



U.S. Immigration
and Customs
Enforcement

MEMORANDUM FOR: Michael J. Pitts
Field Office Director
San Antonio Field Office

OCT 02 2009

FROM: [REDACTED] b6
Assistant Director for Management

SUBJECT: Central Texas Detention Facility Annual Review

The annual review of the Central Texas Detention Facility conducted July 21 - 23, 2009, in San Antonio, Texas has been received. A final rating of Acceptable has been assigned. No further action is required and this review is closed.

The rating was based on the Reviewer-In-Charge (RIC) Summary Memorandum and supporting documentation. The Field Office Director must now initiate the following actions in accordance with the Detention Management Control Program (DMCP):

- 1) The Field Office Director, Detention and Removal Operations, shall notify the facility within five business days of receipt of this memorandum. Notification shall include copies of the Form G-324A, *Detention Facility Review Form*, the G-324A Worksheet, RIC Summary Memorandum, and a copy of this memorandum.
- 2) The next annual review will be scheduled on or before July 21, 2010.

Should you or your staff have any questions regarding this matter, please contact [REDACTED] b6, b7c, Detention & Deportation Officer, Detention Management Division at (202) 732- [REDACTED] b6, b7c.

cc: Official File
ICE: HQDRO [REDACTED] b6, b7c : 2-5514:08/26/09

[REDACTED] b2High

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July 23, 2009

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

FROM: [Redacted] b6,b7c
Lead Compliance Inspector [Redacted] b6,b7c [Redacted] b6,b7c for

SUBJECT: Central Texas Detention Facility
Annual Detention Review

MGT of America performed an annual inspection for compliance with the ICE National Detention Standards (NDS) at the Central Texas Detention Facility (CTDF) located in San Antonio, Texas during the period of July 21-23, 2009. This is an IGSA facility operated by the GEO group.

The annual inspection was performed under the guidance of [Redacted] b6,b7c, Lead Compliance Inspector. Team members were:

Standard	Inspector
Security	[Redacted] b6,b7c
Health Services	
Food Services	
Safety	

Type of Review

This review is a scheduled annual inspection performed to determine overall compliance with the ICE NDS. The facility received a previous rating of "Acceptable" during the July, 2008 inspection.

Review Summary

The Central Texas Detention Facility is not currently accredited by the American Correctional Association (ACA); the National Commission on Correctional Health Care (NCCCHC); or the Joint Commission on Accreditation of Health Organizations (JCAHO).

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 2008 and 2009 alien detention standards compliance annual inspection(s):

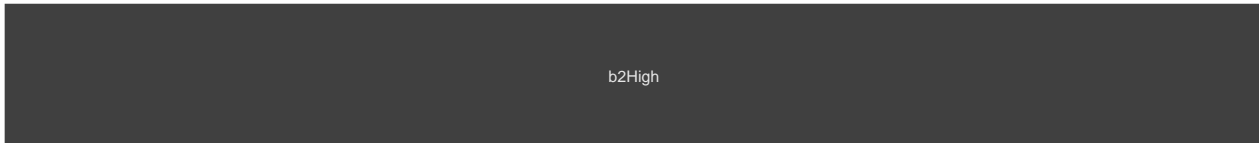
<u>2008 Inspection</u>		<u>2009 Inspection</u>	
Compliant	35	Compliant	36
Deficient	0	Deficient	0
Repeat Deficiency	0	Repeat Deficiency	0
Not Applicable	3	Not Applicable	2

LCI Issues and Concerns

No deficiencies were found during this review.

Recommendations

Data the facility supplied on the SIS form indicates a spike in the number of detainee grievances. The Facility Administrator reports a significant number of grievances occurred as a group of non-ICE detainees were transferred into the facility. It is recommended this information be monitored for possible trends.



It is recommended that policy for "Terminal Illness, Advanced Directives and Death" be reviewed and revised before the next annual inspection to include procedures for notification to ICE in the event or a new DNR order, detainee death, detainee desire to have his/her attorney draft DNR orders, newly discovered terminal illness.

The CTFD has not housed "over 72 hour" ICE detainees since November of 2008. The facility maintains its physical plant, policy and procedure, and all related services in an inspection ready fashion. Staff cooperation was high caliber.

Best Practices

The detainee orientation program should be considered as a "best practice". This program is well organized, pertinent, and effective at relating necessary information to the incoming detainee population.

Recommended Rating and Justification:

The Lead Compliance Inspector recommends that the facility receive a rating of "Acceptable."

LCI Assurance Statement

The findings of compliance and noncompliance 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 the following were present: Warden [b6,b7c], Asst. Warden [b6,b7c], Asst. Warden [b6,b7c], Chief Engineer [b6,b7c], Dietary Manager [b6,b7c], Major [b6,b7c], [b6,b7c] (GEO), HR Specialist [b6,b7c], Key Control Officer [b6,b7c], ICE Agent [b6,b7c], ICE Agent [b6,b7c] -- [b6,b7c], Transportation Officer [b6,b7c], Law Librarian [b6,b7c], Health Services Administrator [b6,b7c], Executive Secretary [b6,b7c], CI [b6,b7c], CI [b6,b7c], CI [b6,b7c], CI [b6,b7c], and myself.

[b6,b7c] / July 23, 2009
Lead Compliance Inspector
Signature: [b6,b7c] for

A. Type of Facility Reviewed

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

B. Current Inspection

Type of Inspection
Annual Inspection
 Date[s] of Facility Review
July 21-23, 2009

C. Previous/Most Recent Facility Review

Date[s] of Last Facility Review
June 30, July 1-3, 2008
 Previous Rating
 Superior Good Acceptable Deficient At-Risk

D. Name and Location of Facility

ICE Facility Code
Central Texas Detention Facility
 Name
 Address (Street and Name)
218 South Laredo Street
 City, State and Zip Code
San Antonio, Texas 78207
 County
Bexar
 Name and Title of Facility Administrator (Warden/OIC/Superintendent)
Acting Warden [redacted] b6,b7c
 Telephone # (Include Area Code)
(210)227 [redacted] b6,b7c
 Field Office / Sub-Office (List Office with oversight responsibilities)
 Distance from Field Office

E. ICE Information

Name of Inspector (Last Name, Title and Duty Station)
[redacted] b6,b7c / CI-Security /MGT of America
 Name of Team Member / Title / Duty Location
[redacted] b6,b7c / CI-Safety / MGT of America
 Name of Team Member / Title / Duty Location
[redacted] b6,b7c / CI- Food Service / MGT of America
 Name of Team Member / Title / Duty Location
[redacted] b6,b7c / CI / Medical

F. CDF/IGSA Information Only

Contract Number 80-99-0030	Date of Contract or IGSA 04/29/2009
Basic Rates per Man-Day \$44.15	
Other Charges: (If None, Indicate N/A) ; ; ;N/A	
Estimated Man-days per Year 1,195	

G. Accreditation Certificates

List all State or National Accreditation[s] received:
 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
1963
 Date Last Remodeled or Upgraded
N/A
 Date New Construction / Bedspace Added
2007
 Future Construction Planned
 Yes No Date: 2009
 Current Bedspace
684
 Future Bedspace (# New Beds only)
Number: Date:

J. Total Facility Population

Total Facility Intake for previous 12 months
1629
 Total ICE Mandays for Previous 12 months
11,044

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	537	537	
Adult Female	147	147	

Facility holds Juveniles Offenders 16 and older as Adults

M. Average Daily Population

	ICE	USMS	Other
Adult Male	3.27	540	
Adult Female	less than 1%	60	

N. Facility Staffing Level

Security: [redacted] b2High Support:

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.)	Physical	Physical	Physical	Physical
	With Weapon	0	0	0	0
	Without Weapon	10	7	7	6
Assault: Detainee on Staff	Types (Sexual Physical, etc.)	Physical	Physical	Physical	Physical
	With Weapon	0	0	0	0
	Without Weapon	4	8	4	6
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
Number of Times Canines Used in Facility		1	1	1	1
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	38	25	84	110
	# Resolved in favor of Offender/Detainee	N/A	N/A	N/A	N/A
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)	0	Suicide	0	0
	Number	0	1	0	0
Psychiatric / Medical Referrals	# Medical Cases referred for Outside Care	61	62	72	72
	# 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.

DHS/ICE Detention Standards Review Summary Report

1. Meets Standards		2. Does Not Meet Standards		3. Repeat Finding		4. Not Applicable	
		1	2	3	4		
PART 1 - SAFETY							
1	Emergency Plans	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
2	Environmental Health and Safety	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
3	Transportation (By Land)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
PART 2 - SECURITY							
4	Admission and Release	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
5	Classification System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
6	Contraband	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
7	Facility Security and Control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
8	Funds and Personal Property	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
9	Hold Rooms in Detention Facilities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
10	Key and Lock Control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
11	Population Counts	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
12	Post Orders	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
13	Searches of Detainees	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
14	Sexual Abuse and Assault Prevention and Intervention	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
15	Special Management Units	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
16	Staff-Detainee Communication	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
17	Tool Control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
18	Use of Force and Restraints	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
PART 3 - ORDER							
19	Disciplinary System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
PART 4 - CARE							
20	Food Service	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
21	Hunger Strikes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
22	Medical Care	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
23	Personal Hygiene	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
24	Suicide Prevention and Intervention	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
25	Terminal Illness, Advance Directives, and Death	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
PART 5 - ACTIVITIES							
26	Correspondence and Other Mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
27	Escorted Trips for Non-Medical Emergencies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
28	Marriage Requests	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
29	Recreation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
30	Religious Practices	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
31	Telephone Access	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
32	Visitation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
33	Voluntary Work Program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
PART 6 - JUSTICE							
34	Detainee Handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
35	Grievance System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
36	Law Libraries and Legal Material	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
37	Legal Rights Group Presentations	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
PART 7 - ADMINISTRATION & MANAGEMENT							
38	Detention Files	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
39	News Media Interviews and Tours	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
40	Staff Training	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
41	Transfer of Detainees	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			

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	b6,b7c for
Title & Duty Location	Date
LCI, MGT of America	07/23/2009

Team Members	
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location
b6,b7c CI-Security, MGT of America	
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location
b6,b7c CI-Safety, MGT of America	
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location
b6,b7c CI- Food Service, MGT of America	
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location
b6,b7c CI- Medical, MGT of America	
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location

Recommended Rating:

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

Comments:

Central Texas Detention Facility demonstrates compliance with all applicable National Detention Standards as evidenced by physical plant tour, working papers, and review documents. It should be noted that, absent over-night housing arrangements, there has not been an ICE detainee population at the facility since November of 2008. The physical plant is maintained in good repair; it is clean; staff morale is excellent; (U.S. Marshal Service) detainee mood is appropriate; and policy / procedure is (with few exceptions) current and effective. This appears to be a well managed facility that has high standards of operation.

There were 5 attempted suicides by Non-ICE detainees who either cut themselves or tied a sheet around their neck with no serious injuries.

There was one successful suicide by hanging by a Non-ICE female detainee on April 8, 2009. The incident was reviewed and staff followed proper procedures.

During the inspection there was a suicide by hanging by a Non-ICE female. The incident is still under investigation.

There was a death of a Non-ICE male detainee who died of cardiac disease on November 10, 2008