

October 1, 2020

TO: [REDACTED]
Assistant Director for Detention Management

FROM: [REDACTED]
Lead Compliance Inspector
The Nakamoto Group, Inc.

SUBJECT: **Annual Inspection of the Limestone County Detention Center**

The Nakamoto Group, Inc. performed an annual inspection for compliance with the ICE National Detention Standards (NDS) of the Limestone County Detention Center in Groesbeck, Texas during the period of September 29 - October 1, 2020. This is an IGSA.

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

Subject Matter Field	Team Member
Detainee Rights	[REDACTED]
Security	[REDACTED]
Medical Care	[REDACTED]
Medical Care	[REDACTED]
Safety	[REDACTED]

Type of Inspection

This is a scheduled annual inspection, which is performed to determine overall compliance with the ICE NDS for Over 72-hour facilities. The facility received a rating of Acceptable during the October 2019 inspection.

Inspection Summary

The Limestone County Detention Center is currently accredited by:

- The American Correctional Association (ACA) - No
- The National Commission on Correctional Health Care (NCCHC) - No
- The Joint Commission (TJC) - No
- Prison Rape Elimination Act (PREA) - No

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 2019 and 2020 NDS compliance annual inspections:

<i>2019 Annual Inspection</i>	
Acceptable	37
Deficient	0
Repeat Finding	0
Not Applicable	2

<i>2020 Annual Inspection</i>	
Acceptable	37
Deficient	0
Repeat Finding	0
Not Applicable	2

The inspection team identified six (6) deficient components in the following five (5) standards:

Correspondence and Other Mail – 2
Access to Telephones – 1
Detention Files – 1
Environmental Health and Safety – 1, which is a repeat deficiency
Staff/Detainee Communications – 1, which is a repeat deficiency

Facility Snapshot/Description

The Limestone County Detention Center is a [REDACTED] facility owned by Limestone County and governed by Limestone County officials. The facility is managed by LaSalle Corrections Southeast. The facility is in Groesbeck, Texas, approximately 100 miles south of Dallas. The facility currently houses male and female U. S. Marshals Service detainees and male ICE detainees. [REDACTED]

[REDACTED] There was one ICE detainee under cohort status during the inspection. All services, including Medical and Food Service are provided by LaSalle Corrections. Detainees are not charged co-pay fees for medical, dental or mental health services.

The single-story facility consists of six housing areas for detainees, medical housing and two segregation areas. The ICE housing units are comprised of eight-person dormitories and sixteen-person dormitories. Dayroom activities include watching television, playing cards and talking on the telephone. Outdoor recreation is offered. All meals are served in the housing units.

Due to COVID-19, this inspection was conducted remotely. The facility provided the inspection team all requested documentation, photographs and videos as evidence of practices and procedures within the facility. In addition to these materials, detainees were questioned regarding the services they were receiving. All facility staff interviewed were well versed in facility policy and the requirements of the standards and were responsive to all requests made by the inspection team.

At the request of the inspection team, the facility posted notices in English and Spanish announcing the inspection and allowing any detainee who wished to be interviewed to sign-up. Twenty detainees were interviewed; limited English proficient (LEP) detainees speaking Spanish and Hindi were interviewed via a telephonic interpreter service or by a bilingual inspector. There were several complaints regarding the lack of variety on the menu. One detainee voiced a complaint regarding the vegetarian menu. The menus were reviewed, and it was found that they were reviewed and approved by a dietician. Detainees stated that the telephones work; however, one detainee stated that he had attempted to contact the OIG and was unable to make contact. He stated that his concern has been resolved and he did not try again. During the inspection, an officer attempted to contact the OIG from a housing unit to allow the inspector to hear the call answered. The officer was unable to make contact and he stated that he would report the problem. When questioned about medical care, some detainees stated that it takes too long to be seen by medical



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and others stated that the response was good. No detainees reported issues regarding the quality of medical care. A detainee complained that they were not permitted to use the law library. The Warden stated that there had been no requests submitted by ICE detainees. Another detainee stated that the facility has a problem with ants, roaches and mice. The facility has a contract for monthly service by a licensed pest control service.

All the detainees stated that they feel safe at the facility but that they are concerned about COVID-19. They feel there should be regular temperature checks done. Officers are required to wear masks and detainees are required to wear a mask anytime they leave the housing unit. General visitation has been suspended due to COVID-19. Detainees are provided 500 free telephone minutes month so they can maintain ties with family and friends.

Areas of Concern/Significant Observations

There were no areas of concern or significant observations during the inspection. The inspection was conducted remotely, and inspectors were unable to personally observe practices and procedures within the facility. The inspection team relied upon photographs and/or videos to validate the observation of many standards.

Recommended Rating and Justification

The Lead Compliance Inspector recommends that the facility receive a rating of Acceptable unless unobserved practices and conditions are contrary to what was reported to the inspection team. The facility complies with the ICE National Detention Standards (NDS). No (0) standards were found Deficient and two (2) standards were Not Applicable (N/A). All remaining thirty-seven (37) standards were found to be in compliance.

LCI Assurance Statement

The findings of compliance and non-compliance are accurately and completely documented on the G-324 Inspection Form and are supported by documentation in the inspection file. A telephone, call-in out brief was conducted with the facility. In addition to the entire Nakamoto Group Inspection Team, there were several ICE/ERO personnel who phoned in and listened to the comments and concerns.

Facility staff –

[Redacted]

[Redacted]

[Redacted], Lead Compliance Inspector

October 1, 2020

Printed Name of LCI

Date