



U.S. Department of Homeland Security

Immigration and Customs Enforcement

Office of Professional Responsibility

Inspections and Detention Oversight

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**Office of Detention Oversight
Compliance Inspection**

**Enforcement and Removal Operations
San Antonio Field Office
East Hidalgo Detention Center
La Villa, Texas**

February 12 – 14, 2013

**COMPLIANCE INSPECTION
EAST HIDALGO DETENTION CENTER
SAN ANTONIO FIELD OFFICE**

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EXECUTIVE SUMMARY

The Office of Professional Responsibility (OPR), Office of Detention Oversight (ODO) conducted a Compliance Inspection (CI) of the East Hidalgo Detention Center (EHDC) in La Villa, Texas, from February 12 to 14, 2013. EHDC opened in 1998, and is owned and operated by LCS Corrections Services, Inc. (LCS). In November 2011, U.S. Immigration and Customs Enforcement (ICE), Office of Enforcement and Removal Operations (ERO) began housing detainees at EHDC under an Intergovernmental Service Agreement between ICE and LCS. Classification Level I (lowest threat) male and female detainees are held at EHDC in excess of 72 hours. EHDC does not house Level II (medium threat) or Level III (highest threat) detainees. EHDC allocates a total of 400 beds for ICE detainees. At the time of the CI, EHDC housed 209 ICE detainees (139 female, 70 male). The average daily ICE detainee population at EHDC is 262. The average length of stay at EHDC is 6 days. LCS provides food service. Correctional Healthcare Companies (CHC) provides medical care. EHDC does not hold any accreditations.

The ERO Field Office Director (FOD) in San Antonio, Texas (FOD San Antonio) is responsible for ensuring facility compliance with ICE policies and the ICE National Detention Standards (NDS). The Assistant Field Office Director assigned to the Port Isabel Detention Center in Port Isabel, Texas, maintains oversight of EHDC. There is no permanent ICE staff at EHDC. ICE staff, consisting of Deportation Officers (DO) and Immigration Enforcement Agents (IEA) from the Port Isabel Detention Center, monitors conditions of confinement for compliance with the ICE NDS, and interact with EHDC staff and detainees. DOs and IEAs conduct multiple scheduled and unscheduled visits during the week. There is no Detention Service Manager assigned to EHDC.

The Warden is the highest-ranking official at EHDC, and is responsible for oversight of daily operations. In addition to the Warden, EHDC supervisory staff consists of (b)(7)(e) Deputy Wardens, a Chief of Security (Major), (b)(7)(e) Captains, (b)(7)(e) Lieutenants, and (b)(7)(e) Sergeants. The total number of LCS non-supervisory staff is (b)(7)(e).

In November 2011, ERO Detention Standards Compliance Unit contractor, the Nakamoto Group, Inc., conducted an annual review of the NDS at EHDC. EHDC received an overall rating of "Acceptable," and was found compliant with all 35 standards reviewed.

This is the first CI completed at EHDC by ODO. During this CI, ODO reviewed 16 NDS and found EHDC compliant with 13 standards. ODO found five deficiencies in the following three standards: Environmental Health and Safety (1 deficiency), Medical Care (2), and Staff-Detainee Communication (2).

This report details all deficiencies and refers to the specific, relevant sections of the NDS. ERO will be provided a copy of this report to assist in developing corrective actions to resolve all identified deficiencies. These deficiencies were discussed with EHDC and ICE personnel during the inspection, as well as during the closeout briefing conducted on February 14, 2013.

Overall, ODO found EHDC to be orderly and well managed. ODO attributes the high level of compliance to the presence of an EHDC Compliance Officer. The EHDC Compliance Officer

conducts oversight of the facility's daily operations, as well as the facility's adherence to the ICE NDS. The EHDC Compliance Officer revises the detainee handbook quarterly; maintains records, logs, policies, and procedures; and addresses any issues affecting the health and welfare of the detainees. The EHDC Compliance Officer works closely with ICE staff on a daily basis on detention oversight issues.

Sanitation levels in food service, the medical clinic, admission and release areas, and male detainee housing units were observed to be high; however, sanitation concerns were noted in the female housing units. In one female housing unit ODO observed dirt and trash in corners, soap scum in the showers, and dirty sink/toilet combination fixtures. In other female housing units, ODO observed graffiti on the walls; beverage stains on the floors in sleeping areas; peeling paint on partitions, walls and tables; and grimy and dusty floor corners. ODO observed poor sanitation and cleanliness in shower areas within the above-mentioned female housing units such as hair in drains, rust, soap scum, and mildew. Sink/toilet combination fixtures were also dirty, and toilet paper littered the floor. Prior to completion of the inspection, the facility initiated corrective actions.

During the admissions process, detainees are given a medical screening, attend a facility orientation, and receive both the EHDC facility detainee handbook and the ICE National Detainee Handbook. Both the ICE "Know Your Rights" and the EHDC orientation videos are shown to detainees during the admissions process. Both handbooks are available in the English and Spanish languages. Detainee property is inventoried and logged during the admissions process, and documented on a personal property form, which is attached to detainees' property bags. Valuables are placed in property bags and stored in a secure storage area. Detainees are provided with appropriate clothing and free hygiene supplies. ODO reviewed 20 detainee detention files and found all files had classification forms signed by a reviewing supervisor, proof of receipt of hygiene items, and signatures of detainees acknowledging receipt of the detainee handbooks. Upon release, detainees are properly processed, required to sign all closing documents and related funds and personal property forms, fingerprinted, and required to surrender facility-issued clothing and bedding.

The law library is located in a quiet room with sufficient furnishings, equipment, and supplies to support effective legal research and case preparation. There is one computer in the law library for use by detainees. ODO verified the Lexis-Nexis version installed on the computer is current as of December 2012. The law library schedule is posted in all housing units. Interviews of detainees confirmed all were aware of the law library location and access procedures, but because of the short duration of stay at the facility, no ICE detainees have requested the use of the library. ODO confirmed with EHDC staff that no ICE detainees have requested access to the law library in over a year.

Detainees are classified by ICE staff assigned to the Port Isabel Detention Center before transporting detainees to EHDC. The FOD San Antonio provides EHDC with a folder containing Form I-203A, Order to Detain Aliens; the Detainee Classification System Primary Assessment Form; Form I-213, Record of Deportable Alien; and, when applicable, the criminal history information. The facility uses the classification level applied by ICE as a base, and then enters information from the I-213 into the Eagle Classification System Program to validate the classification level for internal purposes. Review of 15 files confirmed all contained the

documentation necessary to verify each detainee's classification level. A Sergeant or Lieutenant reviews and approves each detainee's classification. Procedures are in place to reclassify detainees who received a disciplinary incident report, if necessary. Detainees may appeal their classification level through the grievance system. At the time of the CI, only Level I detainees were assigned to the facility.

EHDC has a grievance system by which detainees can file informal or formal grievances. EHDC attempts to resolve oral and written detainee grievances informally and at the lowest level possible. Detainees are free to bypass or terminate the informal grievance process and proceed directly to filing a formal grievance. Results of oral and written grievances are documented, and copies of resolved grievances are placed in the detainees' detention files. The EHDC has procedures for identifying and handling an emergency grievance, and the grievance process is recorded in the facility-specific detainee handbook. EHDC staff stated, due to the short length of detainee stay, no formal grievances have been filed by ICE detainees since November 2011, when EHDC began housing ICE detainees. A review of the EHDC informal grievance log revealed one documented informal grievance that was addressed in a timely manner, and a copy of the resolution was placed in the detainee's detention file.

The EHDC Disciplinary Hearing Officer informed ODO there were no disciplinary reports written on ICE detainees during the last 18 months. The facility's disciplinary policy addresses all requirements of the NDS. Review of the detainee handbook confirmed it includes all required disciplinary information; however, the information is provided in two different sections. Detainee rights, the disciplinary process, and procedures for appealing disciplinary findings are addressed in the Disciplinary System section of the handbook; prohibited acts and sanctions are addressed in the Classification section. ODO recommends covering all matters relating to detainee discipline in the Disciplinary System section for ease of access.

The facility has a system for storing, issuing, and maintaining accountability for hazardous materials. ODO verified hazardous substances were safely stored and controlled in all areas, and Material Safety Data Sheets (MSDS) were available. Inspection confirmed running inventories are maintained. A master index of hazardous substances and a master file of MSDS is maintained, to include emergency telephone numbers and documentation of semi-annual reviews. A letter dated May 23, 2012, states the EHDC master index and fire emergency plan were forwarded to the city fire department. ODO verified monthly fire drills were conducted on each shift, and documentation is on file. Reports for water and pest control were current and readily available. Internal testing of the facility's emergency generators is conducted weekly for 60 minutes; however, quarterly testing and servicing by an external generator servicing company is not conducted.

The Food Service Administrator has over ten years of food service experience and is certified in SERVSAFE, which is a food safety training and certification program administered by the National Restaurant Association. The food service operation is supported by a crew of inmate workers, and no ICE detainees work in food service. ODO confirmed all staff and inmate workers received medical clearances and completed necessary training. A Chaplain is available to review and approve detainee requests for religious diets. Written procedures, supplies, and equipment are in place to accommodate detainees with religious dietary needs. ODO verified procedures for providing medical diets are in place, and observed the distribution of four medical

diet trays. All food service areas were exceptionally clean and well organized. Cleaning schedules were posted throughout the food service area, and food service staff and inmate workers were observed cleaning their work areas on a frequent basis. Inspection of the walk-in cooler, walk-in freezer, and dry storage room found them clean and well organized; temperatures were maintained at required levels; and the stock was properly dated.

ODO confirmed EHDC policies address all NDS requirements for safeguarding detainees' personal property and funds. Detainees are informed of procedures relating to property and funds during intake by staff, in an orientation video, and by way of the detainee handbook. The information provided to detainees includes property limitations; procedures for obtaining identity documents, as well as storing and mailing of property; and claims for lost or stolen property. The property room was spacious, neat, and well organized. During a tour of housing areas, ODO noted detainees are provided with bins for storage of personal property allowed in the housing units. Detainees are not authorized to keep money in their possession. Detainees receive receipts for any monies received, which are deposited in the detainee's funds account.

Medical services are provided by CHC. The medical clinic is open 24 hours a day, seven days a week. Corporate clinical oversight is provided by CHC's Chief Medical Officer and Chief Mental Health Officer. The administrative health authority for EHDC is the Health Services Administrator (HSA), and the Clinical Director (CD) is the designated clinical medical authority. The CD is on-site six hours on Tuesdays and Thursdays. The staffing plan also includes a nurse practitioner (NP), on-site eight hours on Wednesdays. The CD and NP share on-call responsibilities. Mental health services are provided by a licensed professional counselor who is on-call for mental health issues. These positions are augmented by the Director of Nursing, an additional registered nurse, (b)(7)e licensed vocational nurses, (b)(7)e medical assistants, (b)(7)e medical records clerks, and (b)(7)e pharmacy technician. All personnel are employees of CHC, and ODO verified all professional licenses were present and primary source verified. There were (b)(7) vacancies at the time of the review: (b)(7) full-time and (b)(7)e part-time medical assistant. The HSA stated he is actively recruiting to fill these positions. ODO finds staffing sufficient to provide basic medical services to all detainees housed at EHDC. Documentation supports the staffing plan is reviewed annually. The HSA informed ODO, all healthcare staff speaks Spanish; however, in the rare event translation services were needed for a language other than Spanish, a telephone interpretation service is used. EHDC does not charge detainees co-pays or fees for health care services or medications.

Dental services are provided off-site by a local dentist. Ambulance service for emergencies is provided by the City of Hidalgo, approximately five miles away. EHDC uses McAllen Medical Center, approximately 20 miles away, for medical services beyond the scope of care available at EHDC, and Rio Grande Regional Hospital for mental health care. EHDC has an infirmary consisting of four medical observation rooms, all of which have negative airflow for tuberculosis (TB) isolation, and one mental health room used for suicide watch. Though the examination rooms afford privacy, ODO observed a physical examination during which detention staff remained in the room. When discussed with the HSA, he acknowledged it is common practice for officers to be present during medical encounters. The HSA immediately issued instructions for detention staff to comply with the policy and remain outside examination rooms.

ODO cites as a best practice the partnership between the facility and county health department. EHDC reports suspect TB cases to the health department as required and thereafter, health department staff visits the patients on-site and assists in the management of the cases.

ODO cites as a second best practice the “Daily Health Services Shift Report” used by medical staff to ensure information flow between the three shifts. Included on the report are arriving and departing detainees and inmates, required glucometer checks, sick call numbers, the medical isolation roster, emergency room transfers, and other information as appropriate. This information supports sharing of information and continuity of care, and is a consolidated source of important data.

Detainees request health care services by completing written medical requests available in English and Spanish, and depositing them in designated locked boxes. Medical staff retrieves the requests once daily, five days a week. A retrieval log documents when they are picked up, supporting accountability. Sick call requests are dated and triaged upon receipt. The medical record review reflected same or next day triage, with medical requests addressed and completed in a timely manner as appropriate to the nature of the complaint. Sick call is conducted on a daily basis during the week, and on weekends upon verbal request. There have been no detainee deaths at EHDC.

Detainees have the opportunity to use the outdoor recreation areas five days a week for one hour per day. Outdoor recreation areas are located between each housing unit, each with a single basketball court, and a stainless steel sink-toilet combination fixture with a privacy wall. In addition, EHDC has two large outdoor recreation areas with capacity to accommodate the combined population of four to five housing units. Fresh drinking water is available in all recreation areas. Leisure activities within the housing units consist of board games, cards, and television viewing from 8:00 am to 10:30 pm. In addition, detainees may attend volunteer-led group activities and religious services.

ODO was informed there have been no detainee suicides, suicide attempts, or suicide watches at EHDC; however, in the event of a suicide watch or attempt, comprehensive local policies are in place, which exceeds NDS requirements. All staff receives initial and ongoing suicide prevention training, which includes the identification of suicide risk factors, recognizing the signs of suicidal thinking and behavior, referral procedures, suicide prevention techniques, and responding to an in-progress suicide attempt. ODO verified detainees are screened for suicide risk during the intake process.

EHDC has policies and procedures in place to address prevention, intervention, and handling of alleged sexual abuse and sexual assault incidents. Information concerning Sexual Abuse and Assault Prevention and Intervention (SAAPI) is posted in English and Spanish in all housing units and common areas, and is included in the facility handbook. Review of (b)(7)(e) training files confirmed EHDC staff completed SAAPI training. According to EHDC’s SAAPI policy, EHDC management has zero tolerance towards all forms of sexual abuse and sexual harassment. Additionally, the EHDC’s intake questionnaire form inquires if inmates/detainees have ever been victims of sexual abuse or assault. For any affirmative answers, EHDC sends those detainees to the McAllen Medical Center for an examination. ODO reviewed EHDC policy and confirmed written procedures are in place for reporting incidents through the chain-of-command and ICE

ERO supervisory staff. There were no incidents of alleged sexual abuse or sexual assault at EHDC reported during calendar year 2012.

ODO was informed by facility and ERO staff that ICE detainees are not placed on administrative or disciplinary segregation; therefore, there is no special management unit for this purpose. If a need arose to place a detainee in administrative or disciplinary segregation, EHDC staff stated arrangements would be made to transfer the detainee to the Port Isabel Detention Center.

An ERO Supervisory Detention and Deportation Officer (SDDO) and Supervisory Immigration Enforcement Agent (SIEA) make monthly visits to meet with facility management and to observe conditions of confinement. DOs and IEAs conduct two scheduled visits per week with detainees to address concerns and requests, and conduct several unscheduled visits throughout the week. ODO reviewed the ICE Facility Liaison Visit Checklists, which are used to document the visits. ODO verified ICE visitation schedules are posted in each housing unit. EHDC has written procedures for detainees to submit written questions, requests, or concerns to ICE. Detainee request forms are available in the housing units. ODO reviewed the electronic detainee request log from October 2012 through February 13, 2013, and confirmed all requests were logged and responded to within 72 hours of receipt

Review of facility policy confirmed it addresses regular visits, legal/special visits, visitation rules, dress requirements, items permitted and not permitted for visitors, searches of visitors and vehicles, and termination of visits. Visitation hours for detainees are on Monday, Wednesday, Friday, and Sunday from 3:30 to 6:30 pm. Detainees are allowed two 30-minute general visits per week. The visitation period may be extended for visitors who have traveled long distances. Legal visitation is allowed seven days a week, including holidays, and hours outside the established hours for legal visitation can be extended upon request. Separate logbooks are maintained for general and legal visitors.

There have been no use of force incidents involving detainees since November 2011, when EHDC began housing ICE detainees. A review of (b)(7) training records confirmed completion of initial and annual use of force training. EHDC does not use electro muscular disruption devices. All staff is trained and certified in oleoresin capsicum (OC) spray; (b)(7)e

(b)(7)e

Detainees have reasonable and equitable access to telephones at EHDC. The number of telephones in the general housing areas meets the requirements of the standard. The telephone availability ratio is approximately eight detainees per telephone. Detainees are given emergency messages and are allowed to return emergency telephone calls without delay. Review of the service logs confirmed facility personnel conduct daily inspections of telephones and respond to maintenance issues within 24 hours. All telephones in detainee housing areas were tested and found to be in good working order, and no complaints were expressed by detainees about telephone services. Notification that telephone calls are subject to monitoring is posted on each telephone and in the facility-specific handbook. Procedures for telephone use and obtaining an unmonitored call are addressed in the handbook and posted in each housing unit. Upon a written request, EHDC accommodates detainees with a private telephone in the front office to place legal calls.

INSPECTION PROCESS

ODO inspections evaluate the welfare, safety, and living conditions of detainees. ODO primarily focuses on areas of noncompliance with the ICE NDS or the ICE Performance-Based National Detention Standards, as applicable. The NDS apply to EHDC. In addition, ODO may focus its inspection based on detention management information provided by ERO Headquarters and ERO field offices, and on issues of high priority or interest to ICE executive management.

ODO reviewed the processes employed at EHDC to determine compliance with current policies and detention standards. Prior to the inspection, ODO collected and analyzed relevant allegations and detainee information from multiple ICE databases including the Joint Integrity Case Management System, the ENFORCE Alien Booking Module, and the ENFORCE Alien Removal Module. ODO also gathered facility facts and inspection-related information from ERO Headquarters staff to prepare for the site visit at EHDC.

REPORT ORGANIZATION

This report documents inspection results, serves as an official record, and is intended to provide ICE and detention facility management with a comprehensive evaluation of compliance with policies and detention standards. It summarizes those NDS that ODO found deficient in at least one aspect of the standard. ODO reports convey information to best enable prompt corrective actions and to assist in the on-going process of incorporating best practices in nationwide detention facility operations.

OPR defines a deficiency as a violation of written policy that can be specifically linked to the NDS, ICE policy, or operational procedure. When possible, the report includes contextual and quantitative information relevant to the cited standard. Deficiencies are highlighted in bold throughout the report and are encoded sequentially according to a detention standard designator.

Comments and questions regarding the report findings should be forwarded to the Deputy Division Director, OPR ODO.

INSPECTION TEAM MEMBERS

(b)(6), (b)(7)c

Special Agent (Team Leader)	ODO, Atlanta
Special Agent	ODO, Houston
Special Agent	ODO, Houston
Contract Inspector	Creative Corrections
Contract Inspector	Creative Corrections
Contract Inspector	Creative Corrections

OPERATIONAL ENVIRONMENT

INTERNAL RELATIONS

ODO interviewed supervisory ICE and EHDC staff, including the Warden, (b)(7)e Deputy Warden, a Major, an SDDO, and an SIEA. All stated the working relationship between EHDC and ICE personnel is excellent. EHDC and ICE staff stated morale is high, and the working conditions are adequate to accomplish all required duties. No vacancies exist at the facility. The Warden stated he regularly observes ICE staff visiting detainees in the housing units throughout the week, communicating with detainees and addressing detainee concerns.

Although ICE does not have a permanent staff assigned to EHDC, ICE staff stated they have the necessary resources to carry out their duties and responsibilities. The SDDO and SIEA both stated complaints received from detainees are minimal, because of their short duration of stay at EHDC. During interviews with staff, it was determined EHDC personnel have not received any formal training on the ICE NDS.

DETAINEE RELATIONS

ODO interviewed 24 randomly-selected ICE detainees (16 male and eight female) at EHDC to assess detention conditions at EHDC. No complaints were received regarding issuance of hygiene supplies, food service, medical care, recreation, access to religious services and telephones, visitation, or the law library. All detainees stated they did not know their DO. An ERO schedule is posted in each of the housing units; however, the names of the DOs are not posted on the schedules in the housing units.

One female complained about having difficulty reading because her eyeglasses were stored with her personal property when she was initially admitted to the facility. EHDC staff immediately resolved the issue by retrieving and providing the eyeglasses to the detainee when ODO brought this issue to their attention.

ICE NATIONAL DETENTION STANDARDS

ODO reviewed a total of 16 NDS and found EHDC fully compliant with the following 13 standards:

- Access to Legal Material
- Admission and Release
- Detainee Classification System
- Detainee Handbook
- Detainee Transfers
- Disciplinary Policy
- Food Service
- Funds and Personal Property
- Recreation
- Suicide Prevention and Intervention
- Telephone Access
- Use of Force
- Visitation

As these 13 standards were compliant at the time of the review, a synopsis for these standards is not prepared for this report.

ODO found deficiencies in the following three standards:

- Environmental Health and Safety
- Medical Care
- Staff-Detainee Communication

Findings for each of these standards are presented in the remainder of this report.

ENVIRONMENTAL HEALTH AND SAFETY (EH&S)

ODO reviewed the Environmental Health and Safety standard at EHDC to determine if the facility maintains high standards of cleanliness and sanitation, safe work practices, and control of hazardous materials and substances, in accordance with the ICE NDS. ODO toured the facility, interviewed staff, and reviewed policies, fire prevention and control procedures, and documentation of inspections, hazardous chemical management, pest control, and generator testing.

The facility has a system for storing, issuing, and maintaining accountability for hazardous materials. ODO verified hazardous substances were safely stored and controlled in all areas, and MSDS were available. Inspection confirmed running inventories are maintained. A master index of hazardous substances and a master file of MSDS is maintained, to include emergency telephone numbers and documentation of semi-annual reviews. A letter dated May 23, 2012, states the EHDC master index and fire emergency plan were forwarded to the city fire department.

ODO verified monthly fire drills were conducted on each shift, and documentation is on file. Reports for water and pest control were current and readily available. Internal testing of the facility's emergency generators is conducted weekly for 60 minutes; however, quarterly testing and servicing by an external generator servicing company is not conducted (**Deficiency EH&S-1**). Routine testing and servicing of generators by a professional service company ensures operability in the event of a power failure.

Barbering and hair care is conducted in a designated area in Unit 3. Inspection found the barbershop was spacious and clean. The shop is equipped with hot and cold water, shelving, a locked closet, barber chair, covered metal trash container, clippers, disinfectant solution, and other necessary equipment for hair care. Sanitation regulations are posted, and an ample supply of laundered towels was available.

Sanitation levels in food service, the medical clinic, admission and release areas, and male detainee housing units were observed to be high; however, sanitation concerns were noted in the female housing units. In female housing unit 8-A, ODO observed dirt and trash in corners, soap scum in the showers, and dirty sink/toilet combination fixtures. In female housing units 7A-2, 7B-2, 9A-2, and 9A-3, ODO observed graffiti on the walls and beverage stains on the floors in sleeping areas. Peeling paint was observed on partitions, walls, and tables; and floor corners were grimy and dusty. In the showers, ODO observed hair in drains, rust, soap scum, and mildew. Sink/toilet combination fixtures were dirty and toilet paper littered the floor. ODO notes these conditions, particularly mildew, pose a health hazard. Prior to completion of the review, the walls were painted, and all soap scum and mildew on the sinks, toilets, and shower fixtures was removed. It is recommended that steps be taken to ensure on-going measures are taken to ensure proper sanitation is maintained in the female housing units, commensurate with that maintained elsewhere in the facility.

ODO confirmed needles and sharps are strictly accounted for and controlled. Review of inventories confirmed their accuracy. Bio-hazardous medical waste is handled properly within the facility and removed by a licensed transporter.

STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS

DEFICIENCY EH&S-1

In accordance with the ICE NDS, Environmental Health and Safety, section (III)(O), the FOD must ensure power generators will be tested at least every two weeks. Other emergency equipment and systems will undergo quarterly testing, with follow-up repairs or replacement as necessary.

The biweekly test of the emergency electrical generator will last one hour. During that time, the oil, water, hoses and belts will be inspected for mechanical readiness to perform in an emergency situation. The emergency generator will also receive quarterly testing and servicing from an external generator-service company. Among other things, the technicians will check starting battery voltage, generator voltage and amperage output.

MEDICAL CARE (MC)

ODO reviewed the Medical Care standard at EHDC to determine if detainees have access to healthcare and emergency services to meet health needs in a timely manner, in accordance with the ICE NDS. ODO toured the clinic, reviewed policies and procedures, verified medical staff credentials, observed a physical examination, and interviewed the HSA, the Director of Nursing, and local ICE staff. In addition, ODO examined 30 detainee medical records. There have been no detainee deaths at EHDC.

EHDC currently holds no national accreditations; however, the facility complies with Texas State Jail Commission standards. Medical services are provided by CHC. The clinic is open 24 hours a day, seven days a week. Corporate clinical oversight is provided by CHC's Chief Medical Officer and Chief Mental Health Officer. The administrative health authority for EHDC is the HSA, and the CD is the designated clinical medical authority. The CD is on-site six hours on Tuesdays and Thursdays. The staffing plan also includes an NP, on-site eight hours on Wednesdays. The CD and NP share on-call responsibilities. Mental health services are provided by a licensed professional counselor, who is on-call for mental health issues. These positions are augmented by the Director of Nursing, an additional registered nurse, (b)(7)e licensed vocational nurses, (b)(7)e medical assistants, (b)(7)e medical records clerks, and (b)(7) pharmacy technician. All personnel are employees of CHC, and ODO verified all professional licenses were present and primary source verified. There were (b)(7)e vacancies at the time of the review: (b)(7) full-time and (b)(7)e part-time medical assistant. The HSA stated he is actively recruiting to fill these positions. ODO finds staffing sufficient to provide basic medical services to all detainees housed at EHDC. Documentation supports the staffing plan is reviewed annually. The HSA informed ODO, all healthcare staff speaks Spanish; however, in the rare event translation services were needed for a language other than Spanish, a telephone interpretation service is used. EHDC does not charge detainees co-pays or fees for health care services or medications.

Dental services are provided off-site by a local dentist. Ambulance service for emergencies is provided by the City of Hidalgo, approximately five miles away. EHDC uses McAllen Medical Center, approximately 20 miles away, for medical services beyond the scope of care available at EHDC, and Rio Grande Regional Hospital for mental health care.

EHDC has an infirmary consisting of four medical observation rooms, all of which have negative airflow for TB isolation, and one mental health room used for suicide watch. Clinic space consists of two examination/treatment rooms, a break room, nurses' station, medication room, lab draw room, supply room, medical records room, two waiting rooms, one inmate/detainee restroom, one staff restroom, and one administrative office. Correctional supervision is provided by detention officers. Though the examination rooms afford privacy, ODO observed a physical examination during which detention staff remained in the room (**Deficiency MC-1**). The NDS states health examinations and treatment must be provided in private, and ODO notes local policy states, "patient clinical encounters shall take place in the medical unit under conditions of privacy without being observed or overheard by security staff." When discussed with the HSA, he acknowledged it is common practice for officers to be present during medical encounters. The HSA immediately issued instructions for detention staff to comply with the policy and remain outside examination rooms.

Nursing staff conduct the medical and mental health intake screenings in a private room in the intake area. Although the HSA stated EHDC only accepts detainees with stable or low level medical acuity, ODO noted detainees identified with medication needs or medical issues were immediately referred to a provider for follow-up. Essential medications were ordered and provided. Physical examinations are completed by registered nurses and reviewed by a provider in accordance with the NDS and National Commission on Correctional Health Care requirements. ODO verified registered nurses received appropriate training in performing physical examinations. Full compliance with intake screening and physical examination components of the standard was confirmed by review of 30 detainee medical records. ODO notes physical examinations were performed between seven and 13 days of detainee admission.

The medical record review confirmed every male detainee received a chest x-ray (CXR) to screen for the presence of TB at the Rio Grande Valley staging facility at Port Isabel prior to transfer to EHDC. Females received a purified protein derivative (PPD) skin test on admission to EHDC. Females are not released to the general population unless the PPD is negative. If the PPD is positive, a CXR is performed that same day. Review of seven suspect TB cases confirmed all were managed according to NDS requirements. ODO cites as a best practice the partnership between the facility and county health department. EHDC reports suspect TB cases to the health department as required and thereafter, health department staff visits the patients on-site and assists in the management of the cases. In addition, the health department has provided training to EHDC staff.

ODO cites as a second best practice the “Daily Health Services Shift Report” used by medical staff to ensure information flow between the three shifts. Included on the report are arriving and departing detainees and inmates, required glucometer checks, sick call numbers, the medical isolation roster, emergency room transfers, and other information as appropriate; for example, sputum collections needed or other treatments ordered. This information supports sharing of information and continuity of care, and is a consolidated source of important data.

Detainees request health care services by completing written medical requests available in English and Spanish, and depositing them in designated locked boxes. Medical staff retrieves the requests once daily, five days a week. A retrieval log documents when they are picked up, supporting accountability. Sick call requests are dated and triaged upon receipt. The medical record review reflected same or next day triage, with medical requests addressed and completed in a timely manner as appropriate to the nature of the complaint. Sick call is conducted on a daily basis during the week and on weekends upon verbal request.

A review of all healthcare and (b)(7)e detention staff training records confirmed all healthcare staff had current certification in cardiopulmonary resuscitation (CPR). This training includes first aid, use of an automated external defibrillator, as well as CPR. (b)(7)e of the (b)(7)e detention staff files had no documentation of CPR training (**Deficiency MC-2**). According to the Warden and the Training Manager, who had only been in that position for three months, arrangements had already been made to provide the training to all staff not currently certified.

STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS

DEFICIENCY MC-1

In accordance with the ICE NDS, Medical Care, section (III)(B), the FOD must ensure adequate space and equipment will be furnished in all facilities so that all detainees may be provided basic health examinations and treatment in private.

DEFICIENCY MC-2

In accordance with the ICE NDS, Medical Care, section (III)(H)(2), the FOD must ensure, in each detention facility, the designated health authority and the OIC will determine the availability and placement of first aid kits consistent with the American Correctional Association requirements.

Detention staff will be trained to respond to health-related emergencies within a 4-minute response time. This training will be provided by a responsible medical authority in cooperation with the OIC and will include the following [among others]:

2. The administration of first aid and cardiopulmonary resuscitation (CPR);

Whenever an officer is unsure whether a detainee requires emergency care by a health care provider, the officer should contact a health care provider or an on-duty supervisor immediately.

STAFF-DETAINEE COMMUNICATION (SDC)

ODO reviewed the Staff-Detainee Communication standard at EHDC to determine if procedures are in place to allow formal and informal contact between detainees and key ICE and facility staff; and if ICE detainees are able to submit written requests to ICE staff and receive responses in a timely manner, in accordance with the ICE NDS. ODO interviewed ICE and EHDC staff and detainees; and reviewed the facility liaison visit checklists, housing unit postings, the ICE detainee request logbook, and EHDC housing unit logbooks.

The SDDO and SIEA make monthly visits to meet with facility management and to observe conditions of confinement. DOs and IEAs conduct two scheduled visits and several unscheduled visits per week with detainees to address concerns and requests. According to EHDC staff, the Assistant Field Office Director and Deputy Field Office Director visit the facility annually; however, review of the logbooks did not support that ERO department heads, including the FOD, conduct regular unscheduled visits to EHDC's housing units, food service area, recreation areas, and the medical area (**Deficiency SDC-1**).

ODO reviewed ICE Facility Liaison Visit Checklists generated over the past six months, which are used to document ICE's visits, and all were filled out correctly and verified visits by ICE staff. ODO verified ICE visitation schedules are posted in each housing unit; however, names of DOs are not posted on the schedule. EHDC has written procedures for detainees to submit written questions, requests, or concerns to ICE. Detainee request forms are available in the housing units. ODO reviewed the electronic detainee request log from October 2012 through February 13, 2013, and confirmed all requests were logged and responded to within 72 hours of receipt.

During interviews of ICE staff, ODO confirmed ICE staff does not conduct telephone serviceability checks. Serviceability checks, which include conducting random calls to pre-programmed numbers posted on the pro bono/consulate list, are to be conducted weekly for all telephones in the detainee housing units (**Deficiency SDC-2**). ODO tested all telephones in the detainee housing areas, and found them to be in good working order. Detainees expressed no complaints about telephone services.

STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS

DEFICIENCY SDC-1

In accordance with the ICE NDS, Staff-Detainee Communication, section (III)(A)(1), the FOD must ensure policy and procedures shall be in place to ensure and document that the ICE Officer in Charge (OIC), the Assistant Officer in Charge (AOIC) and designated department heads conduct regular unannounced (not scheduled) visits to the facility's living and activity areas to encourage informal communication between staff and detainees and informally observing living and working conditions. These unannounced visits shall include but not be limited to:

- a. Housing Units;
- b. Food Service preferably during the lunch meal;
- c. Recreation Area;

- d. Special Management Units (Administrative and Disciplinary Segregation); and Infirmary rooms

DEFICIENCY SDC-2

In accordance with the ICE Detainee Telephone Services Memorandum, dated April 6, 2007, the FOD must ensure, effective immediately, concurrent with staff/detainee communications visits, ICE staff will verify serviceability of all telephones in detainee housing units by conducting random calls to pre-programmed numbers posted on the pro bono/consulate list. ICE staff will also interview a sampling of detainees and review written detainee complaints regarding detainee telephone access. The Field Office Director (FOD) shall ensure that all phones in all applicable facilities are tested on a weekly basis.

Each serviceability test shall be documented using the attached [Telephone Serviceability Worksheet] form. The field office shall maintain forms in a retrievable format, organized by month, for a three-year period.