

December 6, 2018

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 December 4-6, 2018. This is a dedicated IGSA facility.

The 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/90-day follow-up inspection which is performed to determine overall compliance with the ICE PBNDS 2011 for Over 72 hour facilities. A previous inspection report was not available.

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 annual/90-day follow-up compliance inspection:

2018 Annual Inspection	
Meets Standard	38
Does Not Meet Standard	1
Repeat Finding	0
Not Applicable	3

The inspection team identified nineteen (19) deficient components in the following six (6) standards:

Environmental Health and Safety—2
Facility Security and Control—1
Special Management Unit—3, one of which is a Priority
Staff Detainee Communication—1
Food Service—11, one of which is a Priority
Medical—1, which is a Priority

Facility Snapshot/Description

The El Valle Detention Facility is located within the city limits of Raymondville, TX, a small Texas town, population 11,000, located approximately 240 miles south of San Antonio, TX and 48 miles north of Brownsville, TX. The facility is owned and operated by Management and Training Corporation (MTC), a private corrections company, and operates the facility pursuant to an IGSA between Willacy County and ICE. Per the OIC and the local COR, the facility is a dedicated IGSA. The facility is across the street from the Willacy County Sheriff's Office and adjacent to another MTC facility that houses U.S. Marshals Service prisoners. The Willacy County State Jail, owned and operated by LaSalle Corrections, is also located nearby.

The El Valle Detention Facility was constructed in 2006 and was originally owned by Willacy County and subsequently purchased by MTC. ICE detainees were housed in the facility from 2006 until 2011 at which time the facility transitioned to the Federal Bureau of Prisons. After a major disturbance in 2015, the facility was closed and underwent major renovations before resuming operations in July 2018 at which time the facility began housing [REDACTED]

Most of the administrative offices are located in Building A and Building B, both of which are physically separated from the building known as the Hard Structure which contains detainee housing units, the law library, recreation areas, and the triage section of the medical department. Buildings A and B are approximately 100 yards from the Hard Structure with two large soccer fields/recreation yards situated between the buildings. The security fence encompasses the Hard Structure and abuts the back corners of Buildings A and B.

The facility has eight dormitory design housing units each with a capacity of 100 beds. There are also three cell design housing units; two with a capacity of 96 beds each and one with a capacity of 92 beds. Currently, one of the cell design housing units is designated as the special management unit (SMU); the other two cell design housing units are vacant. Per the OIC, one of the currently vacant housing units will be used for high custody detainees and one to house female detainees. The facility employs the direct supervision model; an officer is posted inside each housing unit around the clock. [REDACTED]

[REDACTED]

Each of the 100 bed capacity dormitories have a large dayroom/seating area with several tables and affixed stools, four televisions, eleven telephones, various board games and a microwave oven. Additionally, the facility has recently placed several Android tablets in the dorms. Although the tablets are not yet programmed, the OIC stated detainees should be able to, for a fee, play games, listen to music, read books, receive photos, send texts and email messages, watch movies, etc. Also, most of the postings and information required by the standard to be provided to detainees will be available on the tablets.

Both indoor and outdoor recreation areas are available. All detainees in the general population have daily access to one hour of outside and one hour of indoor recreation in addition to their access to the dayroom during waking hours. The entire facility is climate controlled. Sanitation throughout the facility was observed to be average.

All housing units for ICE detainees and all common areas of the facility were observed during the inspection. Each member of the inspection team made multiple visits to the housing units and numerous detainees were interviewed. Some interviews were with small groups of detainees and several were private and confidential and included detainees with limited English proficiency (LEP). Detainees who had recently arrived at the facility, and some who had been housed at the facility for longer periods of time, were interviewed. The detainees voiced no concerns regarding life/safety issues. Detainees were generally satisfied with the interaction, responsiveness and professionalism of facility and ICE staff and with access to medical services, the law library, telephones and recreation.

On the first day of the inspection, four of the eight 100 bed dormitories were under quarantine due to an outbreak of mumps and varicella. The quarantine had spread to six of the dormitories by the end of the inspection.

All services, with the exception of detainee telephone services contracted with Talton Communications, Inc., are provided by MTC. ICE detainees do not incur medical co-pays.

Areas of Concern/Significant Observations

Food Service Standard Rated Does Not Meet Standard

Policy: This detention standard ensures that detainees are provided a nutritionally balanced diet that is prepared and presented in a sanitary and hygienic food service operation.

Finding: Food service personnel were observed not using gloves while having direct contact with food when checking food temperatures. Sanitizing buckets were not observed to be in use during food preparation and service. Staff was observed taking food temperatures without properly sanitizing the thermometer. A complete nutritional analysis has not been provided by a registered dietitian indicating that the menus meet the U.S. Recommended Daily Allowances (RDA). When making menu substitutions, dietitian approved substitution guidelines are not used. All potentially hazardous food was not stored at or below 40 degrees Fahrenheit during the inspection. Common fare menus did not provide no-flesh options. The food service department did not have a schedule for routine cleaning of equipment consistent with manufacturers' recommendations. The dishwashing machine, although operating properly, was found to have a significant build-up of lime deposit.

Recommendation: Food service personnel should follow all sanitation guidelines and proper temperature maintenance as required by the standard for food handling. Potentially hazardous food should be stored at temperatures required by the standard. Menu substitutions should follow guidelines approved by a dieti-

tian. The facility should obtain a complete nutritional analysis by a registered dietitian confirming that the menus meet the U.S. Recommended Daily Allowances (RDA). Common fare menus should provide no-flesh options. A routine cleaning schedule for equipment, in accordance with manufacturers' recommendations, should be developed.

Priority Components Rated Does Not Meet Standards

Special Management Unit

Component #11: -There are implemented written procedures for the regular review of all detainees in Administrative Segregation.

A supervisor conducts a review within 72 hours of the detainee's placement in Administrative Segregation to determine whether segregation is still warranted. The review includes an interview with the detainee, and a written record is made of the decision and the justification.

If a detainee is segregated for the detainee's protection, but not at the detainee's request, continued detention requires the authorizing signature of the facility administrator or assistant facility administrator.

When a detainee has spent seven days in Administrative Segregation, and every week thereafter for the first 30 days and at least every 10 days thereafter, a supervisor conducts a similar review, including an interview with the detainee, and documents the decision and justification.

Finding: A review of administrative segregation placement and review documentation over the inspection period confirmed that supervisors are not conducting a review within 72 hours of the detainee's placement in administrative segregation to determine whether segregation is still warranted.

Recommendation: Require supervisors to conduct a review of a detainee's placement in administrative segregation within 72 hours to determine whether segregation is still warranted as required by the standard.

Food Service

Component #16: -A registered dietitian shall conduct a complete nutritional analysis that meets U.S. Recommended Daily Allowances (RDA), at least annually, of every master-cycle menu planned by the FSA. The dietitian must certify menus before they are incorporated into the food service program.

Finding: A registered dietitian has not conducted a complete nutritional analysis that meets U.S. Recommended Daily Allowances (RDA) of the master cycle menus planned by the FSA.

Recommendation: A registered dietitian should conduct a complete nutritional analysis that meets U.S. Recommended Daily Allowances (RDA) of the master cycle menus planned by the FSA. Once the nutritional analysis is completed, the dietitian should certify the menus before they are incorporated into the food service program.

Medical Care

Priority Component #36: Any detainee referred for mental health treatment shall receive a comprehensive evaluation by a licensed mental health provider as clinically necessary no later than 72 hours after the referral, or sooner if necessary.



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The provider shall develop an overall treatment/management plan that may include transfer to a mental health facility if the detainee's mental illness or developmental disability needs exceed the treatment capability of the facility.

Finding: Review of medical records substantiated that detainees referred for mental health treatment were not seen by the mental health provider within 72 hours. The mental health provider does develop a treatment plan or recommends transfer to a mental health facility if the need exceeds the capabilities of the facility.

Recommendation: This should no longer be an issue since the facility now has two mental health professionals on staff that will provide services in a timely manner as required by the standard.

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. One (1) standard was found Does Not Meet Standard and three (3) standards were Not Applicable (N/A). All remaining thirty-eight (38) 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. 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]

(telephonically) and various other staff and supervisors

[REDACTED]

[REDACTED], Lead Compliance Inspector

Printed Name of LCI

December 6, 2018

Date