



U.S. Immigration
and Customs
Enforcement

July 31, 2007

MEMORANDUM FOR: John P. Torres
Director
Office of Detention and Removal

FROM: [REDACTED] b6,b7c [REDACTED] b6,b7c
Immigration Enforcement Agent
Reviewer in Charge

SUBJECT: Webb County Detention Center Annual Detention Review

The San Antonio Field Office, Office of Detention and Removal conducted a detention review of the CCA Webb County Detention Center on June 26, 2007 to June 27, 2007. This review was conducted by [REDACTED] b6,b7c, IEA, Reviewer-in-Charge and [REDACTED] b6,b7c, IEA, Team Member. This facility is used for detainees requiring housing Under 72 hours; however, this jail review is to certify this facility for Over 72-hours.

Type of Review:

This review is a scheduled Operational Review to determine general compliance with established Immigration and Customs Enforcement (ICE) National Detention Standards.

Review Summary:

The review of Webb County Detention Center was very well. Warden [REDACTED] b6,b7c and his staff were very helpful. As per staff, made contact with sister facility CCA in Laredo to obtain information on National Detention Standards, documents, and any other information needed to comply. This facility was well maintained.

Review Findings:

The following information summarizes those standards not in compliance. Each standard is identified and a short summary provided regarding standards or procedures not currently in compliance.

Compliant	-	27
Deficient	-	8
At-Risk	-	0

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Non-Applicable - 3

Standards Summary Findings:

Access to Legal Materials: The law library lacks computers with Lexus Nexus.

Admission and Release: The officers stated they strip search new arrivals. ✓ The I-203 is not being utilized as common practice. ✓ They are currently working on an orientation video. ✓

Classification: Officers are not receiving any criminal or immigration history on each detainee in order to be classified. ✓ Classification is relied on the I-216 provided by ICE. Reassessments and reclassifications of detainees are not in compliance due to facility currently being under 72 hours.

Detainee Handbook: Handbook does not explain levels of classification, nor the methods. The handbook briefly stated different areas such as count times, barber, and recreation, but does not have the hours listed. ✓

Detention Files: Ice only provides an I-216 for booking process, no receipts are provided in file as well.

Key and Lock Control: Key control officer has not had locksmith training.

b2High

b2High

Staff/ Detainee Communication: Facility is an under 72 hour facility. Detainee request are generated to ICE.

Detainee Transfer: Transfer sheets and Detainee Transfer Notification Forms are not being utilized.

RIC Observations:

The staff of Webb County Detention Center was knowledgeable on policy and procedures. Staff was confident in their posts as well. They acted in a professional manner during the inspection.

RIC Issues and Concerns

Upon arrival, officers strip search new arrivals, and it is note as well on the handbook "you will be required to submit to a strip search". Transfer sheets are not being utilized at this facility as well.

Recommended Rating and Justification:

It is the Reviewer in Charge recommendation that the facility receive a rating of "acceptable". This facility is in compliant 27, deficient 8, and 3 non-applicable.

RIC Assurance Statement:

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All findings of this review have been documented on Form G-324A and are supported by the written documentation contained in the review file.

~~ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED~~

A. Type of Facility Reviewed

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

B. Current Inspection

Type of Inspection
 Field Office HQ Inspection
 Date[s] of Facility Review
 06/26/07-06/27/07

C. Previous/Most Recent Facility Review

Date[s] of Last Facility Review
 May 08, 2006
 Previous Rating
 Superior Good Acceptable Deficient At-Risk

D. Name and Location of Facility

Name
 Webb County Detention Center
 Address (Street and Name)
 9998 S. HWY 83
 City, State and Zip Code
 Laredo, Tx 78046
 County
 Webb County
 Name and Title of Chief Executive Officer (Warden/OIC/Superintendent)
 Warden [redacted] b6,b7c
 Telephone # (Include Area Code)
 956 [redacted] b6,b7c
 Field Office / Sub-Office (List Office with oversight responsibilities)
 San Antonio, Texas
 Distance from Field Office
 3 Hours

E. ICE Information

Name of Inspector (Last Name, Title and Duty Station)
 [redacted] b6,b7c / IEA / PIDC
 Name of Team Member / Title / Duty Location
 [redacted] b6,b7c IEA / WDC
 Name of Team Member / Title / Duty Location
 / /
 Name of Team Member / Title / Duty Location
 / /

F. CDF/IGSA Information Only

Contract Number
 N/A
 Date of Contract or IGSA
 N/A
 Basic Rates per Man-Day
 \$ 58.00
 Other Charges: (If None, Indicate N/A)
 N/A; ; ;
 Estimated Man-days Per Year
 365

G. Accreditation Certificates

List all State or National Accreditation[s] received:
 ACA 11-10-2004 with score of 98.1%
 Check box if facility has no accreditation[s]

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.

I. Facility History

Date Built
 April of 1999
 Date Last Remodeled or Upgraded
 N/A
 Date New Construction / Bedspace Added
 N/A
 Future Construction Planned
 Yes No Date: 2007 to 2008
 Current Bedspace
 603
 Future Bedspace (# New Beds only)
 Number: 740 Date: 2007 to 2008

J. Total Facility Population

Total Facility Intake for previous 12 months
 3,045,814
 Total ICE Mandays for Previous 12 months
 3,044,169

K. Classification Level (ICE SPCs and CDFs Only)

	L-1	L-2	L-3
Adult Male	771	0	9
Adult Female	0	0	0

L. Facility Capacity

	Rated	Operational	Emergency
Adult Male	470	570	590
Adult Female	33	33	63

Facility holds Juveniles Offenders 16 and older as Adults

M. Average Daily Population

	ICE	USMS	Other
Adult Male	100	580	0
Adult Female	0	50	0

N. Facility Staffing Level

Security: [redacted] b2High Support:

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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 ¹	Types (Sexual ² , Physical, etc.)	7 (Physical)	10 (Physical)	9 (Physical)	8 (Physical)
	With Weapon	1	1	1	0
	Without Weapon	6	9	8	8
Assault: Detainee on Staff	Types (Sexual Physical, etc.)	1 (Physical)	0	0	1 (Physical)
	With Weapon	0	0	0	0
	Without Weapon	1	0	0	1
Number of Forced Moves, incl. Forced Cell moves ³		0	0	0	0
Disturbances ⁴		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)	0	0	0	0
	Type (C=Chair, B=Bed, BB=Board, O=Other)	0	0	0	0
Offender / Detainee Medical Referrals as a result of injuries sustained.		2	3	4	2
Escapes	Attempted	0	0	0	0
	Actual	0	0	0	0
Grievances:	# Received	14	16	15	25
	# Resolved in favor of Offender/Detainee	7	13	8	15
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)	0	0	0	0
	Number	0	0	0	0
Psychiatric / Medical Referrals	# Medical Cases referred for Outside Care	59	55	47	73
	# Psychiatric Cases referred for Outside Care	0	0	0	0

¹ Any attempted physical contact or physical contact that involves two or more offenders

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

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

⁴ 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.

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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	<input type="checkbox"/>	<input checked="" 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"/>	
Detainee Services		1.	2.	3.	4.	5.
5.	Admission and Release	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6.	Classification System	<input type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Health Services		1.	2.	3.	4.	5.
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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Security and Control		1.	2.	3.	4.	5.
22.	Contraband	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23.	Detention Files	<input type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
38.	Detainee Transfer (Added September 2004)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

NA

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

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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) b6,b7c	Signature b6,b7c
Title & Duty Location IEA - Port Isabel Detention Center	Date 06/29/2007

Team Members	
Print Name, Title, & Duty Location b6,b7c IEA, Willacy D b6,b7c	Print Name, Title, & Duty Location
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location

- Recommended Rating:**
- Superior
 - Good
 - Acceptable
 - Deficient
 - At-Risk

Comments: I, b6,b7c, Reviewer in Charge of Webb County Detention Center along with team member b6,b7c found the following information:

The law library was designated by b6. The law library had books of Federal Reporter and had just received books of Immigration Procedures Handbook 2007. The law library lacked computers with Lexus Nexus. Upon interviewing officers in process, officers stated they strip search new arrivals. Upon releases, the form I-203 are not being utilized as a common practice. Classification is relied on the I-216 provided by ice and their system of Biometrix. Webb County officers do not have any other information as far as criminal/ immigration history to classify. Reassessments and reclassifications of detainees are not being met due to currently being under 72 hour facility. Handbook does not explain the different levels of classifications. The facility orientation video was currently being produced. The detainee handbook needs some work. The handbook briefly stated different areas such as count times, barber, and recreation, but does not have the hours listed. Classification levels had no explanation nor had the methods. This facility have not had any legal rights presentations nor have a voluntary work program in place. Since this facility was used as an under 72 hour facility, the staff detainee communication was not met. Transfer sheets are not being utilized at this facility.

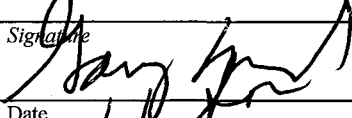
Overall the facility is acceptable. The staff of Webb County Detention Center are willing to make changes to the needs of the National Detention Standards for over 72 hours facility. The facility is very well maintained and clean. The officers of Webb County Detention Center receive a large amount of trainings, working with other local agencies. The staff in charge of different areas such as; Training, Special Management Unit, Recreation, Grievances, Food Services and other areas were very knowledgeable of their areas.

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HEADQUARTERS EXECUTIVE REVIEW

Review Authority

The signature below constitutes review of this report and acceptance by the Review Authority. **OIC/CEO will have 30 days from receipt of this report to respond to all findings and recommendations.**

HQDRO EXECUTIVE REVIEW: (Please Print Name)	Signature
John P. Torres	
Title	Date
Director	10/10/07

Final Rating:

- Superior
- Good
- Acceptable
- Deficient
- At-Risk
- No Rating

Comments: A final rating of Deficient has been assigned. The rating was based on the RIC Summary Memorandum and supporting documentation

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MANAGEMENT REVIEW

Review Authority

The signature below constitutes review of this report and acceptance by the Office of Detention and Removal. **The Facility has 30 days from receipt of this report to respond to all findings and recommendations.**

HQDRO MANAGEMENT REVIEW: (Print Name)	<i>Signature</i>
John P. Torres	
Title	Date
Director (Acting)	

- Final Rating:**
- Superior**
 - Good**
 - Acceptable**
 - Deficient**
 - At-Risk**

Comments: A finding of At-Risk is supported by the findings of the review team and are documented within the Form G-324A and accompanying worksheets.

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