ICE Detention Standards Compliance Review

Limestone County Detention Center

April 7-8, 2009

REPORT DATE - April 10, 2009



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

Creative Corrections
6415 Calder, Suite B
Beaumont, TX 77706

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April 10, 2009

MEMORANDUM FOR: James T. Hayes, Jr., Director

Office of Detention and Removal Operations

FROM:

b6,b7c

Reviewer-In-Charge

b6,b7c

SUBJECT: Limestone County Detention Center

Annual Detention Review

Creative Corrections conducted an Annual Detention Review (ADR) of the Limestone County Detention Center (LCDC) located in Groesbeck, Texas, on April 7-8, 2009. The facility is owned by Limestone County and operated by Community Education Centers, Inc. As noted on the attached documents, the team of Subject Matter Experts included b6,b7c for Health Services; b6,b7c for Safety; b6,b7c for Security; and b6,b7c for Food Service.

A closeout meeting was conducted on April 8, 2009, with Warden b6,b7c , Limestone County Judge b6,b7c CEC Special Assistant b6,b7c , Immigration Enforcement Agent b6,b7c Immigration Enforcement Agent b6,b7c , several key facility staff, and the review team. All aspects of the review were discussed at this meeting.

Type of Review

This review was a scheduled ADR to determine compliance with established ICE National Detention Standards for facilities used for under-72 hours. This facility was previously reviewed in 2008 using standards for facilities used for over-72 hours.

Review Summary

The facility is not accredited by the National Commission on Correctional Health Care, the American Correctional Association, or the Joint Commission on Accreditation of Healthcare Organizations. The facility is certified by the Texas Commission on Jail Standards.

Standards Compliance

The following statistical information provides a comparison of the 2008 ADR and this ADR conducted for 2009.

٠.	April 8-10, 2008 Res	view	April 7-8, 2009 F	<u>leview</u>
į	Compliant		Compliant	28
r	Deficient		Deficient	0
	At-Risk	0	At-Risk	0
	Non-Applicable		Non-Applicable	0

Area of Strength

Limestone County Detention Center has an amicable, professional working relationship with all agencies using the facility (ICE, Bureau of Prisons (BOP), Limestone County, and Texas Department of Corrections). Limestone County Sheriff Dennis Wilson, Limestone County Judge local ICE representatives, and the local BOP representative commended this facility on their community service, responsiveness, open communication, and professionalism.

Recommended Rating and Justification

It is the Reviewer-in-Charge (RIC) recommendation that the facility receive a rating of "Acceptable".

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.

A. TYPE OF FACILITY REVIEWED		de Maria	n gila		
ICE Service Processing Center	Estimated Man-days	ner Year	•		
☐ ICE Contract Detention Facility	4,681				
ICE Intergovernmental Service Agreement					
	G. ACCREDITATION	CERTIF	ICATES 🗌	N/A	
B. CURRENT INSPECTION	List all State or Nati	onal Acci	reditation[s] receive	ed:
Type of Inspection	Texas Commission	m Jail St	andards		
Field Office HQ Inspection			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		***************************************
Date[s] of Facility Review	H. PROBLEMS/CO!	MPLAINT!	S(COPIES)	AUST BE	ATTACHED)
April 7-8, 2009	The Facility is under				
	Court Order		Class Acti		îng
C. PREVIOUS/MOST RECENT FACILITY REVIEW	The Facility has Sign				
Date[s] of Last Facility Review	☐ Major Litigation		Life/Safet	y Issues	
April 8-10, 2008	⊠ None				
Previous Rating	***************************************	20.040mm/s/massass/av.va.			***************************************
Superior Good Acceptable Deficient At-Risk	I. FACILITY HIST	ORY	.,		
The B.F. where a work W or too continuous or will be some warmy.	Date Built				. 8
D. NAME AND LOCATION OF FACILITY	1989				7
Name	Date Last Remodele	d or Upg	raded	1	
Limestone County Detention Center	2005-2006				55555555555555555555555555555555555555
Address	Date New Construct	ion / Bed	Space Add	led	
910 N. Tyus Road	n/a		aggarian marana a sa		
City, State and Zip Code	Future Construction		Agrica Notae de la companya		
Groesbeck, Texas 76642	☐ Yes ⊠ No Da				
County	Current Bed space Future Bed Space (# New Beds only)				
Limestone	1026 Number: Date:				
Name and Title of Chief Executive Officer					
(Warden/OIC/Superintendent)	J. TOTAL FACILIT	****			
b6,b7c Warden	Total Facility Intake	for Previ	ous 12 moi	iths	
Telephone Number (Include Area Code)	9.934			***************************************	
(254) 729 b6,b7c	Total ICE Man Days	for Prev	ious 12 mo	nths	
Field Office / Sub-Office (List Office with Oversight)	4,681		and the same of th		
San Antonio, Texas	V Os soomeosero	an Europourus	Arch enc	e inne	Title Auras
Distance from Field Office	K. CLASSIFICATIO	N LEVEL	coccinion no entre consegno consecutamente	L-2	L-3
180 miles	Adult Male		1	L-4	
E. ICE Information				×************************************	-
Name of Inspector (Last Name, Title and Duty Station)	Adult Female				
h6,b7c Reviewer-in-Charge /	L. FACILITY CAPA	CITY			
Name of Team Member / Title / Duty Location	ghinishtinia	Rated	Operation	anal I	Emergency
b6,b7c / Security /	Adult Male	1026	1026	Ariameter (CO)	Emergency
Name of Team Member / Title / Duty Location	Adult Female	0	0		······
b6.b7c / Health Services /	Facility Holds Just			nd Olds	was Adulta
Name of Team Member / Title / Duty Location	La Facility Holus Ju	cimes Ot	icnuci 5 10 2	and Oline	r us Auuns
b6,b7c / Food Service /	M. AVERAGE DAIL	y POPUL	ATION		
Name of Team Member / Title / Duty Location		IC	rivery array array array and a second	SMS	Other
<u> </u>	Adult Male	i i	midu	650	350
b6,b7c Environmental Health and Safety /	Adult Female	0		0.00	\$ 0
F. CDF/IGSA INFORMATION ONLY	- ramina sulliulo	1			1
Contract Number Date of Contract or IGSA	N. FACILITY STAF	FING LEV	EL		
80-99-0115 July 1, 2007	Security:		Support:		
	b2High			3 41.	
Basic Rates per Man-Day \$46.81		\$470.70 T		***************************************	
Other Charges: (If None, Indicate N/A)					*
Transportation/Guard services; \$15.00 per hour/.585 per					
mile; N/A		e filologia			
- ************************************		对于最终的 医二十		化氯二烷基二	

SIGNIFICANT INCIDENT SUMMARY WORKSHEET

In order for Creative Corrections to complete its review of your facility, you <u>must</u> 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:	Types (Sexual ² , Physical, etc.)	P-2	P-5	P-7	P-13
Offenders on Offenders ¹	With Weapon	0	0	0	0
,	Without Weapon	2	5	7	13
Assault:	Types (Sexual Physical, etc.)	0	0	0	0
Detaince on Staff	With Weapon	0	0	Q	0
	Without Weapon	0	0	0	0
Number of Forced Moves, incl. Forced Cell Moves ³	2	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	Number/Reason (M=Medical, V=Violent Behavior, O=Other)	0	0	0	0
Restraints Applied/Used	Type (C-Chair, B-Bed, BB-Board, O-Other)	0	0	0	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	59	44	34	66
	# Resolved in Favor of Offender/Detainee	26	10	22	60
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)	Ĭ	0	0	I
	Number	1.	0	0	1
Psychiatric / Medical Referrals	# Medical Cases Referred for Outside Care	106	107	106	107
	# Psychiatric Cases Referred for Outside Care	34	52	61	54

Any attempted physical contact or physical contact that involves two or more offenders

Oral, anal or vaginal penetration or attempted penetration involving at least 2 parties, whether it is consenting or non-consenting

Routine transportation of detainees/offenders is not considered "forced"

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. ACCEPTABL	2. DEFICIENT	3. AT-RISK	4. REPEAT FINDING	5. NOT APPLICABLE		1742 1515		
LEGAL ACCE	SS STANDARDS				1.	2.	3, 4,	5.
1. Visitati	n				X			
2. Telepho	ne Access							
DETAINEE SE	RVICES			20 E				
3. Admiss	ion and Release	ana ya a a a a a a a a a a a a a a a a a	11 24 22. 22. 22. 2	2 2 2 2				
4. Classifi	cation System		•		Ø			
Detaine	e Handbook				\boxtimes			ŭ
6. Food Se	rvice	4 4			\square			
7. Funds a	nd Personal Property				M			
1 1 .	e Grievance Procedures							
9. Issuanc	and Exchange of Cloth	ing, Bedding, and To	wels		M			
Religio	is Practices							
HEALTH SER	ACES	:.	10)				舞	
11. Medica	Care				IX			
12. Suicide	Prevention and Interven	tion			図			
SECURITY AN	D CONTROL							
13. Contrab	and			Action of the second	M			
14. Detention	on Files				M			
Discipli	nary Policy				X			
	ncy Plans				図			
	mental Health and Safet				\boxtimes			
	oms in Detention Facili	ties	•		図			
	Lock Control							14
	on Counts							
•	Inspections				M			
	Management Units (Ad				Ø			
•	Management Units (Dis	ciplinary Segregation	1)		N M		<u> </u>	46
24. Tool Co								
	rtation (Land manageme	nt)			M			
26. Use of I								
	etainee Communication		3)					
28. Detaine	Transfer (Added Septe	mber 2004)						

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 DEFICIENCES NOTED IN THE REPORT.

REVIE	ewer-In-Charge
Reviewer-In-Charge: (Print Name)	Signature
b6,b7c	b6,b7c
Title & Duty Location	
Reviewer-in-Charge	April 8, 2009 b6,67c
Te	AM MEMBERS
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location
b6,b7c Subject Matter Expert, Security	b6,b7c Subject Matter Expert, Health Services
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location
b6,b7c Subject Matter Expert, Food Service	b6.b7c , Subject Matter Expert, Environmental Health and Safety
energy (
RECOMMENDED RATING: ACCEPTABLE	
L DEFICIENT	
AT-RISK	

COMMENTS: Limestone County Detention Center (LCDC) is a well managed facility with "Acceptable" compliance in all 28 National Detention Standards.

ICE periodically houses detainees at the facility. There were no detainees housed at the time of review. However, the facility is presently holding a large number of BOP inmates. LCDC recorded 4,681 ICE man days during the last 12 months.

The facility has a low number of significant incidents, as noted in the Significant Incident Summary Worksheet.

Grievances are consistent with a facility of 1,026; however, the number resolved in favor of Offender/Detainee is disproportionately high. The most grievances were complaints against staff (82), and medical or health care (66). The Grievance Coordinator explained the practice of granting offender/detainee requests to review or investigate a particular incident, but this did not indicate a finding of unprofessional conduct or wrong doing regarding staff. Likewise, grievances regarding routine or specialized medical care resulted in a follow-up appointment or review of the grievance by Health Services staff, but this did not indicate any failure regarding immate/detainee health care. This pattern was consistent with grievances regarding other matters.

There were two immate deaths during the last 12 months. The first death occurred on November 7, 2008, at Hillcrest Baptist Medical Center. A 22 year old BOP immate who had been hospitalized since October 18, 2008, died of Renal Failure. The second death occurred on March 16, 2009, at the facility. A 49 year old BOP immate was found unresponsive in his bunk at 12:44 p.m. The immate arrived at the facility on March 13, 2009. Autopsy results are pending at this time, but preliminary review indicates death by natural causes.

HEADQUARTERS EXECUTIVE REVIEW Review Authority The signature below constitutes review of this report and acceptance by the Review Authority. OIC/CEO will have 30 days from receipt of this report to respond to all findings and recommendations. HQDRO EXECUTIVE REVIEW: (Please Print Name) Signature Date Title 10/9/2NA Assistant Director for Management Superior Final Rating: Good Acceptable Deficient At-Risk No Rating The Review Authority has downgraded the recommended rating of "Acceptable" to "Deficient" due to Comments: the use of EMDDs (Elector Muscular Disruption Devices). No Plan of Action (POA) is required in regard to the use of EMDDs. However, a POA is required to address the line item deficiencies identified in the Detainee Handbook, Food Service and Hold Rooms in Detention Facilities standards.

U.S. Department of Homeland Security 500 12th Street, SW Washington, DC 20024



NOV 0 6 2009

MEMORANDUM FOR:

Nuria T. Prendes Field Office Director Dallas Field Office

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b6,b7c

Acting Unit Chief

Detention Standards Compliance Unit

SUBJECT:

Lubbock County Detention Center Plan of Action

The Lubbock County Detention Center Plan of Action dated October 27, 2009, has been received. The plan was developed in response to a review conducted by MGT of America, Inc. on July 27-28, 2009.

The Review Authority concurs with the Plan of Action and this review is closed. The Field Office must now initiate the following actions in accordance with the Detention Management Control Program:

- 1) The Field Office Director, Detention and Removal Operations, shall notify the facility <u>within</u> five business days of receipt of this memorandum. Notification shall include a copy of this memorandum.
- 2) The Field Office Director shall ensure that the facility complies with its proposed Plan of Action and will conduct a follow-up review of the deficiencies identified in the G324B, *Detention Facility Review Form* and the Lead Compliance Inspector Summary Memorandum within 90 days.
- 3) The next annual review will be scheduled on or before July 27, 2010.

Should you o	r your staff have any questions regarding this matter, please contact	b6,b7c
b6,b7c	Detention and Deportation Officer at (202) 732-b6.b7c	

cc: Official File

ICE: HQDRO: 66,67c 2-5514: 10/29/2009

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