



January 13, 2022

TO: [REDACTED]  
Acting Assistant Director Custody Management

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

SUBJECT: **Annual Inspection of the Port Isabel Service Processing Center**

The Nakamoto Group, Inc. performed an annual inspection for compliance with the ICE Performance-Based National Detention Standards (PBNDS 2011) of the Port Isabel SPC in Los Fresnos, Texas during the period of January 11-13, 2022. This is an SPC.

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

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

**Type of Inspection**

This is an annual inspection which was 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 2021 inspection.

**Inspection Summary**

The Port Isabel SPC is currently accredited by:

- The American Correctional Association (ACA) –Yes
- The National Commission on Correctional Health Care (NCCHC) –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 2021 and 2022 PBNDS annual compliance inspections:



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<i>2021 Annual Inspection</i>	
Meets Standards	40
Does Not Meet Standards	0
Repeat Finding	0
Not Applicable	3

<i>2022 Annual Inspection</i>	
Meets Standards	40
Does Not Meet Standards	0
Repeat Finding	0
Not Applicable	3

The inspection team identified zero (0) deficient components.

### **Facility Snapshot/Description**

The Port Isabel Service Processing Center is located approximately 22 miles north of the U.S./Mexico border in rural Los Fresnos, Texas. The [REDACTED]-bed facility is located on a 350-acre site; 262 acres of undeveloped land and 88 acres of undeveloped native grounds that serve as a habitat for local wildlife. The facility houses male ICE detainees of all classification levels. The facility previously held female ICE detainees and the SIS Form completed by the facility indicates there are [REDACTED] beds for female detainees; however, there were no females housed at the time of inspection. The count on the first day of the inspection was [REDACTED].

The direct supervision facility houses detainees in four main housing units. Each unit contains [REDACTED] bed dorms for general population detainees. There is a [REDACTED]-bed segregation unit and a [REDACTED]-bed infirmary. Both indoor and outdoor recreation is offered. The facility has two soccer fields. Indoor recreation includes board games, cards, viewing television, and playing ping-pong. Tablets are available in the housing units. Detainees may play games, watch movies, or video chat with family and friends on the tablets. Prior to COVID-19 precautions being put in place, movies were shown in the recreation building. Telephones are available in the housing units and the recreation yards. Microwaves are available in the housing units as are vending machines. Law library computers have been placed in each housing unit to limit exposure to COVID-19.

During this hybrid inspection, the onsite inspectors visited all areas of the facility. The facility has enhanced surface cleaning in the facility and provides detainees with masks to help reduce COVID-19 exposure. Detainees and staff were observed wearing masks during the inspection. The facility has an aggressive COVID-19 control plan. Officers at the front gate check the temperature of anyone entering and require visitors to complete a questionnaire. Upon entering the facility, everyone must submit to another temperature check. Social distancing is practiced throughout the facility when possible. The facility reported that during the inspection, eight detainees tested positive for COVID-19 and were isolated in the medical unit. Several housing units were on COHORT status due to the recent arrival of the detainees.

The facility staff was professional in appearance and demeanor and those interviewed possessed a working knowledge of the standards as they applied to their duties. The atmosphere of the facility appeared relaxed and staff and detainee interactions were cordial and professional.

The inspection team formally interviewed a total of seven detainees. During this process, non-English speaking detainees were interviewed utilizing the telephonic translation line. The inspection team conducted numerous informal interviews of detainees while visiting the general population housing units.



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All detainees stated that they felt safe in the facility and were able to access programs and services. Detainees were asked about the quality of the food and responses were generally favorable. None expressed any concern relating to staff or receiving services.

Detainees indicated they were aware of the grievance system and how to use it. None of the detainees had contacted the OIG but were aware of how to make contact if they needed to. No detainees were housed in segregation during the inspection.

The facility is climate controlled and appeared to be in good repair. The sanitation level of the facility was observed to be maintained at an above average level.

Medical care is provided by IHSC. Detainees are not charged a co-pay for any health services. Security services are contracted to Ahtna, telephone service is provided by Talton, and commissary services are provided by Keefe.

### **Areas of Concern/Significant Observations**

This was a hybrid inspection with one inspector working remotely. Four inspectors were on-site. The remote inspector (Medical SME) was unable to personally observe practices and procedures within the facility but was able to review files and documentation.

The facility achieves optimal compliance with a number of standard requirements including meeting standards in medical care for being accredited by NCCHC; in admission and release by requiring medical staff to be present and observe the process when a strip search of a transgender detainee occurs; in telephone access by providing one telephone per every ten detainees; in law library and legal material by providing detainees a minimum of fifteen hours per week of access to the law library; and in recreation by providing detainees in general population wireless headsets for television viewing with language choice, for providing four hours per day seven days a week of outdoor recreation, and for providing detainees in SMU for administrative reasons at least two hours of recreation or exercise opportunities seven days a week and those detainees in the SMU for disciplinary reasons at least one hour of recreation or exercise opportunities seven days a week.

### **Recommended Rating and Justification**

The Lead Compliance Inspector recommends that the facility receive a rating of Meets Standards, unless unobserved practices and conditions are contrary to what was reported to the inspection team. The facility complies with the ICE Performance-Based National Detention Standards (PBNDS 2011). No (0) standards were found Does Not Meet Standard and three (3) standards were Not Applicable (N/A). All remaining forty (40) standards were found to Meet Standards.

### **LCI Assurance Statement**

The findings are accurately and completely documented on the G324 Inspection form and are supported by documentation in the inspection file. A telephonic out brief was conducted at the facility. In addition to the Nakamoto Group Inspection Team, the following were present:

- ICE Officials- [REDACTED]



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- Facility Staff-

[REDACTED]

[REDACTED], Lead Compliance Inspector

January 13, 2022

Printed Name of LCI

Date

[REDACTED]