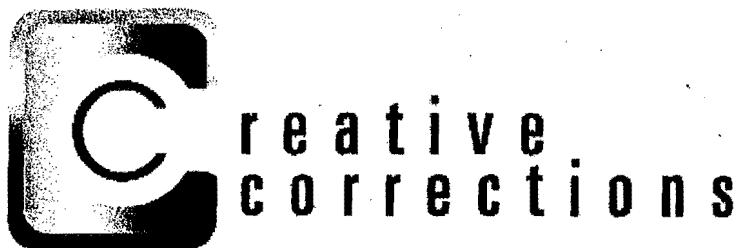

ICE Detention Standards Compliance Review

Eules City Jail

April 7-8, 2009

REPORT DATE – April 9, 2009



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

[REDACTED] b6,b7c Executive Vice President
Creative Corrections
6415 Calder, Suite B
Beaumont, TX 77706

[REDACTED] b6,b7c COTR
U.S. Immigration and Customs Enforcement
Detention Standards Compliance Unit
500 12th St, SW
Washington, DC 20536

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April 9, 2009

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

FROM: [REDACTED] [REDACTED] [REDACTED] *JTH*
Reviewer-In-Charge

SUBJECT: Eules City Jail Annual Detention Review

An Annual Detention Review (ADR) of Eules City Jail was conducted by Creative Corrections on April 7-8, 2009. The facility has an intergovernmental service agreement with Immigration and Customs Enforcement (ICE). The facility houses ICE detainees and city offenders. As noted on the attached documents, the team of Subject Matter Experts (SME) included [REDACTED] [REDACTED] Food Service; [REDACTED], Health Services; [REDACTED], Environmental Health and Safety; and [REDACTED], Security.

A closeout meeting was conducted on April 8, 2009, with Chief [REDACTED] during which all deficiencies, concerns, and recommendations were discussed.

Type of Review

This review is a scheduled Detention Standard Review to determine general compliance with established ICE National Detention Standards for facilities housing detainees under 72 hours. The last review of this facility was conducted on April 14-15, 2008.

Review Summary

The Eules City Jail is not accredited by the American Correctional Association, National Commission on Correctional Health Care, 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.

April 14-15, 2008 Review

Compliant	25
Deficient	2
At-Risk	0
Not Applicable	1

April 7-8, 2009 Review

Compliant	26
Deficient	1
At-Risk	0
Not Applicable	1

Disciplinary Policy – Deficient (Repeat Finding)

Policy: All facilities housing ICE detainees are authorized to impose discipline on detainees whose behavior is not in compliance with facility rules and regulations.

- The Eules City Jail has not established policy or procedures to impose discipline on detainees whose behavior is not in compliance with facility rules and regulations.
- ECJ Policy 400.47, Inmate Discipline, does not establish a written disciplinary procedure. The policy identifies loss of privileges, disciplinary isolation, and formal charges as actions allowable by staff; however, the policy does not establish the severity of charges, duration of sanctions, or proceedings regarding disciplinary reports, investigations, or hearings. There is no progressive level of review and/or appeals.
- ECJ issues a detainee handbook which describes, in general terms, the disciplinary process but it does not define charges, or sanctions based on the severity levels of offenses. Additionally, the facility's discipline policy and procedure does not require staff compliance with the general procedures described in the handbook.
- Policy 400.46, Rules of Conduct for Prisoners/Detainees, briefly describes prohibited acts, but they are not posted in the facility. A disciplinary severity scale and sanctions for violation of a prohibited act have not been established.

Recommendation

The administration should develop a written disciplinary policy that is consistent with the procedures listed in the ICE Handbook, and should develop a methodology to ensure this information is made available to all detainees.

Recommended Rating and Justification

It is the Reviewer-In-Charge recommendation that the facility receive a rating of "Acceptable." It is also recommended a Plan of Action be required to identify and implement corrective actions for the deficiency noted during this review.

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.

Estimated Man-days per Year
6000

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
April 7-8, 2009

C. PREVIOUS/MOST RECENT FACILITY REVIEW

Date[s] of Last Facility Review
April 14-15, 2008

Previous Rating
 Superior Good Acceptable Deficient At-Risk

D. NAME AND LOCATION OF FACILITY

Name
Euless City Jail

Address
1102 West Euless Blvd.

City, State and Zip Code
Euless, TX 76040

County
Tarrant

Name and Title of Chief Executive Officer
(Warden/OIC/Superintendent)
Asst. Chief [REDACTED] b6,b7c

Telephone Number (Include Area Code)
817-685-[REDACTED] b6,b7c

Field Office / Sub-Office (List Office with Oversight)
Dallas

Distance from Field Office
6.5 miles

G. ACCREDITATION CERTIFICATES N/A

List all State or National Accreditation[s] received:

H. PROBLEMS / COMPLAINTS (COPIES MUST BE ATTACHED)

The Facility is under Court Order or Class Action Finding
 Court Order Class Action Finding

The Facility has Significant Litigation Pending
 Major Litigation Life/Safety Issues

None

I. FACILITY HISTORY

Date Built
January, 2002

Date Last Remodeled or Upgraded
N.A.

Date New Construction / Bed Space Added
N.A.

Future Construction Planned
 Yes No Date:

Current Bed space | Future Bed Space (# New Beds only)
75 | Number: N.A. Date: N.A.

J. TOTAL FACILITY POPULATION

Total Facility Intake for Previous 12 months
9,200

Total ICE Man Days for Previous 12 months
7,787

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	74		
Adult Female	varies		

Facility Holds Juveniles Offenders 16 and Older as Adults

M. AVERAGE DAILY POPULATION

	ICE	USMS	Other
Adult Male	10		
Adult Female	3		

N. FACILITY STAFFING LEVEL

Security: [REDACTED] b2High | Support:

E. ICE Information

Name of Inspector (Last Name, Title and Duty Station)
[REDACTED] b6,b7c / Reviewer in Charge /

Name of Team Member / Title / Duty Location
[REDACTED] b6,b7c / SME-Food Service /

Name of Team Member / Title / Duty Location
[REDACTED] b6,b7c / SME-Medical /

Name of Team Member / Title / Duty Location
[REDACTED] b6,b7c / SME-Environmental Health and Safety /

Name of Team Member / Title / Duty Location
[REDACTED] b6,b7c / SME / Security

F. CDF/IGSA INFORMATION ONLY

Contract Number | Date of Contract or IGSA
IGSAA/DLS-6060-92 | February 23, 1991

Basic Rates per Man-Day
\$55.00

Other Charges: (If None, Indicate N/A)
; ; ; N/A

SIGNIFICANT INCIDENT SUMMARY WORKSHEET

In order for Creative Corrections to complete its review of your facility, you must complete the following worksheet prior to your scheduled review dates. This worksheet must contain data for the past twelve months. We will use this worksheet in conjunction with the ICE Detention Standards to assess your detention operations with regard to the needs of ICE and its detainee population. Failure to complete this worksheet will result in a delay in processing this report, and may result in a reduction or removal of ICE detainees from your facility.

INCIDENTS	DESCRIPTION	Jan – Mar	Apr – Jun	Jul – Sep	Oct – Dec
Assault: Offenders on Offenders ¹	Types (Sexual ² , Physical, etc.)	0	0	0	0
	With Weapon	0	0	0	0
	Without Weapon	0	0	0	0
Assault: Detainee on Staff	Types (Sexual Physical, etc.)	0	0	0	P
	With Weapon	0	0	0	1
	Without Weapon	0	0	0	0
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		1	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)	V	0	V	0
	Type (C=Chair, B=Bed, BB=Board, O=Other)	1C	0	1C	0
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	0	0	0	0
	# Resolved in Favor of Offender/Detainee	0	0	0	0
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	2	1	2	2
	# 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.	Visitation				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
2.	Telephone Access				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
DETAINEE SERVICES										
3.	Admission and Release				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
4.	Classification System				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
5.	Detainee Handbook				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
6.	Food Service				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
7.	Funds and Personal Property				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8.	Detainee Grievance Procedures				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
9.	Issuance and Exchange of Clothing, Bedding, and Towels				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
10.	Religious Practices				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
HEALTH SERVICES										
11.	Medical Care				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
12.	Suicide Prevention and Intervention				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
SECURITY AND CONTROL										
13.	Contraband				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
14.	Detention Files				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15.	Disciplinary Policy				<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
16.	Emergency Plans				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
17.	Environmental Health and Safety				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
18.	Hold Rooms in Detention Facilities				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
19.	Key and Lock Control				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
20.	Population Counts				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
21.	Security Inspections				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
22.	Special Management Units (Administrative Detention)				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
23.	Special Management Units (Disciplinary Segregation)				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
24.	Tool Control				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
25.	Transportation (Land management)				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
26.	Use of Force				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
27.	Staff / Detainee Communication (Added August 2003)				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
28.	Detainee Transfer (Added September 2004)				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

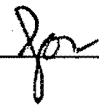
ALL FINDINGS OF DEFICIENT AND AT-RISK REQUIRE WRITTEN COMMENT DESCRIBING THE FINDING AND WHAT IS NECESSARY TO REACH COMPLIANCE.

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RIC REVIEW ASSURANCE STATEMENT

BY SIGNING BELOW, THE REVIEWER-IN-CHARGE (RIC) CERTIFIES THAT:

1. ALL FINDINGS OF NON-COMPLIANCE WITH POLICY OR INADEQUATE CONTROLS, AND FINDINGS OF NOTEWORTHY ACCOMPLISHMENTS, CONTAINED IN THIS INSPECTION REPORT, ARE SUPPORTED BY EVIDENCE THAT IS SUFFICIENT AND RELIABLE; AND
2. WITHIN THE SCOPE OF THIS REVIEW, THE FACILITY IS OPERATING IN ACCORDANCE WITH APPLICABLE LAW AND POLICY, AND PROPERTY AND RESOURCES ARE BEING EFFICIENTLY UTILIZED AND ADEQUATELY SAFEGUARDED, EXCEPT FOR ANY DEFICIENCIES NOTED IN THE REPORT.

REVIEWER-IN-CHARGE	
Reviewer-In-Charge: (Print Name) b6,b7c	Signature b6,b7c b6,b7c 
Title & Duty Location	Date April 9, 2009
Review In Charge	

TEAM MEMBERS	
Print Name, Title, & Duty Location b6,b7c SME-Food Service	Print Name, Title, & Duty Location b6,b7c SME-Security
Print Name, Title, & Duty Location b6,b7c SME-Environmental Health and Safety	Print Name, Title, & Duty Location b6,b7c SME -Medical

RECOMMENDED RATING: ACCEPTABLE
 DEFICIENT
 AT-RISK

COMMENTS:

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