

October 24, 2019

TO: [REDACTED]  
Assistant Director for Detention Management

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

SUBJECT: **Annual Detention Inspection of the El Valle Detention Facility**

The Nakamoto Group, Inc. performed an annual inspection for compliance with the ICE Performance-Based National Detention Standards (PBNDS 2011) of the El Valle Detention Facility in Raymondville, TX during the period of October 22-24, 2019. This is a DIGSA facility.

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

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

### **Type of Inspection**

This is a scheduled annual inspection which is performed to determine overall compliance with the ICE PBNDS 2011 for Over 72 hour facilities. The facility received a previous rating of Meet Standards during the December 2018 inspection.

### **Inspection Summary**

The El Valle Detention Facility 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 2018 and 2019 annual inspections:

<i><b>2018 Annual Inspection</b></i>	
Meets Standard	38
Does Not Meet Standard	1
Repeat Finding	0
Not Applicable	3

<i><b>2019 Annual Inspection</b></i>	
Meets Standard	40
Does Not Meet Standard	0
Repeat Finding	0
Not Applicable	2

### **Facility Snapshot/Description**

The El Valle Detention Facility is located in Raymondville, TX, which is approximately 250 miles south of San Antonio, TX and forty miles inland from the Gulf of Mexico. The facility is owned and operated by Management and Training Corporation (MTC), a private corrections company. It is a DIGSA that houses adult male and female ICE detainees of all custody levels. [REDACTED]

The facility opened in 2006. It is a 55-acre compound consisting of two distinct sections inside the fence; the administrative services area and a section that includes the detainee housing units, kitchen/dining halls and the receiving and discharge area. The space between these areas is dedicated to two large outdoor recreation yards. The perimeter of the compound is encircled by a paved road and two parallel twelve-foot chain link fences supplemented with razor ribbon. The exterior fence line is equipped with an intrusion/shaker detection system. The perimeter fence is checked once each shift by a designated officer and is under constant surveillance camera vigil, which is monitored by control center officers. The 226-camera network affords watch into all housing units and main movement corridors. All movement is either escorted or permitted by sight line observations from post officers. All exterior building doors are alarmed and controlled by central control officers.

All general population detainees are housed in eleven dormitory style housing units ranging in size from 112-120 beds. There is one special management unit (SMU) consisting of 48 two-bed cells; SMU detainees are single celled. All housing units are managed under direct supervision by officers.

Housing unit dayrooms are equipped with televisions, fixed dining/seating tables where detainees can play board games, cards, engage in social interactions with one another and watch television and electronic tablets on which detainees can order commissary, participate in video-visits and play games. All detainees have access to indoor and outdoor recreation.

Several detainees were interviewed throughout the inspection using the language line and interpreters. Interviews were confidential and conducted in the housing units, on work assignments, on the yard, in the health care unit and in the dining hall. Detainees had no reservations about speaking with the inspection team. Overall the detainees voiced no substantive complaints or concerns when questioned about their personal safety, treatment by staff, conditions of confinement, medical care, asylum requests, consulate/court access, ICE/ERO services, visiting privileges, law library access, food services or recreational opportunities. The health concerns noted were discussed with the health services administrator by the medical SME. In all instances, the concerns were previously addressed and proper protocols were followed. Those detainees with on-going conditions had been scheduled for follow-up initiatives, as appropriate. There was one food service concern involving a detainee who stated she requested, but did not receive, a medical diet. This issue was discussed with the food service administrator and health care administrator revealing she is currently receiving a diabetic tray and is being seen regularly regarding her condition.



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Detainee interaction with the staff was relaxed and unassuming. Detainees were obedient to all staff directives. Detainees were respectful in all their encounters with staff and one another. Staff were knowledgeable of the daily schedule and the expectations of the detention standards. Approximately sixty percent of the staff are bilingual.

Medical care, food services and maintenance services are provided by MTC employees. Detainee telephone services are contracted to Talton Communications, Inc. Commissary products are provided United Commissary Solutions. Detainees are not charged a medical co-payment.

### **Areas of Concern/Significant Observations**

There were no areas of concern identified during this inspection.

### **Recommended Rating and Justification**

The Lead Compliance Inspector recommends that the facility receive a rating of Meets Standards. The facility complies with the ICE Performance Based National Detention Standards (PBNDS) 2011. No (0) standards were found Does Not Meet Standard and two (2) standard was Not Applicable (N/A). All remaining forty (40) standards were found to be in compliance.

### **LCI Assurance Statement**

The findings of compliance and noncompliance are accurately and completely documented on the G-324A inspection form and are supported by documentation in the inspection file. An out brief was conducted at the facility and in addition to the entire Nakamoto Group, Inc. Inspection Team, the following were present:

- ICE Officials – [REDACTED]
- Facility Staff – [REDACTED]

[REDACTED]

[REDACTED], Lead Compliance Inspector

October 24, 2019

[REDACTED] of LCI

Date