



February 14, 2019

TO: [REDACTED]
Assistant Director for Detention Management

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

SUBJECT: **Annual Inspection of the Prairieland Detention Center**

The Nakamoto Group, Inc. performed an annual inspection for compliance with the ICE Performance Based National Detention Standards (PBNDS) 2011 of the Prairieland Detention Center in Alvarado, Texas during the period of February 12-14, 2019. This is a dedicated IGSA (DIGSA) facility.

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 rating of Meets Standards during the April 2018 inspection.

Inspection Summary

The Prairieland Detention Center is currently accredited by:

- American Correctional Association - No
- The National Commission on Correctional Health Care (NCCHC) – No
- 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 annual compliance inspections:



The Nakamoto Group, Inc.

2018 Annual Inspection	
Meets Standards	40
Does Not Meet Standards	0
Repeat Deficiency	0
Not Applicable	2

2019 Annual Inspection	
Meets Standards	40
Does Not Meet Standards	0
Repeat Deficiency	0
Not Applicable	2

The inspection team identified (17) seventeen deficient components in the following (7) seven standards:

- Environmental Health and Safety – 4
- Funds and Personal Property – 1
- Special Management Units – 3
- Staff-Detainee Communication – 1
- Food Service – 3, one of which is a Priority Component
- Medical Care – 2, one of which is a Priority Component
- Recreation - 3

Facility Snapshot/Description

The Prairieland Detention Center (PDC), a DIGSA facility, is located in rural Alvarado, Texas, forty miles southeast of Dallas. The City of Alvarado, PFC Board of Directors, owns the facility. LaSalle Corrections operates and manages the facility. Prairieland Detention Center houses male and female detainees of low, medium and high custody levels. [REDACTED]

The facility design includes thirteen general population dormitories. One linear segregation unit houses male detainees. Dormitory capacities range from thirty to 82 each. Each dormitory has a dedicated outdoor recreation area that detainees may freely access, as well as, a separate indoor common area for leisure time activities. Each dormitory is furnished with two sixty-inch television sets. Housing units are managed by direct supervision. The concept of civil detention is evident in the physical design and program opportunities planned for the detainees. Food service operation consists of cafeteria style service in a central dining room for the male detainees. Female detainees are served via satellite feeding. Detainees housed in the segregation unit are served via satellite feeding. Outdoor seating is available during meals for both males and females, weather permitting. The sanitation levels were observed to be above average.

The environment is calm and without obvious tension. Detainees were observed interacting with other detainees, inspectors, ICE officers and facility staff without hesitation. Interviews with detainees of limited English proficiency revealed no issues obtaining services. Confidential interviews revealed no issues with conditions of confinement, services or staff professionalism. Twelve detainees in the female dormitory requested “that fruit be served”. The Safety SME confirmed that menus were approved by a registered dietitian and that fruit juice is included on the menu. ICE officers visit the housing units frequently. The inspection team interviewed no less than 120 detainees, including detainees in the special management unit, males, females, LEP detainees and detainees working in the kitchen, laundry and participating in recreation activities. The language line was used during interviews with detainees with limited English proficiency.

Employees conducted themselves professionally and indicated a desire and the knowledge to manage the ICE detainees as the standards require. Detainees do not incur medical co-payments. Food service is provided by Aramark. All other services are provided by LaSalle employees.

Areas of Concern/Significant Observations

There were two Priority Components rated Does Not Meet Standard:

Medical Care

Component # 70: The HSA shall implement a system of internal review and quality assurance that includes data analysis, a multidisciplinary committee with regular monitoring of health service outcomes, and assessment of ongoing education and training needs.

Findings: The review of available documentation could not confirm the HSA has implemented a system of internal review and quality assurance which complies with the items listed in the component or the requirements of the standard.

Recommendations: The HSA should implement a system of internal review and quality assurance. The system should include the following:

- a. participation in a multidisciplinary quality improvement committee;
- b. collection, trending and analysis of data along with planning, interventions and reassessments;
- c. evaluation of defined data;
- d. analysis of the need for ongoing education and training;
- e. on-site monitoring of health service outcomes on a regular basis through the following measures:
 - 1) chart reviews by the responsible physician or his/her designee, including investigation of complaints and quality of health records;
 - 2) review of practices for prescribing and administering medication;
 - 3) systematic investigation of complaints and grievances;
 - 4) monitoring of corrective action plans;
 - 5) reviewing all deaths, suicide attempts and illness outbreaks;
 - 6) developing and implementing corrective action plans to address and resolve identified problems and concerns;
 - 7) reevaluating problems or concerns, to determine whether the corrective measures have achieved and sustained the desired results;
 - 8) incorporating findings of internal review activities into the organization's educational and training activities;
 - 9) maintaining appropriate records of internal review activities; and
 - 10) ensuring records of internal review activities comply with legal requirements on confidentiality of records.



Food Service

Component #10 requires that: Before and during the display, service and transportation of food, sanitary guidelines are observed, with hot foods maintained at a temperature of at least 140° F (120° F in food trays) and foods that require refrigeration maintained at 41° F or below.

Findings: Observation of the satellite feeding during the inspection revealed that the temperature of the food delivered to the female housing unit was not maintained at the appropriate temperature. The temperature of the chicken patties on 2/13/2019 and hot dogs on 2/14/2019 were 105° F and 110° F respectively in the insulated trays.

Recommendation: The facility should ensure that temperatures of the hot food delivered in satellite trays be maintained at least 140° F (120° F degrees in food trays). The facility may consider heating/holding the food to a higher temperature prior to plating.

Recommended Rating and Justification

The Lead Compliance Inspector recommends that the facility receive a rating of Meets Standard. The facility complies with the ICE Performance Based National Detention Standards (PBNDS) 2011. No (0) standards were found Does Not Meet Standard and two (2) standards were Not Applicable (N/A). All remaining forty (40) standards were found to be in compliance.

LCI Assurance Statement

The findings of compliance and non-compliance are accurately and completely documented on the G-324A 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]

[Redacted]

[Redacted], Lead Compliance Inspector

February 14, 2019

Printed Name of LCI

Date

[Redacted]