  - \* No Tool identification (etched on tools)
  - \* No shadowing in the janitorial rooms/closets
  - \* No Form for lost tools
  - \* No Disposition for excess and/or broken tools

### *Use of Force – Deficient:*

- CCA staff needs training and/or familiarization referencing the revised "Use of Force" policy and procedure.
- Unfortunately, CCA policy and procedures do not have the ICE Detention Standards incorporated into the facilities normal daily operations. The facility is operating under CCA corporate policy.
- The "Use of Force" policy and "Emergency Plans" are in dire need of revision, due to the reason that verbiage "Warning shots" and "Deadly force" to prevent an escape is being utilized in current procedures and the ICE standard is not referenced.
- The facility is lacking a memorandum from the San Antonio Field Office, listing the authorized chemical agents to be utilized on ICE detainees during an emergent situation(s).

# <u>Detainee Transfer – Deficient:</u>

• The Transfer notification form is not being utilized at the facility by ICE personnel. The detainees are not given prior notice of transfer to another facility.

#### **RIC Observations:**

This review is an overview of the facility. Unfortunately, CCA policy and procedures do not have the ICE Detention Standards incorporated into the facilities normal daily operations. The facility is operating under CCA corporate policy. The atmosphere of the facility is anxious and ready to experience the challenge.

#### **RIC Issues and Concerns:**

While the facility is experiencing a high turnover in regards to admission, releases and actual duration of stay for detained population, the facility administrators and personnel express an excellent attitude and teamwork concept. The main concern that takes precedence is familiarizing all staff (Management; detention; support; etc.) with the revised policy, procedures, plans and support documentation with the incorporated ICE standards, due to the fact that staff is the foundation of a Facility operating efficiently and effectively. The facility personnel is practicing and adhering with the current CCA corporate policies and plans, which are not site-specific. Knowledgeable and trained staff is the key to a successful operation.

#### **Recommended Rating and Justification:**

It is this Reviewers' recommendation that the facility receive a rating of "deficient". The rating is based of the tour of the facility, revised standard operating procedures and available documentation and equipment and also the assertion that the contractor will remedy all deficiencies with success. The detention functions are being adequately performed. Although deficiencies may exist, they do

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not detract from the acceptable accomplishment of the vital functions. Internal controls are such that there are no performance breakdowns that would keep the program from accomplishing its mission. The rating will remain deficient until a follow-up review is conducted within 90 days.

It is the recommendation of this Reviewers' that a follow-up review be conducted within that time frame.

# **RIC Assurance Statement:**

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





A T	
A. Type of Facility Reviewe	<u>a</u>
Check one:	
ICE Service Processi	
ICE Contract Detent	•
ICE Intergovernmen	tal Service Agreement
D. Commont Incometion	
B. Current Inspection	
Type of Inspection	-4:
Field Office HQ Inspe	ction
Date[s] of Facility Review	
Septmeber 25 – 27, 2007	·
C. Previous/Most Recent Fa	cility Review
Date[s] of Last Facility Review	
September 25, 2006	
Previous Rating	
	eptable 🔲 Deficient 🔲 At-Risl
D. Name and Location of Fa	cility
Name	
Corrections Corporation of America	- Laredo Processing Center
Address (Street and Name) 4702 East Saunders	
City, State and Zip Code	
Laredo, Texas 78041	
County	
Name and Title of Chief Executive O	fficer (Warden/OIC/Superintendent)
b6,b7c Warden	incer (war dem OTC/Supermendent)
Telephone # (Include Area Code)	
(956 b6,b7c	
Field Office / Sub-Office (List Office San Antonio, Texas	with oversight responsibilities)
Distance from Field Office	
170 Miles	
E. ICE Information	
Name of Inspector (Last Name,	
b6,b7c / DO /	
Name of Team Member / Title	/ Duty Location
b6,b7c / DO / SNA	
Name of Team Member / Title	/ Duty Location
/ / / / / / / / / / / / / / / / / / /	/D / I/'
Name of Team Member / Title	Duty Location
F. CDF/IGSA Information (	Inly
Contract Number	Date of Contract or IGSA
IGA # 79-02-0106	04/01/05
10/1 # 17-02-0100	UT/U1/UJ

Basic Rates per Man-Day

Estimated Man-days Per Year

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

\$ 59.79

118,625

G. Accreditation Ce	vtificatos		
List all State or Nation		on[a] received	1.
List all State of Nation	iai Accieditati	on[s] received	1.
☐ Check box if facil	ity has no acci	reditation[s]	
H. Problems / Comp			
The Facility is under (			Finding
Court Order		Action Order	
The Facility has Signi	ficant Litigatio	on Pending	
☐ Major Litigation	☐ Life/S	Safety Issues	
Check if None.			
<u></u>			
I. Facility History			
Date Built			
08/1984			
Date Last Remodeled	or Upgraded		
1995	10		
Date New Constructio	n / Bedspace	Added	
N/A	· · <b>.</b>		
Future Construction P	lanned		
Yes No Date:			
Current Bedspace		pace (# New B	reds only)
403	Number: N		
403	Number. 14	A Date.	
J. Total Facility Po	nulation		
Total Facility Intake for		months	
15,411 (Sept. 01/06 thru Sept. 01/07)			
Total ICE Mandays for Previous 12 months			
142,179 (Aug. 06 thru 07)			
K. Classification Le	vel (ICE SPC	Cs and CDFs	Only)
	L-1	L-2	L-3
Adult Male	176	24	13
Adult Female	38	1	0

L. Facility Capacity

	Rated	Operational	Emergency		
Adult Male	333	333	390		
Adult Female 70 70 90					
☐ Facility holds Juveniles Offenders 16 and older as Adults					

M. Average Daily Population

	ICE	USMS	Other
Adult Male	298	N/A	N/A
Adult Female	59	N/A	N/A

N. Facility Staffing Level

Tit I delity building bever	
Security:	Support:
b2High, b7e	





#### Significant Incident Summary Worksheet

For ICE to complete its review of your facility, the following information must be completed 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
Assault:	Tomas (Camal <sup>2</sup> Phonical etc.)	0	0	0	0
Assault: Offenders on	Types (Sexual <sup>2</sup> , Physical, etc.)	0	0	0	0
Offenders <sup>1</sup>	With Weapon	·			
	Without Weapon	5	2	1	2
<del> </del>		0	0	0	0
Assault: Detainee on	Types (Sexual Physical, etc.)	0	0	0	0
Staff	With Weapon			,	
	Without Weapon	0	0	0	0
Number of Forced Moves, incl. Forced Cell moves <sup>3</sup>	Without Weapon	0	0	0	0
		0	0	0	0
Disturbances <sup>4</sup> Number of Times Chemical Agents Used		0	0	0	0
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)	0	0	0	0
Restraints applied/used	Type (C=Chair, B=Bed, BB=Board, O=Other)	0	0	0	0
Offender / Detainee Medical Referrals as a result of injuries sustained.	BB Board, & Carloty	0	0	0	0
Escapes	Attempted	0	0	0	0
Escapes	Actual	0	0	0	0
Grievances:	# Received	0	2	5	0
	# Resolved in favor of Offender/Detainee	0	1	0	0
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)	0	0	0	0
	Number	0	0	0	0
Psychiatric / Medical Referrals	# Medical Cases referred for Outside Care	16	5	6	13
	# Psychiatric Cases referred for Outside Care	0	0	0	0

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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l ———	ICE Detention Standards Review Summary Report					
	ceptable 2. Deficient 3. At Risk 4. Repeat Finding 5. Not Applicable					275000
Lega	Access Standards	1.	2.	3.	4.	5.
1.	Access to Legal Materials					
2.	Group Presentations on Legal Rights					
3.	Visitation	$\boxtimes$				
4.	Telephone Access	$\boxtimes$				
Detai	nee Services					
5.	Admission and Release	$\boxtimes$				
6.	Classification System	$\boxtimes$				
7.	Correspondence and Other Mail	$\boxtimes$				
8.	Detainee Handbook	$\boxtimes$				
9.	Food Service					
10.	Funds and Personal Property					
11.	Detainee Grievance Procedures					
12.	Issuance and Exchange of Clothing, Bedding, and Towels					
13.	Marriage Requests	$\boxtimes$				
14.	Non-Medical Emergency Escorted Trip					M
15.	Recreation	$\boxtimes$				
16.	Religious Practices					
17.	Voluntary Work Program					
Healt	th Services					
18.	Hunger Strikes			П		
19.	Medical Care			Ħ		
20.	Suicide Prevention and Intervention		F			
21.	Terminal Illness, Advanced Directives and Death  N/A	Ħ			Ħ	
Secui	rity and Control					
22.	Contraband					
23.	Detention Files		Ħ			
24.	Disciplinary Policy	Ħ		Ti	Ħ	-
25.	Emergency Plans	Ħ		Ħ	亓	
26.	Environmental Health and Safety	Ħ		Ħ	$\exists$	
27.	Hold Rooms in Detention Facilities	Ħ	Ø	Ħ	Ħ	
28.	Key and Lock Control	Ť		亓	Ħ	
29.	Population Counts			Ħ	$\exists$	
30.	Post Orders			計	一一	
31.	Security Inspections			一	H	
32.	Special Management Units (Administrative Segregation)			Ħ	一	
33.	Special Management Units (Disciplinary Segregation)	Ħ		一十	H	
34.	Tool Control	Ħ		一门	T	
35.	Transportation (Land management)	一	H	一十	T	
36.	Use of Force	Ħ		H		N. Carrier
37.	Staff / Detainee Communication (Added August 2003)		Fil	一十	Ħ	
38.	Detainee Transfer (Added September 2004)	Ħ		十十	干	
25.		18	17			
					NJ/A	A (3)
All find	ings (Deficient and At-Risk) require written comment describing the finding and what is nece	ssarv	to me	et	14/29	. (0)
complia		<b>-</b> J				
T						

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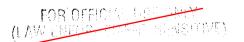


#### **RIC Review Assurance Statement**

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)	
b6,b7c	b6,b7c
Title & Duty Location	
Deportation Officer-PIDC	September 27, 2007
Team Members	
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location
b6,b7c DO, SNA	
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location
Recommended Rating:  Superior Good Acceptable Deficient At-Risk	

Comments:





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

Comments:

Branchis Topy



# HEADQUARTERS EXECUTIVE REVIEW

**Detention Files** 

Review Authority	
The signature below constitutes review of this report and accepta receipt of this report to respond to all findings and recommer	nce by the Review Authority. OIC/CEO will have 30 days from
HQDRO EXECUTIVE REVIEW: (Please Print Name)	Signalur
Com: F. Mood	1 7 m / V
Gary E. Mead Title	Date
Acting Director	4/4/08
Final Rating: Superior Good	
Acceptable	
<b>⊠</b> Deficient	
At-Risk	
No Rating	
Comments: The Review Authority concurs with the RIC re A Plan of Action is required to address the deficiencies found in	
11 Tan of Action is required to address the deficiencies found in	no rece workshoots.
Access to Legal Materials	
Food Service	
Funds and Personal Property	
Detainee Grievance	
Issuance and Exchange of Clothing, Bedding and Towels	
Religious Practices	
Voluntary Work Program	
Disciplinary Policy	
Emergency Plans	
Environmental Health and Safety	
Hold Rooms	
Key and Lock Control	
Special Management Units (Administrative and Disciplinary) Tool Control	
Use of Force	
Detainee Transfer	
RA Downgraded to Deficient:	
Admission and Release (strip search)	
Visitation (automatic srrip search without alternatives)	
Access to medical care (pharmacy unsecure, emergency response	time training)
Post Orders	
Security Inspections	
Issues and Concerns:	
Terminal Illness, Advanced Directives and Death (Written proceed	edures and/or policies re: deaths while in custody)
Suicide Prevention	
Contraband	