## COMMISSION ON ACCREDITATION FOR CORRECTIONS

## STANDARDS COMPLIANCE TECHNICAL ASSISTANCE VISIT AUDIT

U.S. Department of Homeland Security Port Isabel Detention Center Los Fresnos, Texas

30 July - 1 August 2007

# **VISITING COMMITTEE MEMBERS**

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#### A. Introduction

The technical assistance audit of the Port Isabel Detention Center was conducted on July 30 - August 1, 2007 by b6 Chairperson; b6 and Members.

# **B.** Facility Demographics

Rated Capacity :850 (on first day of audit 1090).

Actual Population :1090

Average Daily Population for the last 12 months :800

Average Length of Stay :18 days

(audit team believes average length is longer)

Security/Custody Level :Level I-II-III

(Minimum, Medium, Close)

Age Range of Offenders :18-60

Gender :Male/Female

Full Time Staff :174 Immigration and Custom Enforcement. (3 Administrative, 12 Support, 159 Detention, 414 Contract Security and 29 Other).

# **C.** Facility Description

The Port Isabel Detention Center is located in the southern part of Texas along Rural Route 510 in the eastern part of Cameron County, approximately 20 miles north of Brownsville, Texas and 30 miles east of Harlingen, Texas. The Mexican border is approximately 22 miles south of the Port Isabel Detention Center.

The Cameron County Airport to the north, the Laguna Atascosa National Wildlife to the east, agricultural fields and a shrimp farm to the south and agricultural fields to the west surround the Port Isabel Detention Center.

The Port Isabel Detention Center is on 350 acres with 162 acres of developed land and 188 acres of undeveloped land with wildlife, which includes the endangered Ocelot species.

Formerly the site was part of the military and used by the Army Air Corps in the 1940's as a gunnery training facility. The Navy and Air Force utilized the facility for training activities, which also included an auxiliary airfield for defense purposes. The facility was

closed in the 1960's. With realignment and closure of the facility portions of the property was turned over the U.S. Immigration and Naturalization Service (INS) between 1961-1963. Other portions of the property including the hanger and airfield runways were turned over to the Cameron County Commissioners for the Port Isabel airport in 1963.

In 1962 to 1963, the INS performed major renovations to several buildings on the site and established a Border Patrol Training Facility and Detention Center. In 1977, the Training Academy expanded and relocated to the Federal Law Enforcement Training Center in Glynco, Georgia and the detention center remained.

Currently, the detention center is a self-supporting facility that continues to house individuals detained for allegations of violations of the immigration laws of the United States. These individuals comprise both male and female detainees who will appear before an administrative immigration judge with the Executive Office for immigration review. In 2006, the facility experienced an expansion with a new administration and medical building which also encompasses processing and visitation.

The Port Isabel Detention Center has a rated capacity of 850 beds. At the time of the technical assistance, there were 1090 detainees. When questioned by the auditors, the accreditation manager indicated the rated capacity was 1200 but no one could should documentation to indicate that the rated capacity has expanded. Although a previous audit indicated an average length of stay to be about 18 days but from the number of detainees interviewed it appears to be longer. This is an area that needs to be corrected before the next technical assistance.

The center does not provide housing for detainees awaiting formal criminal prosecution but it does have a high security level for detainees with a previous history that are classified as close custody.

## D. Pre-Audit Meeting

The team met on July 29, 2007 in South Padre Island, Texas to discuss the information provided by the Association staff and officials from the Port Isabel Detention Center.

The chairperson divided standards into the following groups:

Standards #4-ALDF 1A-01-2D-03, b6 (Member) Standards #4-ALDF 3A-01-4D-29, b6 (Member) Standards #4-ALDF 5A-01-7F-07, b6 (Member)

#### E. The Audit Process

#### 1. Transportation

The team was picked up at the hotel at 7:30 a.m. by Officer b6,b7c Accreditation team member. The team arrived at the Port Isabel Detention Center

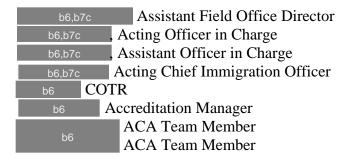
at 8:00 a.m. and proceeded to the executive conference room where the entrance interview occurred.

#### 2. Entrance Interview

The audit team met with	b6,b7c	Acting	g Field Office Director,	b6,b7c
b6,b7c Acting Officer in Charge, and		b6,b7c	Assistant Officer in Ch	arge.

The Chairperson introduced the team and gave a brief background of their correctional experience as well as outlining how the technical assistance would proceed. It was emphasized that following the tour a concentrated effort would be made on scrutinizing the mandatory standards at depth. A pre-audit meeting was held with the accreditation team of the Port Isabel Detention Center.

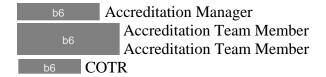
#### The following persons were in attendance:



It was explained that the goal of the visiting team was to be as helpful and non-intrusive as possible during the technical assistance visit. The chairperson emphasized the goals of accreditation toward the efficiency and effectiveness of correctional systems throughout the United States. The audit schedule was also discussed at this time.

# 3. Facility Tour

The team toured the entire facility from 8:30 a.m. to 3:30 p.m. The remainder of the tour was conducted on the following day from 8:00 a.m. to 10:00 a.m. on the following day. The team broke up the tour to review the mandatory standards on the first day from 3:30 p.m to 6:30 p.m. The following persons accompanied the team on the tour and responded to questions concerning facility operations.



# 4. Conditions of Confinement/Quality of Life

During the tour, the team evaluated the conditions of confinement at the facility. The following narrative description of the relevant programmatic services and functional areas summarizes the findings regarding the quality of life.

#### Security

The Port Isabel Detention Center has a contract with uniformed security services from Asset Protection and Security Services.

Asset Protection and Security Services has had the contract since 2001 and are presently on a contract extension. From the time of the last audit based on information provided the staff has doubled. The audit team was significantly impressed with their training, organization of officers, responsiveness of officers and documentation of post orders being read, and their techniques of supervising detainees. All posts were filled. Key control was examined by the audit team and was found to be very detailed and providing good accountability. Tool control in food service and maintenance was found to be very acceptable. The armory is manned by ICE and all weapons and ammunition were accountable. The CERT team is also staffed by ICE agents. Training and documentation of equipment was accounted for as observed by the audit team. There is perimeter security with There is a seven-cell segregation area that is double bunked. razor wire. Observation sheets were noted appropriately but it was pointed out to possibly move the segregation board with names and significant identifying information to another area.

#### **Environmental Conditions**

During the tour, the team found the noise levels throughout the facility to be low with the exception one housing unit Delta Unit. However, the documentation in the files indicated that noise levels were higher at night. Temperature ranges in the housing units were well within the comfort level. Lighting conditions in the housing units were above standards. Overall, the living conditions and general environmental conditions were above minimum standards.

#### Sanitation

The team found the overall maintenance and sanitation very acceptable except in the housing unit showers. There appeared to be little emphasis on the housekeeping plan when it came to shower areas and lack of soap dispensers throughout the housing units. With the addition of a new administration and medical area where sanitation was emphasized it was not adhered to in the living units. Chemicals were controlled with MSDS sheets. It was pointed out that the cleaning contract workers should eliminate bleach and have bottles marked appropriately.

## Fire Safety

The Port Isabel Detention Center fire department is supervised and operated by a certified firefighter with collateral duties as safety officer. The department currently has a Class A fire pumper with a 500 gallon water tank and a rescue truck with a 400 gallon water capacity. The fire safety officer does a monthly inspection of the approximately 250 fire extinguishers throughout the facility as well as vehicles. During the tour, the audit team inspected a number of fire extinguishers, which were up to date. Monthly fire drills are conducted as required. The fire safety officer provides adult CPR and first aid training to include new employee orientation. During the tour, he was observed in the command center providing orientation to in service contracted employees on the annunciator panel and pull alarm station. His duties also include the inspection fire hydrants, training officer fire fighting techniques, and the removal of biohazard containers.

#### **Food Service**

A food service administrator supervises the Food Service Department, with the assistance of a supervisory cook and twelve food service specialists. They are responsible along with volunteer detainee labor for all meals served to the detainee population.

One of the members of the audit team observed special medical diets and religious diets. This department does provide sack lunches, which consisted of two sandwiches, fruit, and bag of chips as well as a fruit drink. It was recommended that all visitors in the kitchen be required to wear hairnets and beard guards. Temperature ranges in the kitchen were within the required levels. Detainees eat in a central dining room. Kitchen staff demonstrated tool control, which was thorough and accountable. On July 30, 2007 the audit team ate lunch in the officers dining hall. The food was nutritious, wholesome and good. It was recommended that the dining hall be painted prior to the audit. Medical Care

The Medical Department at the Port Isabel Detention Center is operated by Public Health Services with the assistance of 29 full time staff members. Eighteen of the staff members are commissioned USPHS commissioned officers and 11 are STG contract employees.

The medical facility is in a new building which opened in 2006 and operates seven days a week 24 hours per day. The facility provides intake screening and a radiology unit. It provides an infirmary as well as a special needs unit. At the time of the audit there were four detainees housed in a separate unit that was utilized for a tuberculosis unit. On the second day of the audit they were moved to the infirmary due to mold found in the unit. Physical examinations are performed by a nurse practitioner and two physician assistants. The new facility

has a sick call area and full time pharmacy with a licensed pharmacist. Sick call is performed five days a week by two registered nurses. In the dormitory areas located in the pods there is a medical box accessed by nursing staff for sick call requests.

The medical area has a full time psychologist as well as a full-time dentist. At the time of the audit the dentist was off-site on temporary duty. However there was a dental hygienist available. One area of concern was sick calls being done on a delayed basis. The facility was accredited by the National Commission on Correctional Health Care in 2006. Sharps are controlled and accounted for. Additionally the facility was accredited in 2005 by the Joint Commission on Accreditation on Hospital Accreditation.

## **Religious Programming**

The Port Isabel Detention Center does provide a variety of religious services through the use of contracted services and volunteers. The center does provide access to outside religious volunteers who provide a variety of services. There is an on site chaplain available who is contracted through ICE. Religious diets are provided when requested by detainees wishing to observe special religious holidays.

## Offender Work Programs

The center does provide volunteer detainee work program. Although the previous audit report indicated that an ICE agent is responsible for coordinating this program which provides training, payment of \$1.00 per-day for every eight hours of training and medical screening, there was no documentation available to substantiate this. It was recommended that documentation be provided to substantiate this practice. One auditor interviewed several kitchen workers who indicated that they were not trained.

#### Academic and Vocational Education

Since the mission of ICE is the detainment and deportation of detainees there are no academic programs available for ICE detainees. As noted in the last audit there is a horticultural program that is seasonal and does provide ten detainees to harvest a garden where the produce is utilized by food service.

#### **Social Services**

There are limited social services available to detainees. However when requested outside eye exams are available, lawyer requested medical examinations and occasionally outside medical examinations. The center does provide access to Western Union services by a private Western Union representative and access to phone cards which can be purchased. Access to deportation officers is also

provided. It was noted that deportation officers are not being logged into the pods logbooks and from the detainees interviewed this is a major issue as they indicated limited access.

#### Visitation

The facility does provide contact and non-contact visitation. The visitation area is part of the new administration building. Visitation hours are Monday through Friday from 8:30 a.m. - 3:30 p.m. There is no limit to the number of visits that a detainee may have during the week. Visitors must be on approved visiting list and children may visit if supervised by an adult.

#### **Library Services**

A law library is available for detainee use. The library is in the same area as the barber shop and beauty shop. Both are scheduled to be moved to another space in the next few months. The law library is limited but is supervised by a recreation specialist employed by ICE. There are adequate law library supplies. The law library can be accessed by detainees upon request which is a written request. The law library contains a mobile temporary law library for the use by detainees of the TB unit which are medically isolated from the population.

## Laundry

The Laundry services the entire detainee population regarding their clothing needs. It is operational seven days a week from 6:00 a.m. - 9:00 p.m. and is a two-man post supervised by the contracted security agency. There are five commercial washers and five commercial dryers. Chemicals are electronically fed from bulk containers. There is a change out of clothing once a week and daily for detainee workers. Linen, bed sheets, towels, mattress covers, and pillowcases are changed out weekly. Detainee workers were familiar with the requirements of the laundry.

#### **Team Comments**

Overall, the team was impressed with the space of the new building, training areas, visitation, and medical areas. Sanitation of the facility was good with the exception of the housing areas particularly in the shower areas. The team was impressed with the contracted security staff particularly in the areas of training and knowledge of security techniques and their familiarization and documentation of post orders. The medical area and professionalism of Public Health Services and the treatment provided exceeded the standards. Training for ICE was impressive with particular emphasis on accreditation. Key and tool control in all areas was impressive. Chemical control was good with the exception of two areas that was pointed out to the accreditation team. Financial services, classification of detainees, and human resources were all good.

# Suggestion to Improve

It was recommended to the accreditation to outline the tour prior to the accreditation and review all areas that were on the tour. Additionally someone with keys to all doors should be included on the tour.

#### F. Examination of Records

Following the facility tour, the team proceeded to the file room to review the accreditation files and evaluate levels of compliance on the policies and procedures. The facility has no notices of non-compliance with local, state, or federal laws or regulation.

#### 1. Litigation

Over the last three years, the facility had no consent decrees, class action lawsuits or adverse judgments.

#### Files

The team reviewed the 62 mandatory standards to determine the status of the files as this was indicated as a major reason for the technical assistance by the Association. After review of the files the team found six files to be in compliance and 56 to be in non-compliance. All of the files found in non-compliance there was missing documentation for years 05, 06, and 07. The accreditation team manager, team, and acting OIC and assistant OIC were notified on the first day. The technical assistance team recommended to the accreditation manager an attempt be made to fix at least ten files for the next day. This suggestion was not followed.

On the second day, the technical assistance team reviewed 150 files in the non-mandatory status and founds 115 to be in non-compliance for the same reason. The American Correctional Association was contacted. The accreditation manager was replaced with a new accreditation manager who is the COTR. The technical assistance chairperson notified b6, b7c ICE Headquarters, Field Office Director from San Antonio, Assistant Field Office Director, Acting OIC and the Assistant OIC that the technical assistance team would provide a three-hour training session to the accreditation team and new accreditation manager on the last day.

# 2. Significant Incidents/Outcome Measures

After review of the Outcome Measure Worksheet, it was apparent that the figures utilized on the Outcome Measure Worksheet were inaccurate. As an example no grievances were listed and in one section on fire code violations it was noted there were 72 fire code violations listed for the year 2006. It was recommended during the training session that the technology department be contacted and set up a

monthly spreadsheet. None of the Health Care Outcome Measures were listed.

# 3. Departmental Visits

Team members revisited the following departments to review conditions relating to departmental policy and operations:

Department Visited	**Person(s) Contacted
Mail Room	ь6,ь7Security Officer
Intelligence Department	b6,b7c ICE Enforcement Agent
Cleaning Contract	b6
Maintenance	b6 Mechanic
Deportation	b6,b7c Deportation Officer
Command Center	b6,b7c
Safety Officer	b6,b7c Fire and Safety Officer
Key Control	b6,b7cSecurity Officer
Property Room	ь6,ь <b>Security Officer</b>
Processing	b6,b7cSecurity Officer
Processing III	b6,b7c Security Officer
Health Center	b6 HAS b6 Dental Assistant b6 PhD b6 Pharmacist b6 Medical Records b6 Physician Assistant
Food Service	b6 Cook Cook
Special Management	b6, Cook
Bravo Building	Barbershop Security Officer Law Library

Alpha Unit Pod 1 b6,b7c Security Officer

Alpha Unit Pod 2 b6,b7c Security Officer

Alpha Core Officer b6,b7c Security Officer

#### 4. Shifts

# a. Day Shift

The team was present at the facility during the day shift from 8:00 a.m. to 4:00 p.m.

The tour was conducted during this shift. Files were reviewed and both staff and detainees were interviewed. Processing, medication passage, living units, lunch meal, and change of shift was observed.

## b. Evening Shift

The team was present at the facility during the evening shift from 4:00 p.m. to 7:00 p.m. A shift briefing was observed and contact was made with staff and detainees. Staff and detainee interviews were conducted. A count procedure was observed.

# c. Night Shift

Since the technical assistance was altered due to the inability to provide a score the technical assistance team opted to skip this shift and prepare to do a three hour training session on the last day.

## 5. Status of Previously Non-compliant Standards

The team reviewed the status of standards previously found non-compliant, for which a waiver was not granted, and found the following:

Standard #3-ALDF-2C-01: The facility did not build a new SMU. The SMU does not meet square footage and is double bunked.

Standard #3-ALDF-3C-20: The facility did implement the new policy and procedure in reference to removing not guilty on disciplinary hearings from the detainee file.

Standard #3-ALDF-4F-05: The facility did not comply with the plan of action as outlined.

Standard #3-ALDF-5B-01: The facility did not comply with the plan of action to

implement vocational, educational and vocational training. The mission of ICE changed during the three-year period.

Standard #3-ALDF-5B-02: The facility did not comply with the plan of action to access community resources.

Standard #3-ALDF-5B-03: The facility did not comply with the plan of action to access an educational program.

Standard #3-ALDF-5B-04: The facility did not comply with the plan of action to access vocational tapes.

#### G. Interviews

During the course of the audit, team members met with both staff and detainees to verify observations and to clarify questions concerning facility operations.

#### **Detainee Interviews**

During the course of the technical assistance, the team interviewed over sixty detainees. The biggest issue was the availability of deportation officers in the housing units to answer questions regarding their status, availability of ICE officers touring the pods, and responsiveness to grievances filed by the detainees where they did not receive copies of grievance that they filed. This was brought to the attention of the accreditation team.

#### Staff Interviews

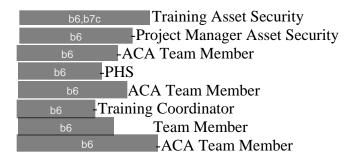
The team interviewed nearly fifty staff both ICE and contracted security. All of them were highly professional. They felt safe where they work and that supervisors treat them professionally. Contracted staff indicated there should be more recreation particularly soccer for the detainees. Those interviewed indicated that if they were OIC for a day, they would expand programs and recreation. Many of the ICE employees were looking forward to more of a law enforcement role as many areas are slotted for private contracts.

#### H. Exit Discussion

The formal exit interview was replaced with a three-hour training session for the accreditation team in which new members had been added within a one-day period by the Field Director from San Antonio.

## Those in attendance were the following:

b6	new Accreditation Manager'
b6	ACA Team Member
b6	ACA Team Member
b6	ACA Team Member



## Training consisted of the following:

Protocols

**Process Indicators** 

Documentation-each year consistent with the practice.

Highlight the years with a tab procedure.

Reviewing the previous audit.

Acquainting oneself with the 4th edition manaual.

Sanitation issues.

Chemicals.

**Key Control** 

**Tool Control** 

Critical Walk through of the facility.

Involvement of department heads on the tour.

Developing a system of document collection.

Availability of accreditation team to the auditors.

The chairperson complimented the audit team even though this technical assistance did not develop into a score. He emphasized that in six months when the next technical assistance occurs they will be fully prepared.

The chairperson expressed appreciation for the cooperation of everyone concerned and congratulated the facility team for the progress made during the three-day visit and encouraged them to make accreditation their number one priority during the next six months.