



U.S. Immigration
and Customs
Enforcement

MEMORANDUM FOR: Nuria T. Prendes
Field Office Director
Dallas Field Office
[Redacted] b6,b7c
[Redacted] b6,b7c

FROM: [Redacted] b6,b7c
Assistant Director for Management

SUBJECT: Lubbock County Detention Center Annual Review

OCT 09 2009

The annual review of the Lubbock County Detention Center conducted on July 27-28, 2009, in Lubbock, Texas has been received. The Review Authority has assigned an interim rating of **Deficient** due to the use of EMDDs (Electro Muscular Disruption Devices) in this facility; otherwise a rating of "Acceptable" would have been assigned. A Plan of Action is required to address the line item deficiencies identified in the Detainee Handbook, Food Service and Hold Rooms in Detention Facilities standards.

The rating was based on the Reviewer-in-Charge (RIC) Summary Memorandum and supporting documentation. The Field Office Director must remedy the deficient standards, and 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-324B Detention Facility Review Form, the G-324B Worksheet, RIC Summary Memorandum, and a copy of this memorandum.
- 2) The Field Office Director is responsible for ensuring that the facility responds to all findings and a Plan of Action is submitted to the Review Authority (RA) within 30 days.
- 3) The RA will advise the Field Office Director once the Plan of Action is approved.
- 4) Once a Plan of Action is approved, the Field Office Director shall schedule a follow-up on the above noted deficiencies within 90 days.

The Field Office is responsible for assisting the Intergovernmental Service Agreement (IGSA) facility to respond to the Immigration and Customs Enforcement findings when assistance is requested. Notification to the facility shall include information that this assistance is available.

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 2-5514:09/30/2009

[REDACTED] b2High

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July 30, 2009

MEMORANDUM FOR: David Venturella
Acting Director
Office of Detention and Removal Operations

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

SUBJECT: Lubbock County Detention Center
Annual Detention Review

MGT of America performed an annual inspection for compliance with the ICE National Detention Standards (NDS) at the Lubbock County Detention Center located in Lubbock, Texas, during the period of July 27-28, 2009. This is an Under 72 hour IGSA facility.

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

| Subject Matter Field | Team Member |
|----------------------|-------------------|
| Security | [Redacted] |
| Health Services | [Redacted] |
| Food Services | [Redacted] b6,b7c |
| Safety | [Redacted] |

Type of Review

This review is a scheduled annual inspection, which is performed to determine overall compliance with the ICE NDS. The facility received a previous rating of "Deficient" during the May 19-20, 2008 inspection.

Review Summary

The Lubbock County Detention Center is not accredited by the American Correctional Association (ACA), National Commission on Correctional Health Care (NCCHC) nor the Joint Commission on Accreditation of Health Organizations (JCAHO). The facility is accredited by the Texas Commission on Jail Standards.

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 National Detention Standards compliance annual inspection.

| <u>2008</u> | <u>Inspection</u> | <u>2009</u> | <u>Inspection</u> |
|-------------------|-------------------|-------------------|-------------------|
| Compliant | 23 | Compliant | 26 |
| Deficient | 4 | Deficient | 0 |
| Repeat Deficiency | 0 | Repeat Deficiency | 0 |
| Not Applicable | 1 | Not Applicable | 2 |

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-324B Inspection form and are supported by documentation in the inspection file. An out brief was conducted at the facility and the following were present: [redacted], Chief Deputy; [redacted] Major; Captain [redacted], and Lt. [redacted] of the Lubbock County Detention Center; Nuria T. Prendes, ICE Field Office Director; [redacted], ICE SDDO and [redacted]; COTR.

[redacted] [redacted] [redacted]
Signature: [redacted] *[Handwritten Signature]*

[redacted] Lead Compliance Inspector July 30, 2009

Printed Name and Title of LCI Date:

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
July 27-28, 2009

C. PREVIOUS/MOST RECENT FACILITY REVIEW

Date[s] of Last Facility Review
May 19-20, 2008
Previous Rating
 Superior Good Acceptable Deficient At-Risk

D. NAME AND LOCATION OF FACILITY

Name
Lubbock County Detention Center
Address
811 Main Street
City, State and Zip Code
Lubbock, Texas 79408
County
Lubbock County
Name and Title of Chief Executive Officer
(Warden/OIC/Superintendent)
David Gutierrez, Sheriff and [b6,b7c], Chief Deputy
Telephone Number (Include Area Code)
806-775-[b6,b7c]
Field Office / Sub-Office (List Office with Oversight)
Dallas, Texas
Distance from Field Office
330 miles

E. ICE Information

Name of Inspector (Last Name, Title and Duty Station)
[b6,b7c] / LCI / Administration / MGT of America
Name of Team Member / Title / Duty Location
[b6,b7c] / CI / Safety / MGT of America
Name of Team Member / Title / Duty Location
[b6,b7c] / CI / Food Service / MGT of America
Name of Team Member / Title / Duty Location
[b6,b7c] / CI / Security & Control / MGT of America
Name of Team Member / Title / Duty Location
[b6,b7c] DO / CI / Medical Service / MGT of America

F. CDF/IGSA INFORMATION ONLY

Contract Number
J-D77-M-108
Date of Contract or IGSA
May 1, 1990
Basic Rates per Man-Day
40.00/day

Other Charges: (If None, Indicate N/A)
; ; ; N/A
Estimated Man-days per Year
1058

G. ACCREDITATION CERTIFICATES N/A

List all State or National Accreditation[s] received:
Texas Commission on Jail Standards

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
1931
Date Last Remodeled or Upgraded
2001
Date New Construction / Bed Space Added
1987
Future Construction Planned
 Yes No Date: September, 2009
Current Bed space
795
Future Bed Space (# New Beds only)
Number: 1512 Date: April, 2010

J. TOTAL FACILITY POPULATION

Total Facility Intake for Previous 12 months
16,329
Total ICE Man Days for Previous 12 months
949

K. CLASSIFICATION LEVEL (ICE SPCs AND CDFs ONLY)

| | L-1 | L-2 | L-3 |
|--------------|-----|-----|-----|
| Adult Male | N/A | N/A | N/A |
| Adult Female | N/A | N/A | N/A |

L. FACILITY CAPACITY

| | Rated | Operational | Emergency |
|--------------|-------|-------------|-----------|
| Adult Male | 664 | 559 | 703 |
| Adult Female | 131 | 131 | 142 |

Facility Holds Juveniles Offenders 16 and Older as Adults

M. AVERAGE DAILY POPULATION

| | ICE | USMS | Other |
|--------------|-----|------|-------|
| Adult Male | 3 | 8 | 574 |
| Adult Female | >1 | 2 | 130 |

N. FACILITY STAFFING LEVEL

Security: [b2High] Support:

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.) | Physical | Physical | Physical | Physical |
| | With Weapon | 0 | 0 | 0 | 0 |
| | Without Weapon | 8 | 17 | 19 | 27 |
| Assault: Detainee on Staff | Types (Sexual Physical, etc.) | Physical | Physical | Physical | Physical |
| | With Weapon | 0 | 0 | 0 | 0 |
| | Without Weapon | 3 | 3 | 2 | 2 |
| Number of Forced Moves, incl. Forced Cell Moves ³ | | 2 | 3 | 1 | 2 |
| Disturbances ⁴ | | 0 | 0 | 0 | 0 |
| Number of Times Chemical Agents Used | | 0 | 1 | 0 | 1 |
| Number of Times Special Reaction Team Deployed/Used | | 0 | 1 | 0 | 0 |
| # Times Four/Five Point Restraints Applied/Used | Number/Reason (M=Medical, V=Violent Behavior, O=Other) | 1-Violent | N/A | N/A | N/A |
| | Type (C=Chair, B=Bed, BB=Board, O=Other) | Chair | N/A | N/A | N/A |
| Offender / Detainee Medical Referrals as a Result of Injuries Sustained. | | 3 | 5 | Not Avail | Not Avail |
| Escapes | Attempted | 1 | 0 | 0 | 0 |
| | Actual | 0 | 0 | 0 | 0 |
| Grievances: | # Received | Not Avail | 75 | 20 | Not Avail |
| | # Resolved in Favor of Offender/Detainee | Not Avail | Not Avail | Not Avail | Not Avail |
| Deaths | Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other) | 0 | S | Illness | 0 |
| | Number | 0 | 1 | 1 | 0 |
| Psychiatric / Medical Referrals | # Medical Cases Referred for Outside Care | 91 | 148 | Not Avail | Not Avail |
| | # Psychiatric Cases Referred for Outside Care | 3 | 3 | Not Avail | Not Avail |

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"/> | <input 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"/> | <input 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"/> | <input 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"/> | <input 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"/> | <input 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"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 7. | Funds and Personal Property | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 8. | Detainee Grievance Procedures | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input 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"/> | <input 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"/> | <input 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"/> | <input 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"/> | <input 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"/> | <input 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"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 15. | Disciplinary Policy | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 16. | Emergency Plans | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input 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"/> | <input 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"/> | <input 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"/> | <input 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"/> | <input 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"/> | <input 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"/> | <input 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"/> | <input 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"/> | <input 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 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"/> | <input 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"/> | <input 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"/> | <input 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.

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 |
| b6,b7c | b6,b7c <i>for</i> |
| Title & Duty Location | Date |
| Lead Compliance Inspector/Administration, MGT of America | July 28, 2009 |

| TEAM MEMBERS | |
|-------------------------------------|--|
| Print Name, Title, & Duty Location | Print Name, Title, & Duty Location |
| b6,b7c, CI-Security, MGT of America | b6,b7c DO, CI-Medical Services, MGT of America |
| Print Name, Title, & Duty Location | Print Name, Title, & Duty Location |
| b6,b7c, CI-Safety, MGT of America | b6,b7c, CI-Food Service, MGT of America |

RECOMMENDED RATING:

ACCEPTABLE
 DEFICIENT
 AT RISK

COMMENTS:

There were 4 taser incidents, but none of the incidents involved ICE detainees.

There was 1 attempted escape from the facility by a Non-ICE detainee. On February 27, 2009, inmate b6,b7c tried to walk out of the Security 2 (Booking Area) after being processed and was apprehended by staff.

On May 23, 2009, Non-ICE detainee Tyrone Robinson committed suicide by hanging himself with a braided fabric. Staff responded appropriately and the detainee was transported to the emergency room where he was pronounced dead.

On August 4, 2009, Non-ICE detainee Leonardo Garcia Jimenez collapsed and was taken to the local hospital where he died of cardiac arrest.

The grievances were classified as follows: Medical 67%, Shift Complaints 27%, Finance 4%, and Food Service 2%. The grievance process reports should be adjusted to reflect the number of grievances found in favor of the detainee. There were 2 quarters of information not available due to a change in staff that failed to compile the information.

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