ICE Detention Standards Compliance Review

Webb County Detention Center

August 12-14, 2008

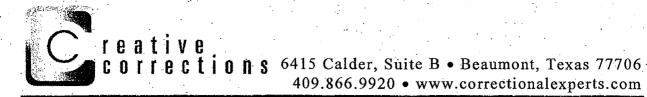
REPORT DATE - August 21, 2008



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

> Executive Vice President Creative Corrections 6415 Calder, Suite B Beaumont, TX 77706

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Detention Standards Compliance Unit
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August 21, 2008

MEMORANDUM FOR:

James T. Hayes, Jr., Acting Director

Office of Detention and Removal Operations

FROM:

Reviewer-In-Charge (RIC)

SUBJECT:

Webb County Detention Center Annual Detention Review (ADR)

Creative Corrections conducted an ADR of the Corrections Corporation of America's Webb County Detention Center, located in Laredo, Texas, on August 12-14, 2008. As noted on the attached documents, my team of Subject Matter Experts (SME) included 65,676 for Security: 56 SME for Medical: b6 b76 SME for Safety; and b6 56 S, SME for Food Service.

A review closeout was conducted with Warden b6, b7c on August 14, 2008, and included a discussion of all aspects of 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.

Review Summary:

The Webb County Detention Center was accredited by the American Correctional Association (ACA) on January 14, 2008. The facility is not accredited by the National Commission on Correctional Health Care (NCCHC), or the Joint Commission on Accreditation of Healthcare Organizations (JCAHO).

Standards Compliance:

The following statistical information outlined provides a direct comparison of the January 2008 ADR and this ADR conducted in July 2008.

June 26-27, 2007	Review	• *	August 12-14, 2008	Review
Compliant	27		Compliant	35
Deficient	8		Deficient	0
At-Risk	0		At-Risk	0
Not-Applicable	3		Not-Applicable	3

Area of Strength

Chemical Control

The Webb County Detention Center has developed an exceptional hazardous materials program that insures the control and inventory of flammable, toxic, and caustic materials. The policies and procedures are well written and comprehensive. Staff and detainees have a clear understanding of their responsibilities when handling hazardous materials. The hazardous materials program met or exceeded each standard requirement.

Recommended Rating and Justification

It is the Reviewer-in-Charge's (RIC) recommendation that the facility receive a rating of "Good." Since there were no deficiencies, no further action is necessary.

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.

A. Type of Facility Reviewe	d		E. Accreditation	on Cartifica	ton		•		
		7					<u> </u>		
ICE Service Processi			List all State or National Accreditation[s] received: ACA Accreditation on January 14, 2008						
ICE Contract Detent									
☐ ICE Intergovernmen	ital Service Agreement]	Check box 11	facility has	no accreditation	n[s]			
B. Current Inspection			F. Problems /	Complaints	(Copies mus	t be a	tached)		
Type of Inspection		7	The Facility is un	nder Court O	rder or Class A	Action	Finding		
Field Office HQ Inspe	ection	ĺ	Court Order		Class Action	Orde	•		
Date[s] of Facility Review			The Facility has	Significant L	itigation Pend	ing			
August 12 - 14, 2008		1	Major Litigat	ion	Life/Safety Is	sues	•		
			Check if No	ne.	•	- 3			
C. Previous/Most Recent Fa	cility Review				-				
Date[s] of Last Facility Review		7	I. Facility His	tory					
June 26 – 27, 2007		-	Date Built						
Previous Rating		-	April 1999				-		
Superior Good Acc	ceptable Deficient At-Risk	.	Date Last Remo	deled or Uno	raded				
Dapener Dece Direc	opasio Z Donolone 11t 1ttsk		N/A						
D. Name and Location of Fa	acility		Date New Const	ruction / Bed	space Added				
Name	· ·	Ţ ·	N/A		opaco x radou				
Webb County Detention Cente	r		Future Construct	tion Planned	<u> </u>				
Address (Street and Name)		1	☐ Yes ☐ No						
9998 South Highway 83			Current Bedspace		e Bedspace (#	New	Reds only)		
City, State and Zip Code		1	603		per: 740 Date:		ocus omy)		
Laredo, Texas].	003	Tivuite	740 Date.	2007			
County		1	J. Total Facili	ity Populatio	m ·				
Webb	27 1 10 20 20	4	Total Facility Int						
	Officer (Warden/OIC/Superintendent)		4,796	iake for previ	ious 12 monus	S	. [
Telephone # (Include Area Code)		-	Total ICE Mand	our for Dravis	ous 12 months				
956 16 57c			6,755	ays tol Tievi	ous 12 monus				
Field Office / Sub-Office (List Office	with oversight responsibilities)	1	[0,733						
San Antonio, Texas		1	K. Classification	on Lovel (IC	TE CDCs and	CDE.	Owless :		
Distance from Field Office		1	ix. Classification	L.					
180 miles			Adult Male	1.1	1. 1.	2	L-3		
		٠.	Adult Female				<u> </u>		
E. Creative Corrections Rev	iew Team		Adult Female						
	25 pies] :		1	<u> </u>	·			
b6, b7c Reviewer (In-Cha	rge	4	•			*.			
			L. Facility Cap		10 "	, , ,			
b6, b7c SME for Secu	urity	l ·	A 1 1/ 3 5 1	Rated	Operation	31	Emergency		
SME for Food S	Sarvica		Adult Male	470	570		630		
SIVIL 101 1 COUL	JOI VICE	1	Adult Female	33	33		100		
SME for Medic	ra1	· i	L Facility holds	Juveniles Off	fenders 16 and	older	as Adults		
SIVIL 101 IVICUIO		-		91 30 2 3 44					
b6, h76 SME for Safety	•		M. Average Da						
Sivile for Safety		J.	4 1 1 3 5 1	IC			Other		
F. CDF/IGSA Information C			Adult Male	3,2121, 3, 31, 129,11	3 59		0		
Contract Number	Date of Contract or IGSA	1	Adult Female	0	51		0		
	11/2007	,	M.T. 100 AS-1				•		
ODT-8-C-0002	1 11/ 2007	┨.	N. Facility Sta	tting Level	7	<u> </u>	·		
Basic Rates per Man-Day			Security:		Support:				
64.87	ooto N/A)	-			o2High				
Other Charges: (If None, Indic	ale IN/A)					•			
N/A		· .			•	•	•		
Estimated Man-days Per Year	•	1.	•						
6,600	•	1							

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.)	Physical	Physical	Physical	Physical
Offenders on Offenders ¹	With Weapon	. 0	1	0	0
	Without Weapon	6	9	4	12
Assault:	Types (Sexual Physical, etc.)	Physical	Physical	Physical	Physical
Detainee on Staff	With Weapon	0	1	0	0
	Without Weapon	0	.1	0	1
Number of Forced Moves, incl. Forced Cell moves ³		2	3	9	4
Disturbances ⁴		0	2	0	2
Number of Times Chemical Agents Used		0	0	1	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	l=M	0
Restraints applied/used	Type (C=Chair, B=Bed, BB=Board, O=Other)		.	В.	_
Offender / Detainee Medical Referrals as a result of injuries sustained.		2	4	2	0
Escapes	Attempted	0	0	0	0
	Actual	0	0	0	0
Grievances:	# Received	13	16	4	9
	# Resolved in favor of Offender/Detainee	8	16	4	7
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)	-	-	_	-
	Number	0	0	0 :	0
Psychiatric / Medical Referrals	# Medical Cases referred for Outside Care	20	19	15	25
	# 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.

	•
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. Access to Legal Materials	
2. Group Presentations on Legal Rights	
3. Visitation	
4. Telephone Access	
Detainee 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	
Health Services	
18. Hunger Strikes	
19. Medical Care	
20. Suicide Prevention and Intervention	
21. Terminal Illness, Advanced Directives and Death	
Security 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	<u> </u>
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)	
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.

Department	Of H	omeland	Security	
Immigration	and	Customs	Enforceme	nt

Detention Facility Inspection Form Facilities Used Over 72 hours

RIC Review Assurance Stat	

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)	Signature
b6, b7c	1/A b6, b7c
Title & Duty Location	Date 66, 67c
Reviewer -In-Charge, Creative Corrections	August 14, 2008
Team Members	
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location
b6, b7c ME for Security	55 SME for Food Service
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location
56 SME for Medical	66, 676 SME for Safety
Recommended Rating: Superior	

Recommended Rating:								Superior
				•	_			Good
			٠.		-			Acceptabl
		•			: '] J	Deficient
						•	· 🔲 🛭	At-Risk

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HEADQUAR	TERS EXECUTIVE REVIEW		
Review Authori	ty		
	low constitutes review of this report and a port to respond to all findings and reco	acceptance by the Review Authority. OIC/CEO will have 30 days from ommendations.	
HQDRO EXECUT	IVE REVIEW: (Please Print Name)	Signature b6, b6, b7c	,
Title Acting Chief, I	Detention Standards Compliance Unit	Date Dec 21, 2008	
Final Rating:	☐ Superior ☐ Good	•	
•	Acceptable Deficient At-Risk		
	No Rating		
Comments:	The Review Authority concurs with the required to address the line item deficies and Use of Force standards.	recommended rating of "Good". A Plan of Action is noted in the Detainee Grievance Procedures, Contraband,	