Type of Facility Reviewed Estimated Man-days Per Year					
☐ ICE Service Processing Center					
☐ ICE Contract Detention Facility					
ICE Intergovernmental Service Agreement					
	G. Accreditation Co	ertificate	S		
B. Current Inspection	List all State or Nation	nal Accre	ditation[s	s] receiv	ed:
Type of Inspection					
Field Office HQ Inspection	Check box if facil	ity has no	accredit	tation[s]	
Date[s] of Facility Review					
12/4/2018 - 12/6/2018	H. Problems / Com				
	The Facility is under	Court Ord	ler or Cla	ss Actio	n Finding
C. Previous/Most Recent Facility Review	Court Order		Class Act		er
Date[s] of Last Facility Review	The Facility has Signi	ficant Lit	igation P	ending	
N/A	☐ Major Litigation	☐ I	Life/Safet	ty Issues	3
Previous Rating	Check if None.				
☐ Meets Standards ☐ Does Not Meet Standards					
	I. Facility History				
D. Name and Location of Facility	Date Built				
Name					
El Valle Detention Facility	Date Last Remodeled	or Upgra	ded		
Address (Street and Name)					
1800 Industrial Drive	Date New Construction	on / Beds	pace Add	led	
City, State and Zip Code		_			
Raymondville, TX 78580	Future Construction F	Planned			
County	□ □ Date	:			
Willacy	Current Bedspace	Future	Bedspace	e (# New	Beds only)
Name and Title of Facility Administrator		Numbe	r: D	Date:	
(Warden/OIC/Superintendent)	<u> </u>	•			
	J. Total Facility Po	pulation			
Telephone # (Include Area Code)	Total Facility Intake f	or previou	us 12 mo	nths	
Field Office / Sub-Office (List Office with oversight	Total ICE Mandays for	or Previou	ıs 12 mor	nths	
responsibilities)					
San Antonio/Port Isabel					
Distance from Field Office	K. Classification Le	evel (ICI	E SPCs a	nd CDI	S Only)
229		L-1 L-2		L-2	L-3
	Adult Male	N/A		N/A	N/A
E. ICE Information	Adult Female	N/A	L	N/A	N/A
Name of Inspector (Last Name, Title and Duty Station)					
/ LCI/Detainee Rights SME / Nakamoto Group	L. Facility Capacity	y			
Name of Team Member / Title / Duty Location	R	ated	Operat	ional	Emergency
/ Medical SME / Nakamoto Group					
Name of Team Member / Title / Duty Location					
/ Safety SME / Nakamoto Group					
Name of Team Member / Title / Duty Location					
/ Security SME / Nakamoto Group	M. Average Daily P	opulation	1		
Name of Team Member / Title / Duty Location		ICE	ι	JSMS	Other
/ Medical SME / Nakamoto Group					
F. CDF/IGSA Information Only					
Contract Number Date of Contract or IGSA	N. Facility Staffing	Level			
Security: Support:			:		
Basic Rates per Man-Day					
Other Charges: (If None, Indicate N/A)					

Significant Incident Summary Worksheet

For The Nakamoto Group to complete its review of your facility, the following information <u>must be completed</u> prior to the scheduled review dates. The information on this form should contain data for the past twelve months in the boxes provided. The information on this form is used in conjunction with the ICE Detention Standards in assessing your Detention Operations against the needs of the ICE and its detained population. This form should be filled out by the facility prior to the start of any inspection. Failure to complete this section will result in a delay in processing this report and the possible reduction or removal of ICE' detainees at your facility.

Incidents	Description	Jan – Mar	Apr – Jun	Jul – Sept	Oct – Dec
Assault:	Types (Sexual ² , Physical, etc.)	N/A	N/A	N/A	Physical
Offenders on Offenders ¹	With Weapon	N/A	N/A	0	0
	Without Weapon	N/A	N/A	0	2
Assault:	Types (Sexual Physical, etc.)	N/A	N/A	N/A	N/A
Detainee on Staff	With Weapon	N/A	N/A	0	0
	Without Weapon	N/A	N/A	0	0
Number of Forced Moves, incl. Forced Cell moves ³		N/A	N/A	0	0
Disturbances ⁴		N/A	N/A	0	0
Number of Times Chemical Agents Used		N/A	N/A	0	0
Number of Times Special Reaction Team Deployed/Used		N/A	N/A	0	0
# Times Four/Five Point	Number/Reason (M=Medical, V=Violent Behavior, O=Other)	N/A	N/A	0	0
Restraints applied/used	Type (C=Chair, B=Bed, BB=Board, O=Other)	N/A	N/A	N/A	N/A
Number of Times Canines Used in Facility		N/A	N/A	0	0
Offender / Detainee Medical Referrals as a result of injuries sustained.		N/A	N/A	0	1
Escapes	Attempted	N/A	N/A	0	0
•	Actual	N/A	N/A	0	0
Grievances:	# Received	N/A	N/A	0	17
	# Resolved in favor of Offender/Detainee	N/A	N/A	0	2
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)	N/A	N/A	0	0
	Number	N/A	N/A	0	0
Psychiatric / Medical Referrals	# Medical Cases referred for Outside Care	N/A	N/A	10	6
	# Psychiatric Cases referred for Outside Care	N/A	N/A	0	0

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. I	1. Meets Standards 2. Does Not Meet Standards 3. Repeat Finding 4. Not Applicable					
PA	RT 1 SAFETY					
1	Emergency Plans					
2	Environmental Health and Safety	\boxtimes				
3	Transportation (By Land)				\boxtimes	
	RT 2 SECURITY					
4	Admission and Release					
5	Classification System	\boxtimes				
6	Contraband	\boxtimes				
7	Facility Security and Control					
8	Funds and Personal Property	\boxtimes		一		
9	Hold Rooms in Detention Facilities				_	
10	Key and Lock Control					
11	Population Counts			H		
12	Post Orders					
13	Searches of Detainees					
14	Sexual Abuse and Assault Prevention and Intervention					
				H		
15	Special Management Units					
16	Staff-Detainee Communication					
17	Tool Control					
18	Use of Force and Restraints					
	RT 3 ORDER					
19	Disciplinary System					
	RT 4 CARE		_			
20	Food Service	Ш	\boxtimes	Ш		
21	Hunger Strikes					
22	Medical Care	\boxtimes				
23	, 6					
24						
25	Terminal Illness, Advance Directives, and Death					
PA	RT 5 ACTIVITIES					
26	Correspondence and Other Mail	\boxtimes				
27	Escorted Trips for Non-Medical Emergencies				\boxtimes	
28	Marriage Requests	\boxtimes				
29	Recreation	\boxtimes				
30	Religious Practices	\boxtimes				
31	Telephone Access	\boxtimes				
32	Visitation	\boxtimes				
33	Voluntary Work Program	\boxtimes				
PA	RT 6 JUSTICE					
34	Detainee Handbook	\boxtimes				
35	Grievance System	\boxtimes				
36		\boxtimes				
37	Legal Rights Group Presentations	\boxtimes				
PART 7 ADMINISTRATION & MANAGEMENT						
38	Detention Files	\boxtimes				
39	News Media Interviews and Tours					
40	Staff Training					
41	Transfer of Detainees					
	The state of the s				<u> </u>	

LCI Review Assurance Statement

By signing below, the Lead Compliance Inspector (LCI) certifies that all findings of noncompliance with policy or inadequate controls contained in the Inspection Report are supported by evidence that is sufficient and reliable. Furthermore, findings of noteworthy accomplishments are supported by sufficient and reliable evidence. Within the scope of the review, the facility is operating in accordance with applicable law and policy, and property and resources are efficiently used and adequately safeguarded, except for the deficiencies noted in the report.

Lead Compliance Inspector: (Print Name)	Signature		
Title & Duty Location	Date		
Lead Compliance Inspector, Detainee Rights SME, The Nakamoto Group, Inc.	12/6/2018		

Team Members			
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location		
, Safety SME, The Nakamoto Group, Inc.	, Security SME, The Nakamoto Group, Inc.		
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location		
, Medical SME, The Nakamoto Group, Inc.	, Medical SME, The Nakamoto Group, Inc.		

Recommended Rating:	Meets Standards
	☐ Does Not Meet Standards

Comments: This inspection was conducted to determine overall compliance with the ICE Performance-Based National Detention Standards (PBNDS 2011) which include the following additions/changes to the standards listed on page three:

- Medical Care (Women), a new standard, was rated Not Applicable (N/A);
- Classification System is now titled Custody Classification System;
- Suicide Prevention and Intervention is now titled Significant Self-Harm and Suicide Prevention and Intervention;
- Escorted Trips for Non-Medical Emergencies is now titled Trips for Non-Medical Emergencies;
- News Media Interviews and Tours is now titled Interviews and Tours, and;
- Transfer of Detainees is now titled Detainee Transfer.

There was one allegation of inappropriate touching by a male detainee against another male detainee the first day of this inspection. The allegation was investigated and found to be unsubstantiated. The allegation was processed pursuant to the requirements of the Sexual Abuse and Assault Prevention and Intervention standard.

There were no escapes, deaths or serious suicide attempts during the inspection period. The facility does not have a canine unit for contraband detection. Tasers and oleoresin capsicum/pepper spray (OC) are not used at this facility. The use of unsafe types of force such as choke holds, carotid control holds and neck restraints are not authorized. There were no use of force incidents during the inspection period.