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April 17, 2008

MEMORANDUM FOR:	Gary E. Mead, Acting Director Office of Detention and Removal Operations
FROM:	b6, b7c Reviewer-In-Charge Creative Corrections
SUBJECT:	South Texas Detention Center Annual Detention Review

Creative Corrections conducted an Annual Detention Review of the South Texas Detention Complex, located in Pearsall, Texas, on April 15 - 17, 2008. The facility is operated by the Global Expertise in Outsourcing (GEO) Group, which has a contract with the United States Immigration and Customs Enforcement (ICE). As noted on the attached documents, the team of Subject Matter Experts (SME) included: b6, b7c SME for Security; b6 SME for Health Services b6, SME for Safety; b6, SME for Food Services; and b6, b7c Reviewer in Charge.

A review closeout was conducted with b6, b7c, Field Office Director, ICE; b6, b7c, AFOD, ICE, b6, b7c, AFOD / OIC, ICE, b6, b7c, Captain USPHS, Health Service Administrator b6, GEO Central Regional OPS Director; b6, b7c, GEO Warden, and included a discussion of all deficiencies and concerns noted during our 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.

<u>Review Summary</u>:

The facility has provisional accreditation by the American Correctional Association (ACA) and is accredited by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO).

Standards Compliance:

The following information summarizes the standards reviewed and the overall compliance for this review. The following statistical information outlined provides a direct comparison of the 2007 ADR and this ADR conducted for 2008.

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<u>March 6-7, 2007 Review</u>		March 11-13,, 2008 Review		
Compliant	38	Compliant	37	
Deficient	0	Deficient	0	
At-Risk	0	At-Risk	0	
Not-Applicable	0	Not-Applicable	1	

RIC Issues and Concerns

Food Service

Special (therapeutic) diets must be authorized by the Clinical Director on form I-819, "Detainee Special Need(s)." The form must specify the type of diet, its duration, and any special instructions.

Access to Medical Care

The medical department currently has a total of 55 authorized positions with 10 vacancies. In addition there are 2 registered nurses being reassigned in the near future. Current vacancies include 3-4 mid-level practitioners and 5 registered nurses. These positions are critical to the delivery of health care and compliance with all ICE standards. Although the department is providing adequate medical care they are having difficulty meeting the 14 day standard for physical examinations.

Keys and Lock Control

The facility must discard any broken key from the assigned key ring and properly disposed of it.

Recommended Rating and Justification

It is the Reviewer-in-Charge's (RIC) recommendation that the facility receive a rating of "Good." It is also recommended by the RIC that a Plan of Action be required for this facility to identify and implement necessary corrective actions.

<u>RIC Assurance Statement</u>

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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DETENTION FACILITY INSPECTION FORM FACILITIES USED LONGER THAN 72 HOURS

A. Type of Facility Reviewed

ICE Service	e Processing Center
ICE Contra	act Detention Facility
ICE Interge	overnmental Service Agreement

B. Current Inspection

Type of Inspection		
Field Office	HQ Inspection	
Date[s] of Facility R	eview	
April 15-17, 2008		

C. Previous/Most Recent Facility Review

Date[s] of Last Facility Review
April 10-12, 2008
Previous Rating
Superior 🗍 Good 🛛 Acceptable 🗌 Deficient 🗌 At-Risk

D. Name and Location of Facility

Name
South Texas Detention Complex
Address (Street and Name)
566 Veterans Dr.
City, State and Zip Code
Pearsall, TX 78061
County
Frio
Name and Title of Chief Executive Officer
(Warden/OIC/Superintendent)
b6, b7c OIC / Gary Gomez, Warden
Telephone # (Include Area Code)
830 b6, b7c
Field Office / Sub-Office (List Office with oversight
responsibilities)
San Antonio, TX
Distance from Field Office
60 Miles

E. Creative Corrections Review Team

b6, b	7c Re	viewer in Charge.	
ŀ	o6, b7c	SME for Security	
	b6	SME for Health Services	
b6	SM	E for Safety	
	b6	SME for Food Services	

F. CDF/IGSA Information Only

F. CDF/165A Information Only	
Contract Number	Date of Contract or IGSA
ACD-4-C-0001	January 23, 2004
Basic Rates per Man-Day	
94.58	
Other Charges: (If None, Indicate	N/A)
N/A	
Estimated Man-days per Year	
560,000	

G. Accreditation Certificates

List all State or National Accreditation[s] received: Provisional American Correctional Association (ACA) and Joint Commission on Accreditation of Healthcare Organizations (JCAHO). Check box if facility has no accreditation[s]

H. Problems / Complaints (Copies must be attached)

The Facility is under Cour	t Order or Class Action Finding
Court Order	Class Action Order
The Facility has Significar	
Major Litigation	Life/Safety Issues
Check if None.	

I. Facility History

Date Built			
May, 2005			
Date Last Remodeled or	r Upgraded		
August, 2006			
Date New Construction / Bed space Added			
Future Construction Pla Yes No Date:	nned		
Current Bed Space	Future Bed Space (# New Beds only)		
1904	Number: Date:		

J. Total Facility Population

Total Facility Intake for previous 12 months 21,188 Total ICE Man days for Previous 12 months 560,000

K. Classification Level (ICE SPCs and CDFs Only)

	L-1	L-2	L-3
Adult Male	946	188	189
Adult Female	146	17	9
Juvenile	-		1

L. Facility Capacity

	Rated	Operational	Emergency
Adult Male	1490	1490	1490
Adult Female	388	388	388
Facility holds Juveniles Offenders 16 and older as Adults			

M. Average Daily Population

	ICE	USMS	Other
Adult Male	1354	0	0
Adult Female	193	0	0

N. Facility Staffing Level

Security:	Suppo	ort:
	b2High	

SIGNIFICANT INCIDENT SUMMARY WORKSHEET

In order for Creative Corrections to complete its review of your facility, you <u>must</u> 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
Assaults	Types (Sexual ¹ , Physical, etc.)	Physical	Physical	Physical	Physical
	With Weapon	0	0	0	0
	Without Weapon	21	9	28	17
Assault:	Types (Sexual Physical, etc.)	Physical	Physical	Physical	Physical
Detainee on Staff	With Weapon	0	0	0	0
м. 	Without Weapon	2	0	7	0
Number of Forced Moves, incl. Forced Cell Moves ²		1	1	3	4
Disturbances ³		1	0	0	0
Number of Times Chemical Agents Used		1	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.		0	0	0	0
Escapes	Attempted	0	0	1	0
J	Actual	0	0	0	0
Grievances	# Received	28	22	39	229
2	# Resolved in Favor of Offender/Detainee	5	6	6	8
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	20	21	38	38
	# Psychiatric Cases Referred for Outside Care	5	2	2	3

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"

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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	4. 5.
1. Access to 1							
2. Group Pres	-						
3. Visitation							
4. Telephone	Access						
DETAINEE SERV	ICES						
5. Admission	and Release						
6. Classificat	ion System						
7. Correspond	dence and Other Mail						
8. Detainee H	Iandbook						
9. Food Servi	ice						
10. Funds and	Personal Property						
	Frievance Procedures						
	nd Exchange of Cloth	ing, Bedding, and To	wels		\square		
13. Marriage F					\square		
1	cal Emergency Escort	ed Trip					
15. Recreation							
16. Religious I	Practices				\boxtimes		
17. Voluntary	Work Program		•				
HEALTH SERVIC	CES						
18. Hunger Str	rikes						
19. Medical Ca	are						
20. Suicide Pre	evention and Intervent	tion					
21. Terminal I	llness, Advanced Dire	ctives and Death					
SECURITY AND							
22. Contraband							
23. Detention l							
24. Disciplinar							
25. Emergency							
	ntal Health and Safety						
	ns in Detention Facilit	ies				<u> </u>	
	ock Control					╡┼╘╡┼╘	
29. Population						<u>┥╎┝┥╎└</u>	
1					┥╎┝┙╎┕		
 Security Inspections Special Management Units (Administrative Detention) 				╡┼╞╡┼╘			
						<u>┥╽┝┥</u> ╎┝	
· ·	nagement Units (Dis	ciplinary Segregation	l) ·			╡┼╞╡┼╞	
34. Tool Contr						╅┼╞┽┤╞╸	
· ·	tion (Land manageme	nt)				╡┼╞╡┼╞	
36. Use of Ford			2)			╡╎╞╡ ┼╞	
37. Staff / Detainee Communication (Added August 2003)				╡┼╞╡╎╞			
38. Detainee Transfer (Added September 2004) Image: Im							
ALL FINDINGS OF DEFICIENT AND AT-RISK REQUIRE WRITTEN COMMENT DESCRIBING THE FINDING AND							
WHAT IS NECESSA	ARY TO REACH CO	MPLIANCE.					•

By signing below, the Reviewer-In-Charge (RIC) certifies that:

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

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.

Revie	ver-In-Charge		
Reviewer-In-Charge: (Print Name)	Signature		
b6, b7c	to.	b6, b7c	
Title & Duty Location	Date		
Reviewer in Charge, Creative Corrections	April 17, 2008	· · · · · · · · · · · · · · · · · · ·	

TEAM MEMBERS				
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location			
b6, b7c SME for Security	b6 SME for Health Services			
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location			
b6 SME for Safety	b6 SME for Food Services			

RECOMMENDED RATING:

	SUPERIOR
imes	GOOD
	ACCEPTABLE
	DEFICIENT
	AT-RISK

COMMENTS:

MANAGEMENT REVIEW

REVIEW AUTHORITY

THE SIGNATURE BELOW CONSTITUTES REVIEW AND ACCEPTANCE OF THIS REPORT BY THE REVIEW AUTHORITY. FOD/OIC/CEO WILL HAVE THIRTY (30) CALENDAR DAYS FROM RECEIPT OF THIS REPORT TO RESPOND TO ALL FINDINGS AND RECOMMENDATIONS.

HQDRO MANAGEMENT REVIEW: (Print Name)	Cignoty	
ngbko manademeni keview. (Finit Name)	Signatu	
	b6	
b6		
Title	Date	
	5/16/08	
Acting Chief, Detention Standards Compliance Unit	-//0/00	
	· · · · · · · · · · · · · · · · · · ·	
FINAL RATING: SUPERIOR		
🖾 Good		
ACCEPTABLE		
DEFICIENT		
AT-RISK		
AI-KISK		

COMMENTS: The Review Authority concurs with the recommended rating of "Good". A Plan of Action is required to address the line item deficiencies identified in the following areas:

Food Service Access to Medical Care Key and Lock Control