



**DETENTION FACILITY INSPECTION FORM  
FACILITIES USED LONGER THAN 72 HOURS**

**A. Type of Facility Reviewed**

<input type="checkbox"/>	ICE Service Processing Center
<input type="checkbox"/>	ICE Contract Detention Facility
<input checked="" type="checkbox"/>	ICE Intergovernmental Service Agreement

**B. Current Inspection**

Type of Inspection	<input type="checkbox"/> Field Office <input checked="" type="checkbox"/> HQ Inspection
Date[s] of Facility Review	March 11-13, 2008

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

Date[s] of Last Facility Review	March 6-7, 2007
Previous Rating	<input type="checkbox"/> Superior <input type="checkbox"/> Good <input checked="" type="checkbox"/> Acceptable <input type="checkbox"/> Deficient <input type="checkbox"/> At-Risk

**D. Name and Location of Facility**

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

**E. Creative Corrections Review Team**

b6,b7c	<b>Reviewer in Charge</b>
b6,b7c	<b>SME for Security</b>
b6	<b>SME for Health Services</b>
b6	<b>SME for Safety</b>
b6	<b>SME for Food Services</b>

**F. CDF/IGSA Information Only**

Contract Number	Date of Contract or IGSA
DROIGSA-06-0003	June 27, 2006
Basic Rates per Man-Day	78.00
Other Charges: (If None, Indicate N/A)	N/A
Estimated Man-days per Year	691,200

**G. Accreditation Certificates**

List all State or National Accreditation[s] received:
<input checked="" type="checkbox"/> 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	<input type="checkbox"/> Court Order <input type="checkbox"/> Class Action Order
The Facility has Significant Litigation Pending	<input type="checkbox"/> Major Litigation <input type="checkbox"/> Life/Safety Issues
<input checked="" type="checkbox"/> Check if None.	

**I. Facility History**

Date Built	May 2006
Date Last Remodeled or Upgraded	January 2008
Date New Construction / Bed space Added	
Future Construction Planned	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No    Date: April, 2008
Current Bed Space	2000
Future Bed Space (# New Beds only)	Number: 1086    Date: April 2008

**J. Total Facility Population**

Total Facility Intake for previous 12 months	23,612
Total ICE Mandays for Previous 12 months	533,868

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

	L-1	L-2	L-3
Adult Male	1357	176	0
Adult Female	344	10	0

**L. Facility Capacity**

	Rated	Operational	Emergency
Adult Male	1500	1500	1500
Adult Female	500	500	500

Facility holds Juveniles Offenders 16 and older as Adults

**M. Average Daily Population**

	ICE	USMS	Other
Adult Male	1500	0	0
Adult Female	350	0	0

**N. Facility Staffing Level**

Staffing Level	ort:
b2High	

## 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
Assaults	Types (Sexual <sup>1</sup> , Physical, etc.)	Physical	Physical	Physical	Physical
	With Weapon	0	2	0	0
	Without Weapon	31	20	19	10
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>2</sup>		0	0	0	0
Disturbances <sup>3</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)	-	-	-	-
	Type (C=Chair, B=Bed, BB=Board, O=Other)	-	-	-	-
Offender / Detainee Medical Referrals as a Result of Injuries Sustained.		-	-	-	-
Escapes	Attempted	0	0	0	0
	Actual	0	0	0	0
Grievances	# Received	107	112	29	38
	# Resolved in Favor of Offender/Detainee	37	23	13	7
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	23	26	24	30
	# Psychiatric Cases Referred for Outside Care	1	0	0	0

<sup>1</sup> Oral, anal or vaginal penetration or attempted penetration involving at least 2 parties, whether it is consenting or non-consenting

<sup>2</sup> Routine transportation of detainees/offenders is not considered "forced"

<sup>3</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

## DHS/ICE DETENTION STANDARDS REVIEW SUMMARY REPORT

1. ACCEPTABLE	2. DEFICIENT	3. AT-RISK	4. REPEAT FINDING	5. NOT APPLICABLE						
<b>LEGAL ACCESS STANDARDS</b>					1.	2.	3.	4.	5.	
1.	Access to Legal Materials				<input checked="" type="checkbox"/>	<input 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"/>	<input type="checkbox"/>	
3.	Visitation				<input checked="" type="checkbox"/>	<input 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"/>	<input type="checkbox"/>	
<b>DETAINEE SERVICES</b>										
5.	Admission and Release				<input checked="" type="checkbox"/>	<input 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"/>	<input type="checkbox"/>	
7.	Correspondence and Other Mail				<input checked="" type="checkbox"/>	<input 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"/>	<input type="checkbox"/>	
9.	Food Service				<input checked="" type="checkbox"/>	<input 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"/>	<input type="checkbox"/>
11.	Detainee Grievance Procedures				<input checked="" type="checkbox"/>	<input 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"/>	<input type="checkbox"/>	
13.	Marriage Requests				<input checked="" type="checkbox"/>	<input 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 type="checkbox"/>	<input checked="" type="checkbox"/>
15.	Recreation				<input checked="" type="checkbox"/>	<input 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"/>	<input type="checkbox"/>	
17.	Voluntary Work Program				<input checked="" type="checkbox"/>	<input 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"/>	<input type="checkbox"/>	
19.	Medical Care				<input checked="" type="checkbox"/>	<input 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"/>	<input type="checkbox"/>	
21.	Terminal Illness, Advanced Directives and Death				<input checked="" type="checkbox"/>	<input 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"/>	<input type="checkbox"/>	
23.	Detention Files				<input checked="" type="checkbox"/>	<input 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"/>	<input type="checkbox"/>	
25.	Emergency Plans				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
26.	Environmental Health and Safety				<input type="checkbox"/>	<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"/>	<input type="checkbox"/>	
28.	Key and Lock Control				<input type="checkbox"/>	<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"/>	<input type="checkbox"/>	
30.	Post Orders				<input checked="" type="checkbox"/>	<input 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"/>	<input type="checkbox"/>	
32.	Special Management Units (Administrative Detention)				<input checked="" type="checkbox"/>	<input 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"/>	<input type="checkbox"/>	
34.	Tool Control				<input checked="" type="checkbox"/>	<input 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"/>	<input type="checkbox"/>
36.	Use of Force				<input checked="" type="checkbox"/>	<input 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"/>	<input type="checkbox"/>	
38.	Detainee Transfer (Added September 2004)				<input checked="" 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) <div style="background-color: #cccccc; width: 80px; height: 15px; margin-top: 5px;">b6,b7c</div>	Signature
Title & Duty Location Reviewer in Charge, Creative Corrections	Date March 13, 2008

### TEAM MEMBERS

Print Name, Title, & Duty Location <div style="background-color: #cccccc; width: 80px; height: 15px; margin-top: 5px;">b6,b7c</div> SME for Security Print Name, Title, & Duty Location <div style="background-color: #cccccc; width: 80px; height: 15px; margin-top: 5px;">b6</div> SME for Safety	Print Name, Title, & Duty Location <div style="background-color: #cccccc; width: 80px; height: 15px; margin-top: 5px;">b6</div> SME for Food Services & Duty Location <div style="background-color: #cccccc; width: 80px; height: 15px; margin-top: 5px;">b6</div> SME for Health Services
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**RECOMMENDED RATING:**

- SUPERIOR
- GOOD
- ACCEPTABLE
- DEFICIENT
- AT-RISK