# ICE Detention Standards Compliance Review

Lea County Detention Center

February 16-17, 2009

REPORT DATE - February 23, 2009



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

Creative Corrections
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February 23, 2009

MEMORANDUM FOR: James T. Hayes, Jr.

Director

Office of Detention and Removal Operations

FROM: 66,67c

Reviewer-In-Charge

SUBJECT: Lea County Detention Center

Annual Detention Review

Creative Corrections conducted an Annual Detention Review (ADR) of the Lea County Detention Center in Lovington, New Mexico, on February 16-17, 2009. As noted on the attached documents, the team of Subject Matter Experts included for Security; b6.b7c for Health Services; b6.b7c for Environmental Health & Safety; and b6.b7c for Food Services.

A closeout meeting, which included a discussion of all aspects of the review, was conducted with Warden and Chief of Security on Tuesday, February 17, 2009.

### Type of Review

This review is an Annual Detention Standard Review to determine general compliance with established ICE National Detention Standards for facilities used for less than 72 hours.

#### **Review Summary**

The facility is not accredited by the American Correctional Association, the National Commission on Correctional Health Care, or the Joint Commission on Accreditation of Healthcare Organizations.

#### Standards Compliance

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

February 2008	Review	February 2009	Review
Compliant	<del>27</del>	Compliant	27
Deficient	0	Deficient	0
At-Risk	0	At-Risk	0
Not-Applicable	1	Not-Applicable	1

#### **RIC Observations**

The general appearance of the Lea County Detention Center was excellent. Specifically, the units and individual cells were neat, clean, and orderly. All detention center staff was very knowledgeable and helpful during the review. Facility management corrected several component deficiencies since the last review and appeared to be very interested in our observations. For example, the Fire Marshal signed off on the facility's Fire Plan and maintenance staff placed a Material Safety Data Sheet (MSDS) book in the area, even though it is located outside the facility.

The only noteworthy concern discovered during the review was the administration of the TB tests for detainees. The review findings for Medical Care indicated that ICE detainees were not given TB tests upon arrival or within a reasonable time. Following a meeting with the Director of Nurses Warden Warden b6.b7c Warden b6.b7c our Health Services expert, and this writer, the procedure was changed. Henceforth, all ICE detainees will be given TB tests upon arrival. The Warden was advised that this new process must be strictly adhered to in the future.

#### Recommended Rating and Justification

It is the Reviewer-in-Charge's (RIC) recommendation that the facility receive a rating of "Acceptable." It is recommended that no Plan of Action be required.

#### **RIC 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.

	Estimated Man-days per Year			
A. Type of Facility Reviewed				
ICE Service Processing Center				
ICE Contract Detention Facility	G. ACCREDITATION CERTIFICATES N/A			
ICE Intergovernmental Service Agreement	List all State or National Accreditation[s] received:			
B. CURRENT INSPECTION				
Type of Inspection	H. PROBLEMS / COMPLAINTS (COPIES MUST BE ATTACHED)			
Field Office HQ Inspection	The Facility is under Court Order or Class Action Finding			
Date[s] of Facility Review	☐ Court Order ☐ Class Action Finding			
February 16-17, 2009	The Facility has Significant Litigation Pending			
1001003 10 17, 2007	☐ Major Litigation ☐ Life/Safety Issues			
C. PREVIOUS/MOST RECENT FACILITY REVIEW	None			
Date[s] of Last Facility Review				
February 11-12, 2008	I. FACILITY HISTORY			
Previous Rating	Date Built			
☐ Superior ☐ Good ☒ Acceptable ☐ Deficient ☐ At-Risk	September 2005			
	Date Last Remodeled or Upgraded			
D. NAME AND LOCATION OF FACILITY	N/A			
Name	Date New Construction / Bed Space Added			
Lea County Detention Center	N/A			
Address	Future Construction Planned			
1401 South Commercial St.	Yes No Date:			
City, State and Zip Code	Current Bed space Future Bed Space (# New Beds only)			
Lovington, NM 88260	Number: 100 Date: TBD			
County	J. TOTAL FACILITY POPULATION			
Lea Name and Title of Chief Executive Officer	Total Facility Intake for Previous 12 months			
(Warden/OIC/Superintendent)	3,388			
b6,b7c Warden	Total ICE Man Days for Previous 12 months			
Telephone Number (Include Area Code)	4			
575-396 b6.b7c				
Field Office / Sub-Office (List Office with Oversight)	K. CLASSIFICATION LEVEL (ICE SPCS AND CDFS ONLY)			
El Paso/Pecos	L-1 L-2 L-3			
Distance from Field Office	Adult Male N/A			
240 miles	Adult Female N/A			
	L. FACILITY CAPACITY			
E. ICE Information	Rated Operational Emergency			
Name of Inspector (Last Name, Title and Duty Station)	Adult Male 352			
b6,b7c / RIC / Creative Corrections	Adult Female 48			
Name of Team Member / Title / Duty Location	Facility Holds Juveniles Offenders 16 and Older as Adults			
b6,b7c / SME-Security / Creative Corrections	LI Tuentey Living durantes of the trade of the tag ridges			
Name of Team Member / Title / Duty Location	M. AVERAGE DAILY POPULATION			
b6,b7c / SME-Health Services / Creative Corrections	ICE USMS Other			
Name of Team Member / Title / Duty Location  b6,b7c / SME-Food Services / Creative Corrections	Adult Male 92 162			
Name of Team Member / Title / Duty Location	Adult Female 1 34			
b6,b7c / SME-Environmental Health and Safety /				
Creative Corrections	N. FACILITY STAFFING LEVEL			
Creative Corrections	Security: Support:			
F. CDF/IGSA INFORMATION ONLY	b2High			
Contract Number Date of Contract or IGSA				
USMS 51-99-0206 8-1-99; Modified 11-1-02				
Basic Rates per Man-Day				
\$65.50				
Other Charges: (If None, Indicate N/A)				
Guard Services;\$14.48/hr; ; N/A				

# SIGNIFICANT INCIDENT SUMMARY WORKSHEET

In order for Creative Corrections to complete its review of your facility, you must complete the following worksheet prior to your scheduled review dates. This worksheet must contain data for the past twelve months. We will use this worksheet in conjunction with the ICE Detention Standards to assess your detention operations with regard to the needs of ICE and its detainee population. Failure to complete this worksheet will result in a delay in processing this report, and may result in a reduction or removal of ICE detainees from your facility.

INCIDENTS	DESCRIPTION	Jan – Mar	Apr – Jun	Jul – Sep	Oct – Dec
Assault:	Types (Sexual <sup>2</sup> , Physical, etc.)	Physical	Physical	Physical	Physical
Offenders on Offenders <sup>1</sup>	With Weapon	1	0	1	0
	Without Weapon	5	6	11	5
Assault:	Types (Sexual Physical, etc.)	Physical	Physical	0	Physical
Detainee on Staff	With Weapon	2	l	0	0
	Without Weapon	2	0	0	0
Number of Forced Moves, incl. Forced Cell Moves <sup>3</sup>		3	0	0	2
Disturbances <sup>4</sup>		. 1	0	0	2
Number of Times Chemical Agents Used		0	0	0	0
Number of Times Special Reaction Team Deployed/Used		0	0	0.	~~ O <sub>,</sub> .
# Times Four/Five Point Restraints Applied/Used	Number/Reason (M=Medical, V=Violent Behavior, O=Other)	2-V	2-V	. 0	0
	Type (C=Chair, B=Bed, BB=Board, O=Other)	C	С	0	0 .
Offender / Detainee Medical Referrals as a Result of Injuries Sustained,		6	6	12	3
Escapes	Attempted	0	0	0	0
·	Actual	0	0	0	0
Grievances:	# Received	. 0	0	0	0
	# Resolved in Favor of Offender/Detainee	0	0	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	9	7	13	8
	# Psychiatric Cases Referred for Outside Care	0	7	13	21

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

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

<sup>&</sup>lt;sup>2</sup> Oral, anal or vaginal penetration or attempted penetration involving at least 2 parties, whether it is consenting or non-consenting

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.

# DHS/ICE DETENTION STANDARDS REVIEW SUMMARY REPORT

1. ACCEPTABLE	2. DEFICIENT 3. AT-RISK	4. REPEAT FINDING	5. NOT APPLICABLE				
LEGAL ACCESS	STANDARDS			1.	2.	3. 4.	5.
1. Visitation							
2. Telephone	Access						
DETAINEE SERV	/ICES						
	and Release						
	ion System						
5. Detainee I	the contract of the contract o			$\boxtimes$			
6. Food Serv							
	Personal Property			$\boxtimes$			
	Grievance Procedures						
9. Issuance a	nd Exchange of Clothing, Bedding, and To	owels					- (FAT 17 - 57)
10. Religious	Practices	· · · · · · · · · · · · · · · · · · ·					
HEALTH SERVI	CES						
11. Medical C	are						
12. Suicide Pr	evention and Intervention			$\boxtimes$			
SECURITY AND	CONTROL						
13. Contraban	d						
14. Detention	•			$\boxtimes$			
15. Disciplina							
16. Emergency							
	ental Health and Safety						
	ns in Detention Facilities						
	ock Control			$\boxtimes$			
20. Population		:		X			
21. Security In		· ·					
	nagement Units (Administrative Detention						
· · · · · · · · · · · · · · · · · · ·	nnagement Units (Disciplinary Segregatio	n)					
24. Tool Cont				$\boxtimes$			
	tion (Land management)						X
26. Use of For				$\boxtimes$			
The state of the s	ainee Communication (Added August 200	03)		$\boxtimes$			
28. Detainee T	ransfer (Added September 2004)						

ALL FINDINGS OF DEFICIENT AND AT-RISK REQUIRE WRITTEN COMMENT DESCRIBING THE FINDING AND WHAT IS NECESSARY TO REACH COMPLIANCE.

## RIC REVIEW ASSURANCE STATEMENT

#### BY SIGNING BELOW, THE REVIEWER-IN-CHARGE (RIC) CERTIFIES THAT:

- 1. ALL FINDINGS OF NON-COMPLIANCE WITH POLICY OR INADEQUATE CONTROLS, AND FINDINGS OF NOTEWORTHY ACCOMPLISHMENTS, CONTAINED IN THIS INSPECTION REPORT, ARE SUPPORTED BY EVIDENCE THAT IS SUFFICIENT AND RELIABLE; AND
- 2. WITHIN THE SCOPE OF THIS REVIEW, THE FACILITY IS OPERATING IN ACCORDANCE WITH APPLICABLE LAW AND POLICY, AND PROPERTY AND RESOURCES ARE BEING EFFICIENTLY UTILIZED AND ADEQUATELY SAFEGUARDED, EXCEPT FOR ANY DEFICIENCIES NOTED IN THE REPORT.

REVIEWE	R-IN-CHARGE
Reviewer-In-Charge: (Print Name)	Signature
b6,b7c	b6,b7c b6,b7c
Title & Duty Location	Date
RIC, Creative Corrections	February 20, 2009

TEAM	Members
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location
b6.b7c SME-Security, Creative Corrections	b6,b7c , SME-Health Services, Creative Corrections
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location
SME-Food Services, Creative Corrections	b6,b7c , SME-Environmental Health and Safety, Creative Corrections

RECOMMENDED RATING:	<b>ACCEPTABLE</b>
	■ DEFICIENT
	AT-RISK

**COMMENTS:**