

January 10, 2019

TO: [REDACTED]
Assistant Director for Detention Management

FROM: [REDACTED]
Lead Compliance Inspector
The Nakamoto Group, Inc.

SUBJECT: **Annual Detention Inspection of the Houston CDF**

The Nakamoto Group, Inc. performed an annual inspection for compliance with the ICE Performance-Based National Detention Standards (PBNDS) 2011 of the Houston CDF in Houston, TX during the period of January 8-10, 2019. The facility is a CDF.

The annual inspection was performed under the guidance of [REDACTED], Lead Compliance Inspector. Team members were:

Subject Matter Field	Team Member
Security	[REDACTED]
Detainee Rights	[REDACTED]
Medical Care	[REDACTED]
Safety	[REDACTED]
Medical Care	[REDACTED]

Type of Inspection

This is a scheduled annual inspection, which is performed to determine overall compliance with the ICE PBNDS 2011 for Over 72 hour facilities. The facility received a previous rating of Meets Standards during the January 2018 inspection.

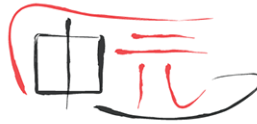
Inspection Summary

The Houston CDF is currently accredited by:

- The American Correctional Association (ACA) – Yes
- The National Commission on Correctional Health Care (NCCCHC) – Yes
- The Joint Commission (TJC) – No
- Prison Rape Elimination Act (PREA) – Yes

Standards Compliance

The following information is a summary of the standards that were reviewed and overall compliance that was determined as a result of the 2018 and 2019 PBNDS 2011 compliance annual inspections:



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2018 Inspection		2019 Inspection	
Meets Standards	41	Meets Standards	41
Does Not Meet Standards	0	Does Not Meet Standards	0
Repeat Finding	0	Repeat Finding	0
Not Applicable	1	Not Applicable	1

The inspection team identified one (1) deficient component in the following standard:

Significant Self-Harm and Suicide Prevention and Intervention – 1, which is a Priority component

Facility Snapshot/Description

The Houston CDF is a [REDACTED] contract detention facility operated by CoreCivic. The facility is located in the Northeast section of Houston, Texas near Bush Intercontinental Airport. The facility is a one-story, single building facility encompassing 182,786 square feet. The detainee housing areas consist of twenty-seven (27) dormitories that house from twenty (20) to sixty (60) detainees, a four (4) cell female segregation unit, a thirty-four (34) cell male segregation unit and a fourteen (14) bed short stay unit that includes negative air pressure cells. The facility houses male and female ICE detainees of all classification levels. [REDACTED]

[REDACTED] During the inspection, five housing units were designated as COHORT units due to an outbreak of mumps beginning in December. Four active cases of mumps were being housed in the alternative housing unit.

All dormitories have large dayroom areas equipped with television, telephones and a microwave. Board games, puzzles, cards and X-Box are provided for indoor recreation in the housing units. Exercise areas for both male and female detainees provide a variety of equipment. The outdoor recreation areas provide a track, basketball, soccer and handball courts and a covered area. Opportunities for intramural competition between housing units are provided.

The detainees were observed socializing in the dayrooms and engaging in activities in the outdoor recreation areas. Supervisors and officers were professional in demeanor and attire. They were observed interacting with detainees in the housing units. It was noted that detainees greeted the Warden and Assistant Warden during the tour of the facility and it was obvious that the detainees were used to seeing them and other command staff in the housing units. All housing units operate under a unit management system complemented by a case manager and counselors. Case managers and unit managers were observed in the housing units making rounds and interacting with the detainees throughout the inspection.

The inspection team visited the housing units multiple times during the inspection, interviewing detainees in groups and in a confidential setting. All detainees stated that they felt safe at the facility and they were treated with respect by facility and ICE personnel. LEP detainees stated that they have no problem communicating with staff as many of them are bi-lingual and the language line is utilized if needed. Confidential interviews were conducted with male and female detainees ranging in age from 22-66 years of age. The detainees have been housed at the facility from three weeks to two years. Only two detainees voiced complaints. Both detainees were female. One stated that the food was bland and not seasoned to her liking. The other complained that she did not receive adequate medical treatment for chest pain and that she was not being treated for her high blood pressure. She stated that was not evaluated/treated by medical staff. The complaint was forwarded to the medical SME who reviewed the detainee's medical record. It was noted that the detainee was on blood pressure medication and reported to sick call on October 24, 2018 complaining of chest pain off and on for about one week. The detainee was evaluated and EMS was called after phone consultation with the clinical director. EMS performed their initial evaluation and were about to transport the detainee when she refused to go. Based on review



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of the medical record, this detainee has received proper monitoring of her blood pressure and treatment for her multiple medical complaints.

The inspection team found the atmosphere to be calm with no obvious indicators of high stress levels. During the inspection, sanitation at the facility was observed to be above average and noise levels were minimal.

ICE detainees are not charged medical co-payments. Medical care is provided by IHSC uniformed and contract personnel. Food Services are contracted to Trinity Services Group.

Areas of Concern/Significant Observations

4.6 Significant Self Harm and Suicide Prevention and Intervention

Priority Component #3: Detainees who are identified as being “at risk” for significant self-harm or suicide shall immediately be referred to a mental health provider, who shall evaluate the detainee within 24 hours of the referral.

Finding: Review of medical records confirmed that detainees who are identified as being "at risk" are immediately referred to a behavioral health provider but are not always evaluated within 24 hours of referral. One of seventeen detainees on suicide watch since the last inspection was not evaluated by a mental health professional within 24 hours.

Recommendation: Mental health professionals should evaluate at risk detainees within 24 hours of identification even on weekends.

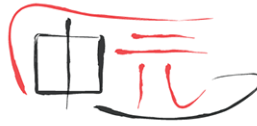
Recommended Rating and Justification

The Lead Compliance Inspector recommends that the facility receive a rating of Meets Standards. The facility complies with the ICE Performance Based National Detention Standards (PBNDS) 2011. No (0) standards were found Does Not Meet Standards and one (1) standard was Not Applicable (N/A). All remaining forty-one (41) standards were found to Meet Standards.

LCI Assurance Statement

The findings of Meets Standards and Does Not Meet Standards are accurately and completely documented on the G-324 Inspection Form and are supported by documentation in the inspection file. An out brief was conducted at the facility and in addition to the entire Nakamoto Group, Inc. Inspection Team, the following were present:

- ICE Officials – [REDACTED]
- Facility Staff – [REDACTED]



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, Lead Compliance Inspector

Printed Name of LCI

January 10, 2019

Date