



February 28, 2007

MEMORANDUM FOR:

John P. Torres

Director

Office of Detention and Removal

FROM:

b6,b7c

Immigration Enforcement Agent

Dallas Field Office

SUBJECT:

Randall County Jail Annual Detention Review

The Dallas Field Office, Office of Detention and Removal conducted a detention review of the Randall County Jail on February 26-27, 2007. This review was conducted by Immigration Enforcement Agent RIC and Deportation Officer ARIC. This facility is used for detainees requiring housing over 72 hours. However, no detainees are kept over 72 hours at this time pending approval of this review.

Type of Review:

This review is a scheduled Operational Review to determine general compliance with established Immigration and Customs Enforcement (ICE) National Detention Standards. No prior reviews have been conducted by the Dallas Field Office at this facility.

Review Summary:

The facility is accredited by the Texas Commission on Jail Standards. The facility was last inspected on September 11, 2006 and found to be in compliance. The next state review will be September 2007. No other inspections by State or local entities have occurred during the previous 12 months.

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 - 36 Deficient - 0 Subject: Detention Revie ummary Report

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At-Risk

Non-Applicable -

Standards Summary Findings:

No deficiencies were found during this inspection.

RIC Observations:

BEST PRACTICE: The facility is very clean and well maintained. The kitchen has a separate menu in place for vegetarians, diabetics, soft diets, and also has many religious menus. The facility also has in place a tele-video arraignment and court room that could also be used for Immigration dockets in the future. The facility over all was organized and all staff knew where they were supposed to be and what they were supposed to be doing at all times.

STAFF: All staff from management to correctional officers were professional and willing to go the extra mile to meet all ICE Standards. Staff was very knowledgeable in post orders and were overall courteous and confident. Kitchen staff is required to go above and beyond by passing food management courses with the City of Amarillo.

COMMUNICATION: All communication between reviewers and Jail Management was professional and made at ease by the contractor management. This facility is currently only housing detainees under 72 hours. Communication between detainees and ICE is currently not met due to the facility not being an over 72 hour facility at this time. Upon talking to the Dallas Field office this communication has already been set in place if the facility does hold over 72 hours.

RIC Issues and Concerns:

None

RIC Assurance Statement:
All findings of this review 1 All findings of this review have been documented on Form G-324A and are supported by the written documentation contained in the review file.

HEADQUARTERS EXECUTIVE REVIEW **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 Date Chief, DSCU **Superior** Final Rating: Good Acceptable **Deficient** At-Risk The Review Authority has downgraded the recommended rating of "Superior" to "Good". Comments:



A. Type of Facility Reviewed					
☐ ICE Service Processing Center					
	List all State or National Accreditation[s] received:				
☐ ICE Intergovernmental Service Agreement	Texas Commission on Jail Standards				
	Check box if fa	cility has n	o accreditation[s	1	
B. Current Inspection					
Type of Inspection	H. Problems / Co				
Field Office HQ Inspection	The Facility is unde				
Date[s] of Facility Review	Court Order		Class Action Ord		
02/26-27/2007	The Facility has Sig				
	Major Litigation		Life/Safety Issue	es	
C. Previous/Most Recent Facility Review	Check if None.				
Date[s] of Last Facility Review	T Facility History				
07/2006	I. Facility Histor Date Built	<u>y</u>			
Previous Rating	10/2001				
Superior Good Acceptable Deficient At-Risk	Date Last Remodele	ed or Upor	ndad		
D. Name and I coation of Facility	10/2001	or or ober	aueu .		
D. Name and Location of Facility Name	Date New Construc	tion / Reds	nace Added		
Randall County Sheriff's Office	Date New Constitue	tion / Doug	pace / Idded		
Address (Street and Name)	Future Construction	Planned			
9100 S Georgia	Yes No Date: 03/19/2007				
City, State and Zip Code Amarillo, Texas 79118	Current Bedspace		Bedspace (# Ne	w Beds only)	
County	310		er: 71 Date: 03/1		
Randall			1-74-3		
Name and Title of Chief Executive Officer (Warden/OIC/Superintendent) Joel Richardson Sheriff b6,b7c Captain	J. Total Facility	Population	a na Karelina (Care Na Karelina (Karelina		
Telephone # (Include Area Code)	Total Facility Intake	for previo	ous 12 months	10	
Field Office / Sub-Office (List Office with oversight responsibilities)	A592 Sub-Office (List Office with oversight responsibilities) Total ICE Mandays for Previous 12 months				
Dallas / Amarillo		ioi Fievio	us 12 months		
Distance from Field Office	1678				
3.5 miles	K. Classification	.: Level (IC	E SPCs and CD	Fe Only)	
E. ICE Information	ix. Classification	L-		L-3	
Name of Inspector (Last Name, Title and Duty Station)	Adult Male	135		71	
b6,67c IEA / Big Spring, Texas	Adult Female 33			9	
Name of Team Member / Title / Duty Location					
b6,b7c DPO / Big Spring, Texas	L. Facility Capac	itv			
Name of Team Member / Title / Duty Location		Rated	Operational	Emergency	
11	Adult Male	296	****	<u>\$</u>	
Name of Team Member / Title / Duty Location	Adult Female	62			
	☐ Facility holds Ju	veniles Offe	enders 16 and old	er as Adults	
F. CDF/IGSA Information Only	M. Average Daily				
Contract Number Date of Contract or IGSA		ICI		Other	
77-02-0050	Adult Male	5	30	196	
Basic Rates per Man-Day	Adult Female	1	8	47	
47.73					
Other Charges: (If None, Indicate N/A)	N. Facility Staffir	ig Level	T		
NA; ; ;	Security: Support:				
Estimated Man-days Per Year	b2High		<u> </u>		
1832					

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
Assault:	Types (Sexual ² , Physical, etc.)	P-9	P-10	P-11	P-06
Offenders on Offenders ¹	With Weapon	0	0	1	0
	Without Weapon	9	10	10	06
Assault:	Types (Sexual Physical, etc.)	1	0	0	0
Detainee on Staff	With Weapon	0	0	0	0
	Without Weapon	1	0	0	0
Number of Forced Moves, incl. Forced Cell moves ³		0	0	0	0
Disturbances ⁴		0	0	0	0
Number of Times Chemical Agents Used		2	1	9	4
Number of Times Special Reaction Team Deployed/Used		0	1	1	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.		03	05	02	03
Escapes	Attempted	0	0	0	0
•	Actual	0	0	0	0
Grievances:	# Received	85	82	118	95
	# Resolved in favor of Offender/Detainee	10	11	14	10
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)	0	S	0	0
	Number	0	1	0	0
Psychiatric / Medical Referrals	# Medical Cases referred for Outside Care	1	3	4	0
	# Psychiatric Cases referred for Outside Care	9	7	9	9

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

² 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.

DHS/	ICE Detention Standards Review Summary Report					
1. Acc	eptable 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	\boxtimes				
4.	Telephone Access	\boxtimes				
Detair	nee Services					
5.	Admission and Release					
6.	Classification System	\boxtimes				
7.	Correspondence and Other Mail	\boxtimes				
8.	Detainee Handbook	\boxtimes				
9.	Food Service					
10.	Funds and Personal Property	X				
11.	Detainee Grievance Procedures	\boxtimes				
12.	Issuance and Exchange of Clothing, Bedding, and Towels					
13.	Marriage Requests					Ш
14.	Non-Medical Emergency Escorted Trip			Ц.		
15.	Recreation			<u> </u>		
16.	Religious Practices		Ш	Ш	Ш	
17.	Voluntary Work Program					\boxtimes
	h Services					
18.	Hunger Strikes					
19.	Medical Care	X				
20.	Suicide Prevention and Intervention					
21.	Terminal Illness, Advanced Directives and Death	\boxtimes				
Secur	ity and Control					
22.	Contraband					
23.	Detention Files	\boxtimes				
24.	Disciplinary Policy					
25.	Emergency Plans					
26.	Environmental Health and Safety	\boxtimes				
27.	Hold Rooms in Detention Facilities					
28.	Key and Lock Control	\boxtimes				
29.	Population Counts	\boxtimes				
30.	Post Orders	\boxtimes				
31.	Security Inspections	\boxtimes				
32.	Special Management Units (Administrative Segregation)	\boxtimes				
33.	Special Management Units (Disciplinary Segregation)	X X				
34.	Tool Control					
35.	Transportation (Land management)	\boxtimes				
36.	Use of Force	Ø				
37.	Staff / Detainee Communication (Added August 2003)	\boxtimes				
38.	Detainee Transfer (Added September 2004)	\boxtimes				

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

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	Date				
IEA Big Spring Texas	02/27/2007				
Team Members					
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location				
b6,b7c DPO Big Spring, Texas					
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location				
Recommended Rating: Sup	perior od				

Acceptable Deficient

At-Risk

Comments: