

---

# ICE Detention Standards Compliance Review

Willacy Detention Center

March 10-12, 2009

REPORT DATE – March 19, 2009



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

b6

Executive Vice President

Creative Corrections  
6415 Calder, Suite B  
Beaumont, TX 77706

b6

COTR

U.S. Immigration and Customs Enforcement  
Detention Standards Compliance Unit  
500 12th St, SW  
Washington, DC 20536

---

~~FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE)~~



March 19, 2009

MEMORANDUM FOR: James T. Hayes, Jr., Director  
Office of Detention and Removals Operations

FROM:

[redacted] b6, b7c  
Reviewer-In-Charge *for* [redacted] b6, b7c  
[redacted] b6, b7c

SUBJECT: Willacy Detention Center  
Annual Detention Review

Creative Corrections conducted an Annual Detention Review of the Willacy Detention Center, operated by Management Training Corporation, located in Raymondville, Texas, on March 10-12, 2009. As noted on the attached documents, the team of Subject Matter Experts included [redacted] b6, b7c Security; [redacted] b6 Health Services; [redacted] b6 Environmental Health and Safety; and [redacted] b6 Food Services.

A closeout meeting was conducted on March 12, 2009, with Warden [redacted] b6, b7c [redacted] b6 [redacted] b6 Senior Director, Federal Customer Relations; [redacted] b6 Special Assistant to Regional Director; and a number of department heads and supervisors. ICE staff in attendance included [redacted] b6, b7c AFOD. The closeout included a discussion of all aspects of the 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 facility is not accredited by the National Commission on Correctional Health Care, the American Correctional Association, or the Joint Commission on Accreditation of Healthcare Organizations.

**Standards Compliance**

The following statistical information provides a direct comparison of the 2008 ADR and this ADR conducted for 2009.

**March 2008      Review**

**Compliant**            **35**  
**Deficient**            **2**  
**At-Risk**                **0**  
**Not-Applicable**    **1**

**March 2009      Review**

**Compliant**            **37**  
**Deficient**            **0**  
**At-Risk**                **0**  
**Not-Applicable**    **1**

**Recommended Rating and Justification**

The facility has taken the required actions to correct the two deficiencies noted in the 2008 ADR. It is the Reviewer-In-Charge (RIC) recommendation that the facility receive a rating of "Good."

**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 Reviewed**

ICE Service Processing Center  
 ICE Contract Detention Facility  
 ICE Intergovernmental Service Agreement

Estimated Man-days Per Year:  
691,200

**B. Current Inspection**

Type of Inspection  
 Field Office  HQ Inspection  
 Date[s] of Facility Review  
**March 10-12, 2009**

**G. Accreditation Certificates**

List all State or National Accreditation[s] received:

Check box if facility has no accreditation[s]

**C. Previous/Most Recent Facility Review**

Date[s] of Last Facility Review  
**March 11-13, 2008**  
 Previous Rating  
 Superior  Good  Acceptable  Deficient  At-Risk

**H. Problems / Complaints (Copies must be attached)**

The Facility is under Court Order or Class Action Finding

Court Order  Class Action Order

The Facility has Significant Litigation Pending

Major Litigation  Life/Safety Issues

Check if None.

**D. Name and Location of Facility**

Name  
**Willacy Detention Center**  
 Address (Street and Name)  
**1800 Industrial Drive**  
 City, State and Zip Code  
**Raymondville, Texas 78580**  
 County  
**Willacy**  
 Name and Title of Chief Executive Officer (Warden/OIC/Supt.)  
**Warden** b6, b7c  
 Telephone # (Include Area Code)  
**(956)** b6, b7c  
 Field Office / Sub-Office (List Office with oversight responsibilities)  
**San Antonio**  
 Distance from Field Office  
**200 Miles**

**I. Facility History**

Date Built  
**May 2006**  
 Date Last Remodeled or Upgraded  
**July 2007**  
 Date New Construction / Bed space Added  
**June 2008/ 1,086 Beds added**  
 Future Construction Planned  
 Yes  No Date: **Unknown**  
 Current Bed space | Future Bed space (# New Beds only)  
**3,000** | Number: Date:

**E. ICE Information**

Name of Inspector (Last Name, Title and Duty Station)  
 b6, b7c **RIC / Creative Corrections**  
 Name of Team Member / Title / Duty Location  
 b6, b7c **SME / Security**  
 Name of Team Member / Title / Duty Location  
 b6 **/ SME / Medical**  
 Name of Team Member / Title / Duty Location  
 b6 **SME / Food Service**  
 Name of Team Member / Title / Duty Location  
 b6 **/ SME / Environmental Health & Safety**

**J. Total Facility Population**

Total Facility Intake for previous 12 months

**27,284**

Total ICE Man-days for Previous 12 months

**491,636**

**K. Classification Level (ICE SPCs and CDFs Only)**

	L-1	L-2	L-3
Adult Male			
Adult Female			

**L. Facility Capacity**

	Rated	Operational	Emergency
Adult Male	2,750	2,750	2,750
Adult Female	250	250	250

Facility holds Juveniles Offenders 16 and older as Adults

**F. CDF/IGSA Information Only**

Contract Number | Date of Contract or IGSA  
**DROIGSA-060003** | **June 27, 2006**  
 Basic Rates per Man-Day  
**\$78.00**  
 Other Charges: (If None, Indicate N/A)  
**N/A**

**M. Average Daily Population**

	ICE	USMS	Other
Adult Male	1,217	0	0
Adult Female	236	0	0

**N. Facility Staffing Level**

Security: | Support:  
 b2High

~~FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE)~~

**Significant Incident Summary Worksheet**

For ICE to complete its review of your facility, the following information must be completed 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.

<i>Incidents</i>	<i>Description</i>	Jan – Mar	Apr – Jun	Jul – Sept	Oct – Dec
Assault: Offenders on Offenders <sup>1</sup>	Types (Sexual <sup>2</sup> , Physical, etc.)	P	P	P	P
	With Weapon	0	0	0	0
	Without Weapon	13	1	17	18
Assault: Detainee on Staff	Types (Sexual Physical, etc.)				
	With Weapon	0	0	0	0
	Without Weapon	0	0	0	0
Number of Forced Moves, incl. Forced Cell moves <sup>3</sup>		0	0	0	0
Disturbances <sup>4</sup>		0	0	0	0
Number of Times Chemical Agents Used		0	0	0	0
Number of Times Special Reaction Team Deployed/Used		0	0	0	0
# Times Four/Five Point Restraints applied/used	Number/Reason (M=Medical, V=Violent Behavior, O=Other)	N/A	N/A	N/A	N/A
	Type (C=Chair, B=Bed, BB=Board, O=Other)				
Offender / Detainee Medical Referrals as a result of injuries sustained.		0	0	0	0
Escapes	Attempted	0	0	0	0
	Actual	0	0	0	0
Grievances:	# Received	123	302	242	257
	# Resolved in favor of Offender/Detainee	2	0	0	2
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	125	203	295	454
	# Psychiatric Cases referred for Outside Care	0	1	5	6

<sup>1</sup> Any attempted physical contact or physical contact that involves two or more offenders

<sup>2</sup> Oral, anal or vaginal penetration or attempted penetration involving at least 2 parties, whether it is consenting or non-consenting

<sup>3</sup> Routine transportation of detainees/offenders is not considered "forced"

<sup>4</sup> 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.

~~FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE)~~

DHS/ICE Detention Standards Review Summary Report						
1. Acceptable 2. Deficient 3. At Risk 4. Repeat Finding 5. Not Applicable						
		1.	2.	3.	4.	5.
<b>Legal Access Standards</b>						
1.	Access to Legal Materials	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2.	Group Presentations on Legal Rights	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3.	Visitation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4.	Telephone Access	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Detainee Services</b>						
5.	Admission and Release	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6.	Classification System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.	Correspondence and Other Mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8.	Detainee Handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9.	Food Service	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10.	Funds and Personal Property	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11.	Detainee Grievance Procedures	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12.	Issuance and Exchange of Clothing, Bedding, and Towels	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13.	Marriage Requests	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14.	Non-Medical Emergency Escorted Trip	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
15.	Recreation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16.	Religious Practices	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17.	Voluntary Work Program	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Health Services</b>						
18.	Hunger Strikes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19.	Medical Care	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20.	Suicide Prevention and Intervention	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21.	Terminal Illness, Advanced Directives and Death	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Security and Control</b>						
22.	Contraband	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23.	Detention Files	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24.	Disciplinary Policy	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25.	Emergency Plans	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
26.	Environmental Health and Safety	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
27.	Hold Rooms in Detention Facilities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
28.	Key and Lock Control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
29.	Population Counts	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
30.	Post Orders	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
31.	Security Inspections	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
32.	Special Management Units (Administrative Segregation)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
33.	Special Management Units (Disciplinary Segregation)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
34.	Tool Control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
35.	Transportation (Land management)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
36.	Use of Force	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
37.	Staff/ Detainee Communication (Added August 2003)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
38.	Detainee Transfer (Added September 2004)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

All findings (Deficient and At-Risk) require written comment describing the finding and what is necessary to meet compliance.

FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE)

**RIC Review Assurance Statement**

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	[Redacted Signature] b6, b7c
Title & Duty Location	Date
RIC, Creative Corrections	March 12, 2009

Team Members	
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location
b6, b7c, SME, Security	b6, SME, Medical
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location
b6, SME, Food	b6, SME, Environmental Health and Safety

**Recommended Rating:**

- Superior
- Good
- Acceptable
- Deficient
- At-Risk

Comments: It is evident that there has been a lot of effort to correct the deficiencies noted in the 2008 report. Key and Lock Control is now operating at a commendable level. All previous deficiencies mentioned in this area and in the fire plans have been corrected.