

# QUALITY ASSURANCE REVIEW

Willacy County Correctional Center  
Raymondville, Texas  
January 12 – 14, 2016



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## Executive Summary

The purpose of this Quality Assurance Review (QAR) is to provide the United States Marshal Service (USMS), Prisoner Operations Division (POD) with a summary report of the Willacy County Regional Detention Facility (WCCC), located in Raymondville, Texas. The QAR utilizes the Federal Performance-Based Detention Standards (FPBDS) for non-federal detention facilities. The FPBDS are designed to ensure the safe, secure and humane confinement of USMS detainees and to provide a document indicating a level of performance. The overall facility operation received a rating of **Deficient**.

The QAR was conducted by contract corrections experts from Correctional Management and Communications Group, LLC and USMS Public Health Service (PHS) staff. During the three-day QAR, the team reviewed relevant policies, procedures and documentation related to the operations of WCCC housing USMS detainees. The team conducted numerous interviews with correctional officers and supervisors, management and other facility staff. The team was present in the facility during all three shifts to observe operations.

Staff were professional and responsive to the review team's requests for information. However, interviews revealed staff read and signed they understood their post orders, but could not articulate their duties and responsibilities. Detainees were interviewed to determine their perceptions regarding personal treatment, safety of their environment and facility operations. The majority of the detainees are satisfied with their living conditions while some expressed a concern with medical responsiveness. All detainees interviewed conveyed they feel safe in the facility.

The QAR identified deficiencies in functional areas: Administration and Management; Security and Control; Food Service; Safety and Sanitation; and Services and Programs. There was also one repeat finding in Security and Control from the 2015 QAR.

A close-out briefing was conducted on Thursday, January 14, 2016. Attending closeout was (b) (7)(C), Program Manager, Office of Detention Standards and Compliance, POD, USMS; (b) (7)(C), Warden; Rolando Trevino, Deputy Warden; (b) (7)(C), Chief of Security; (b) (7)(C), ACA /Quality Assurance Manager; (b) (7)(C), Health Service Administrator; (b) (7)(C), Director of Nursing; (b) (7)(C), Classification Manager; (b) (7)(C), Human Resource Manager and QAR team members.



### Facility Review Team

Facility Name	Name	Title
Willacy County Regional Detention Facility	(b) (7)(C)	Lead Reviewer and SME - Administration and Management Services and Programs; and Facility Facts.  SME – Health Care  SME – Security and Control  SME – Food Service  SME – Safety and Sanitation

### USMS Personnel

Name	Title
(b) (7)(C)	Chief, Office Detention Standards & Compliance, Prisoner Operations Division, USMS  Program Manager, Detention Standards & Compliance, Prisoner Operation Division, USMS

### Facility Information

Located in Raymondville, Texas, WCCC is owned by Willacy County and has been privately operated by Management and Training Corporation (MTC) since 2004. The facility's rated capacity is 610. There are 522 adult male beds and 88 adult female beds. The USMS Southern District of Texas, with offices in Brownville, Texas and McAllen, Texas is the responsible jurisdiction for all detainees housed at the WCCC. The Brownville USMS office and federal court house are approximately 46 miles from the facility and the McAllen USMS office and federal court house are approximately 55 miles from the facility.

WCCC entered into its current contract (ODT-9-C-004) with the USMS on January 1, 2010 to house pre-trial detainees. The current rate is \$96.30 per day, including routine medical care. Guard services to transport detainees are reimbursed at the rate of \$28.11 per hour under the contract and WCCC is not under any court order and has no pending litigation by staff or detainees.





The facility was initially accredited by the American Correction Association (ACA) in January 2006 and received its most recent reaccreditation in February 2015. The facility was also accredited by National Commission on Correctional Health Care (NCCHC) in March 2014 and received a PREA Certification in November 2015. MTC's regional corporate office staff last conducted an annual assessment of security operations, practices and procedures in June 2015.

The facility has open bay style housing with a day room area, common toilets and showers for general population detainees and 40 special housing unit (SHU) beds for administrative and disciplinary housing. There are six handicapped accessible cell available in the general population housing units and two in the unit labeled Medical Isolation. The facility's video surveillance system has 84 cameras throughout the facility.

On the first day of the QAR there was a total count of 573 USMS detainees, 485 males and 88 females. Spanish is the major non-English language spoken by 90% of the detainee population. 200 facility staff also speaks Spanish. Detainees' average length of stay is 104 days.

#### Staffing By Functional Areas

Functional Area	# of Authorized Staff	# of Staff on Board	# of Authorized Subcontract Staff	# of Subcontract Staff
A- Administration and Management	14	14	0	0
B- HealthCare	10	10	2	2
C- Security and Control	(b) (7)(E)			
D- Food Service	25	18	0	0
F- Safety and Sanitation	1	1	0	0
G- Services and Programs	19	17	3	2
Total	213	197	5	4

#### Functional Area Ratings

**Acceptable** - Adequate resources, policies, procedures, and processes are in place and working to achieve the standard; or while the overall functional area is operating in an acceptable manner, one or more subparts may be deficient and require additional resources, policy clarifications, or changes in processes or procedures to fully achieve the standard.



**Deficient** - Adequate resources, policies, procedures, or processes are either not in place or not sufficient.

**Repeat Deficiency** - This review and the immediate prior review revealed a similar finding that adequate resources, policies, procedures, or processes are either not in place or not sufficient.

**At-Risk** - The basic requirements of the function are not being met due to problems identified with resources, policies, procedures, or processes.

**Not Applicable** - Standard has no relevance for the facility.

### Overall Performance Ratings

**Excellent** - The level of performance exceeds the requirements of the FPBDS with exceptional internal controls. Policies and procedures for achieving the program standards are documented and specific to the mission of the facility; the policies and procedures are communicated to the staff; fully implemented; and the desired outcome is achieved. Key Findings and Deficiencies are non-existent.

**Good** - The level of performance exceeds the requirements of the FPBDS. Internal controls limit Key Findings and Deficiencies. Policies and procedures for achieving the program standards are documented and specific to the mission of the facility, the policies and procedures are communicated to the staff, implemented and the desired outcome is achieved. Key Findings and or Deficiencies are minimal and do not affect the performance of the facility.

**Acceptable** - The program is meeting the requirements of the FPBDS. Lapses in internal controls are minimal. Deficiencies do not affect the performance of the facility.

**Deficient** - Deficiencies are the result of weak internal controls in one or more areas.

**At-Risk** - Operation of the program is impaired to the point that the facility is unable to accomplish its mission. The program is unable to meet the requirements of the FPBDS and is unlikely to meet those requirements without immediate corrective action to ensure the safety and security of both staff and detainees.

### Compliance with FBPD Standards - By Functional Area

Functional Area	Acceptable	Deficient	Repeat Deficiency	At-Risk	Not Applicable
A - Administration and Management	11				



Functional Area	Acceptable	Deficient	Repeat Deficiency	At-Risk	Not Applicable
B- HealthCare	6				
C- Security and Control	9	1			
D- Food Service	4	1			
F- Safety and Sanitation	3	2			
G- Services and Programs	9				
Total	42	4	0	0	0

### Deficient Areas

#### Administration and Management

(A.1.2): Written policies and procedures are not communicated to employees. 4-ALDF 7D-06

#### Security and Control

(C.2.2): The facility does not adhere to a system of strict accountability when physically counting detainees. 4-ALDF 2A-17 (**Repeat**)

(C.5.5): Access to the weapons storage space is not restricted to authorized persons only.  
4-ALDF 2B-05

(C.7.3): Correctional officers are not able to articulate the duties and responsibilities identified by their post orders. 4-ALDF 2A-04

(C.10.13): MTC Transportation crews consist of a minimum of two armed officers; however the officer's firearms are not loaded for duty carry.

#### Food Service

(D.3.4): During preparation (Cooking, Freezing, Reheating) unpacked food is not protected from environmental sources of contamination in a manner compliant with U.S. or State Food Code 2009 U.S. Food Code 3-4, 3-5

(D.4.1): Utensils and food contact surfaces are not designed and constructed of materials compliant with U. S. Food Service Code 2009 U.S. Food Code 4-1, 4-2



**(D.4.2):** Ware washing machines (dishwasher) are not operating within design specifications and or in a manner compliant with the U.S. or State Food Code. 2009 U.S. Food Code: 4-204.113, 4-204.115, 4-204.117, 4-204.118, 4204.119, 4-501.110, 4-501.112, 4-501.113, 4-501.114, 4-501.116.

**(D.4.9):** Food service equipment (tray drying racks) are not cleaned, maintained in good repair and in a manner compliant with U.S. Food Code or State Food Code 2009 U.S. Food Code 4-501.11, 4-501.12, 4-501.14

### **Safety and Sanitation**

**(F.1.8):** Fire & smoke detection systems are not maintained in accordance with National Fire Protection Association Code.

**(F.1.12):** Facility furnishings do not meet fire safety performance requirements. 4-ALDF 1C-10

**(F.1.13):** Flammable, toxic and caustic materials are not maintained in accordance with OSHA regulations. 4-ALDF 1C-11

**(F.1.13a):** Flammable, toxic and caustic materials are accessible to detainees. 4-ALDF 1C-11

**(F.2.1):** The facility is not kept clean and in good repair by sanitation and maintenance programs which address all facility areas. 4-ALDF 1A-04

**(F.2.8d):** Noise levels in detainee housing exceeded the 45dBA (A Scale) at night.

**(F.4.4):** Articles for maintaining personal hygiene items were not available to all detainees. 4-ALDF 4B-06

**(F.5.1):** Facility physical plant presents a hazard to staff, detainees or visitors.

### **Service and Programs**

**(G.2.2a):** Detainees are not able to make confidential telephonic contact with their legal counsel. 4-ALDF 6A-02

**(G.9.2):** Although grievance forms are readily available to detainees, the forms are not the required three-copy forms.





## Incidents

	Grand Total	Total with a Weapon
Number of inmate assaults on staff in past 12 months:	5	0
Number of inmate assaults on other inmates in the past 12 months:	19	0
Number of staff assaults on inmates in the past 12 months:	0	0
Number of assaults on visitors in the past 12 months:	0	0
Number of attempted suicides in the past 12 months:	3	0
Number of completed suicides in the past 12 months:	0	0
Number of attempted escapes in the past 12 months:	0	0
Number of completed escapes in the past 12 months:	0	0
*Number of detainee sexual assaults in the past 12 months:	16	0

\* 15 determined to be unsubstantiated, 1 pending USMS review

## Capacity

Capacity Metrics: Facility	
Total Capacity:	610
Adult Male Capacity:	522
Adult Female Capacity:	88
Total Juvenile Capacity:	0
Juvenile Male Capacity:	0
Juvenile Female Capacity:	0
Disabled Capacity:	8
Description for Disabled Capacity:	Handicapped Cells and Showers

Capacity Metrics: USMS	Maximum	Minimum
Total Capacity:		610
Adult Male Capacity:		522
Adult Female Capacity:		88
Total Juvenile Capacity:		0
Juvenile Male Capacity:		0
Juvenile Female Capacity:		0
Disabled Capacity:		8
Description for Disabled Capacity:	Handicapped Cells and Showers	

Capacity Metrics: ICE	Maximum	Minimum
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Capacity Metrics: ICE	Maximum	Minimum
Total Capacity:		0
Adult Male Capacity:		0
Adult Female Capacity:		0
Total Juvenile Capacity:		0
Juvenile Male Capacity:		0
Juvenile Female Capacity:		0
Disabled Capacity:		0
Description for Disabled Capacity:	None	

## General Overview by Functional Area

### A - Administration and Management

### Acceptable

WCCC has institutional policy manuals, separate post orders and operation procedural manuals located in departmental binders throughout the facility. Policies and procedures were reviewed and approved on May 26, 2015; this corrected the 2015 QAR finding. Interviews with facility staff revealed WCCC staff not able to identify how they would access policies and procedures which are relevant to their posts.

Policies and procedures exist for release and transfer of USMS detainee records. The Admissions and Orientation (A&O) program ensures detainees are immediately screened and interviewed upon arrival. The Intake process includes; fingerprinting, photographs, showers and a clothing exchange. Within 72 hours of arrival a formal orientation session is provided prior to the detainee being placed in a general population housing unit. Detainees are provided the opportunity to ask questions or to get clarification about information presented. New intakes are required to sign documents stating they were issued a handbook and received orientation. Detainees are provided information on transportation options for their visitors; the corrected information in the detainee handbook and corrects the 2015 finding. Newly received detainees who do not speak English are referred to the Classification Manager who will seek assistance on the internet, use the language line, or assign designated staff to provide interpretive services. The detainee handbook is available in English and Spanish. Observation of receiving and discharge revealed a checklist for screening included questions for sexual violence and medical history. Procedures for sexual abuse/assault are provided in the detainee handbook and at orientation. PREA information is in the handbook and posted on all housing unit bulletin boards.

Review of detainee records revealed they are centralized, organized, and contained all relevant information and complies with privacy and confidentiality procedures. Detainee personal property and monies are recorded, stored and returned to detainees upon release from the facility. A review of the property storage room to check personal property inventories revealed accurate inventories and a tracking system is in place. Monies are maintained in a separate safe and



received. Intake staff interviews and observations revealed detainees are only released or transferred with proper notification from the USMS.

WCCC has designated handicapped-accessible cells to accommodate detainees with physical disabilities. Handicapped-accessible housing is accessible to wheelchair-bound and limited-mobility detainees. Showers are equipped with support rails and wide space for entry and exit. Procedures exist for staff to assist disabled detainees in case of an emergency. The Health Services department has one designated handicapped-accessible cell.

Detainee interviews and a review of the grievance log revealed no concerns regarding discrimination. Staff are trained annually regarding the fair treatment of detainees and receive the code of ethics during orientation and in-service training. The Warden, Associate Warden, Chief of Security, Classification Manager and other designated department heads routinely visit detainee living quarters and facility program areas and documented in housing unit control logs.

Documentation was provided of

An annual comprehensive staffing analysis is conducted to assess and monitor staffing requirements. Prior to entering on duty, new employees, contractors, and volunteers are subjected to a physical examination and background investigation. An interview with Human Resource Manager and review of employee records confirmed WCCC conducts employee periodic post-hire background investigations. Drug screenings, verification of citizenship, pre-employment interviews and reference and credit checks are conducted. The employee handbook provides written procedures for staff to report allegations of misconduct.

WCCC's Training department has an established training program that provides each new employee with an orientation prior to assuming duties. A review of the Training Manager's training record revealed he's well qualified and has received specialized training and certifications in training-for trainers. The training plan requires pre-service and in-service training consists of at least 120 or 40 hours each respectively which includes self-defense, use of force, PREA, suicide prevention, and cardiopulmonary resuscitation (CPR). The training plan also requires the management and supervisory staff receive at least 40 hours of management and supervisory training during their first year of employment and 24 hours of management training each year thereafter. A review of management training files revealed training is documented as required.

The training files are well maintained and training documentation is readily available for review. All new professional, health care, support, and contractors who have daily contact with detainees must complete a 40-hour training core curriculum.

There are written emergency plans for riots, hunger strikes, disturbances, escapes and hostage situations and staff work stoppage. Memorandums of Understandings (MOU) are in place for mutual aid and support in the event of an emergency.



## **B – HealthCare**

## **Acceptable**

Review of the health services program at Willacy County Correctional Center was based on interviews with health services staff, direct observations of health services operations, and review of detainee medical records. Health services are provided by MTC Medical. The health services policies and local operating procedures are up to date and reviewed by staff as needed. The designated health authority is the health services administrator; however, final clinical judgments rest with the facility physician.

The health services unit has eight negative pressure rooms for detainees who require clearance from airborne and droplet borne pathogens. Sick call is conducted daily. A nurse triages detainees who report to sick call in a setting conducive to protecting the privacy of the detainee. Nurses use clinically appropriate standing protocols to treat the most common sick call requests. Requests not able to be met by the standing protocols or which require provider review are scheduled for an appointment with a provider. Detainees in disciplinary segregation or administrative detention access health services by informing the correctional officer or by requesting assistance during medical rounds in segregation which are conducted on a daily basis. There is a grievance process in place for detainees to seek redress for medical issues.

Detainees with mental health issues and concerns have access to mental health professionals. Dental care is administered by a dentist and a dental hygienist. Medical records are maintained and located in a secure medical filing room. USMS detainee medical records were reviewed to determine compliance with national standards and policy. The review revealed detainees are screened by health services staff within hours of arrival to the facility. All prisoners entering the facility without prior screening for tuberculosis are tested with the purified protein derivative (PPD) test within 72 hours of arrival at the facility. Chest x-rays are provided as clinically indicated. Health appraisals by qualified health services personnel are performed within the 14 day standard. Detainees who require chronic care follow-up are appropriately identified and referred to a chronic care clinic. Follow-ups are ordered and conducted as clinically indicated. Healthcare information is provided to detainees at intake and as necessary depending on their clinical diagnoses. Intake handbooks are available in English and Spanish.

Personnel files for healthcare staff were reviewed and found to be up to date with applicable education documentation, state and federal licensure to meet facility position description requirements. Records of continuing education, to include correctional environment training, suicide prevention training, and CPR certification were also in the personnel files.

Medications are delivered to detainees via pill line. The identity of the detainee is verified by the detainee's identification card and checked using two identifiers. Staff examine closely each prisoner to make sure medications were swallowed. A detainee with a scheduled medication is required to appear in pill line and must refuse any medications in person.



The suicide prevention program was reviewed. All staff receive training on suicide prevention during orientation for new employees and on an annual basis. Training materials contain information on the warning signs and symptoms of suicidal behavior and appropriate staff response. Detainees who are placed on suicide watch are placed in the Special Housing Unit and are monitored by direct staff observation.

## **C - Security and Control**

**Acceptable**

Review of the Security and Control program included staff interviews, review of the facility's policy and procedures, and direct observation of security operations. The facility central control is equipped with video surveillance monitors, an electrical locking system, emergency keys, a fire alarm system, and radio communications. Central control is staffed 24 hours a day, seven days a week. Correctional officers conduct security checks of detainees every 30 minutes. All movement in and out of the units is controlled by correctional officers. Unusual events are documented on all shifts. Correctional officers conduct daily security inspections of all security features of assigned housing units on each shift. Results of these inspections are documented on the Facility Upkeep Inspection log. Correctional supervisors review permanent logs on each shift however they're not conducting patrols and inspections of unoccupied areas at least weekly.

WCCC uses the Offender Data Base (ODS), a computer data system to document detainee's admission and release from the facility. The facility conducts nine counts within a 24-hour period. Facility policy and procedures include accountability for counting detainees outside of their assigned living areas. During facility count, staff in the intake area were observed not following count policy which requires all detainee movement to cease and two officers to complete an alternating over-watch count of the detainees in the out-count area. This is a repeat of the 2015 QAR deficiency.

The facility follows written procedures for searching the facility and detainees. Searches are performed on a routine basis and during all shifts. The facility has implemented procedures which govern the following: chain of custody of physical evidence; handling of physical evidence; location and storage requirements of physical evidence; procedures for the final disposition of physical evidence.

WCCC policy and procedures for use of force training strictly prohibits physical force and restraints as punishment and requires the Warden's approval prior to any calculated use of force and application of restraints. Prior to a calculated use of force, the Health Services department is contacted to determine whether or not there is a contraindication for the use of force agents or devices. Staff are trained in use of force techniques during pre-service and in-service training.

A procedures for notifying USMS of significant incidents is in place driven by facility policy. USMS Contract (ODT-9-C-0004, Section C.4.2) "Incident Reporting" requires the facility to notify the USMS Contracting Officer Representative and District personnel of all serious disturbances, sexual assault, food strikes, staff use of force, assault on staff, detainee fights requiring medical attention, fires, and lockdown.





WCCC policy and procedures regarding firearms, chemical agents and other less than lethal devices are addressed in the Security Equipment/Armory/Key Control policy. The policy addresses training, issuance of weapons and chemical agents to qualified staff, supervisory staff authority to access the armory and the use of weapons during emergencies.

Storage for less lethal devices and security is located in the armory and central control. Staffs are trained in the use of deadly force during pre-service and in-service training. The facility has a full time Armory Officer; all weapons and ammunition inventories reviewed were found to be accurate. A sign is posted at the entrance of the weapon storage area indicating staff authorized to enter.

Review of the armory operations revealed the Armory Officer maintains a weapons and security equipment issuance and return log. The Training Officer and Armory Officer maintain a current list of staff qualified to carry on an armed post or use other security devices approved by the Warden. The facility has secure gun lockers for law enforcement officers adjacent to the armory with instructions for the safe unloading and loading of firearms at the clearing barrels. To issue weapons to transportation officer a staff member authorized to enter the armory withdraws the firearm to be issued and stores the firearm in the adjacent firearm lockers which are also used for visiting law enforcement officer to store their weapons.

To arm themselves transportation officers; after departure of the detainee transportation vehicle from the vehicle sallyport, receives their weapon which is delivered to them by the mobile patrol officer.

MTC armory operation policy permits the Warden to authorize a certain staff members not pre-identified on the Armory Authorized Access list to access the armory. Review of the Armory Authorized Access list and proof of permission of Authorized Access via Warden's Discretion letter could not be found for the mobile patrol officer who issued the transportation officer their weapon during observation of this process during the QAR.

Even if an Authorized Access via Warden's Discretion letter would have been present, issuance of the weapon by the mobile patrol officer constitutes a lapse in security and an irresponsible delegation of weapons-issuance authority. Additionally it presents a conflict of interested and detracts the mobile patrol from its main responsibility of providing perimeter security.

WCCC has a key accountability policy and procedures. The key control officer conducts preventive maintenance of all locks and keys monthly. Keys rings have a serial number and are crimped to prevent tampering. The number of keys is cited on a metal chit located on the ring. Daily use keys are issued from the Key Trak Guardian, automated key dispenser. Shift supervisors conduct key inventories each shift and the administrative secretary conducts a monthly key inventory. Emergency keys are kept in a key box in central control. The keys access all areas of the facility and shift supervisor authorization is required before the issuance of emergency keys.



Tools are secured outside of the facility in the maintenance shop. Tools are controlled with an identification symbol engrave on each tool. The facility maintains a master inventory of all tools and inventories are posted conspicuously on all corresponding shadow boards.

Food service knives are tethered to the work stations when in use. Culinary equipment is inventoried and accounted for daily. A review of the tool control policy and interview with the Tool Control Officer and maintenance supervisors revealed detainees are not assigned work which requires the use of tools.

The Health Services department conducts inventories of syringes, needles and other sharp twice daily.

Policies and procedures exist for the development and implementation of post orders. The facility has specific post orders for most correctional posts; however the officers assigned to medical housing do not have a distinct set of post orders for their area and when interviewed were unable to articulate the actual duties and responsibilities of their post.

The facility's policy on disciplinary procedures clearly defines rules for offenses and penalties that can be imposed for various violations and is included in the detainee handbook in English and Spanish. Review of policy and interviews with staff revealed informal resolution for minor rule violations occurs between staff and detainees. Review of several Disciplinary Hearing reports, revealed detainees are provided with a copy of the 24-hour notice of disciplinary charges prior to the disciplinary hearing. Detainees are advised of their right to introduce statements or testimony of witnesses and present other documentary evidence in rebuttal to the charges against them at any time during the disciplinary process. Detainees who are illiterate are provided with staff assistance during the disciplinary process.

The Special Housing Unit (SHU) which houses only males consists of separate Administrative Segregation and Disciplinary Segregation Units. Administrative and Disciplinary Segregation of female detainees occurs in the medical department, where use of the isolation cells serve a dual purpose of also being used to house female Administrative Segregation and Disciplinary Segregation prisoners; there is not a separate female SHU. The facility only has a formal male SHU.

Review of detainee housing records revealed 72 hours reviews of detainee's placement are conducted. Health Services department conduct a pre-segregation medical evaluation prior to a detainee being admitted to SHU. During the review the facility was housing several protective custody status detainees.

7 and 30 classification reviews are conducted and detainees are verbally notified of the review decision. Every 7 days detainee's records housed in the SHU for administrative segregation or protective custody are reviewed to determine release or to continue; based on intelligence and security concerns. Correctional officers observe and check on each SHU detainee every thirty



minutes; The thirty minute checks are recorded. Detainees in SHU are provided access the law library, general library and religious programs.

USMS court and local in-district movement within a 50-mile radius is provided by the MTC. MTC detainee transportation details consist of an appropriate number of armed officers; however, these officers are instructed to carry their duty weapons without a round in the chamber.

MTC's duty carry posture is similar to the "Storage Condition" identified in USMS Policy 14.9 Firearms, which indicates a weapon is ready for storage when the weapon is properly cleared of ammunition and the action is closed.

USMS Policy is clear the "Storage Condition" state of readiness is considered appropriate only when the weapon is not expected to be available for immediate use.

MTC transportation officers are issued a shotgun as an additional weapon during prisoner movements, however this weapon not authorized for use by the contract.

WCCC operates a fleet of five 11-passenger vans, one 12-passenger van, three transport buses, consisting of 23, 32 and 43-passengers. The facility utilizes an automotive service shop in the community to conduct annual safety inspection of all transportation vehicles.

The facility's transportation vehicles are not outfitted or equipped to accommodate disabled or non-ambulatory detainees. All transportation vehicles are secured in a separate parking area, adjacent to the rear gate and the maintenance shop; security checks and monitoring of the parked transportation vehicles is the responsibility of the Perimeter Patrol Officers.

Transport vehicles receive pre and post-trip safety and security inspections by the Transportation Officer. Transportation vehicles' fire extinguisher is equipped with a current inspection tagged indicating last service date. Vehicles are equipped with serviceable air conditioning systems, cell phones for staff communication, compartments to provide for separation of detainees, and security screens between the Transportation Officers and detainees.

WCCC has a secure vehicle sally port and a secure area for the receiving and discharge of detainees. The facility's Intake area has several holding rooms for processing detainees transferring in and out of the facility. Detainees are fully restrained unless there are documented medical exceptions.



## **D - Food Service**

## **Deficient**

Review of the Food Service department is based on staff and detainee interviews, food service policies and procedures, and direct observation of operations. Policies and procedures are reviewed by the Food Service Manager (FSM) and are updated annually.

The Food Service department is operated by the facility. There is one food service manager (FSM), and at the time of this review, there were 16 assigned food staff workers. Contractually MTC has committed to maintaining a staff compliment of 25 employees, but has maintained this short staffing level since the 2015 QAR. To minimize the effect of the staff shortages, MTC has begun using USMS detainees to wash food trays. A correctional officer is posted in food service.

The food service staffing shortage has negatively impacted the food service operations; staff assigned or used to augment as food service workers during the meal production and plating operation were interviewed and complained of having to perform the task as well as not being properly trained and having to perform a task they were not hired or interested in performing.

Plating of meals because of the staffing shortage are done haphazardly and care is not taken or given to attempt to plate meals in a manner in which foods are kept separated and ensuring presentation is palatable.

Daily sanitation inspections are conducted in areas including food preparation, storage and dishwashing machine. Clean towels are kept in buckets of sanitizer solution at food preparation stations. The Texas Department of State Health Services conducted an inspection on August 13, 2015. The findings on the food safety report indicate sanitation requirements are being met and there was no violations noted at that time.

Direct observation of the drying racks in the warewashing and pot and pan area revealed hard water, chemical deposits and food residue. Tray and equipment drying racks are not being cleaned at a frequency necessary to prevent recontamination of equipment. This does not comply with US or State Food Code. (Food Code 4-501.14 Warewashing Equipment, Cleaning Frequency).

Inspection of the insulated serving trays revealed a significant number of trays beyond serviceability and in need of replacement. The undersides of unserviceable trays were cracked with open seams and a number of trays had the plastic lamination peeling. The unserviceable trays were absent of the required smooth finish and were heavily stained. The unserviceable tray conditions caused peeling plastic to mix with the food; the trays cannot be sanitized properly, as moisture is retained in open cracks. In addition, the cracked underside of the trays is used to cap the food trays to maintain temperatures of food and protect food during transportation to housing units, thus causing cross contamination concerns which does not comply with US or State Food Code. (Food Code 4-202.11, Food Contact Surfaces).



The warewashing machine is not reaching the required final rinse temperature of 180 degrees Fahrenheit. to ensure sanitization. Observation of the warewashing operation revealed the final rinse temperature on the dish machine to be 140 degrees Fahrenheit (F.). Staff were immediately advised. The dishwasher was also equipped with a low temperature chemical sanitizer to be used when the final rinse temperatures do not reach 180 degrees F. The dish washer was switched over to low temperature chemical sanitizing to correct the problem.

However it was discovered the pump on the chemical sanitizer was not working and there was no sanitizer going into the dish machine. A new temperature heat measuring device was installed however; the rise temperature went up to 170 degrees F. and did not meet the required temperature of 180 degrees F.

Finally a new solenoid (coil) was installed, and a temperature of 180-195 degrees F. was attained. A follow-up the next day indicated the dish machine final rinse temperature was only 160 degrees F. Again, adjustments were made to the solenoid and the final temperature requirements were met.

However, during the review, trays were being washed and not complying with the US or State Food Code sanitizing requirements. (Food Code 4-501.112 Mechanical Warewashing Equipment, Hot Water Sanitization Temperatures). No remedial action was taken on the part of staff to sanitize the trays while the warewashing machine was being serviced.

A staff training and development program is in place. All staff and detainee workers receive a pre-employment medical examination. Staff is required to be Serv Safe certified. A daily visual inspection of staff's attire and general health is conducted and documented. Observation of food service workers reveals all staff members were wearing hair coverings, beard guards, if required, and using disposable gloves while handling food products.

All deliveries are received by food service staff, which are knowledgeable of the food code requirements. Observation of all dry storage rooms, refrigerated and freezer areas revealed required food code temperatures are being maintained.

The manual pot and pan washing process were observed. The manual pot and pan washing process utilizes a chemical chlorine sanitizer. Chlorine test strips were in use to test the concentration of chemicals being used. Water temperature reading of the pot and pan sink was taken and meets the food code requirements. Chemical sanitizer buckets for the service towels were in use and chemical concentration readings were taken and met food code requirements.

Meal service and sanitation were observed and it was determined proper food handling and safety procedures are not always in place. During the review, a food service worker was observed plating up the noon meal; chicken leg quarters were being served, wearing single use food handler's plastic gloves. The chicken leg quarters were being served by hand.





When time came to replace the leg quarters on the serving line, the server slipped his gloved hands into oven mitts and removed a new pan of chicken from the hot holding cabinet and placed the pan on the serving line. The worker then removed the oven mitts and, without changing the plastic gloves, returned to placing the chicken legs onto the trays which does not comply with US or State Food Code. (Food Code 3-304.15 Gloves, Use Limitation).

This facility has a cook/serve operation. Prior to meal service, hot foods are placed in pans and held in hot holding cabinets. Meals are then plated in insulated trays on tray service ware. All cold food items offered are held under refrigeration prior to meal service. Correctional staff transport and distribute meals to the detainee population.

Clinical diet orders are loaded into the Offender Data Base System by the medical staff. Food services staff prints off a daily listing of detainees requiring medical diets. Tray slips with the detainee's name, number, diet type and housing unit are attached to the trays. This facility has a two week cycle mainline menu. The mainline menus are developed along with corresponding recipes. A nutritional analysis was performed and certified by the dietitian.

Detainee interviews regarding acceptance of meals provided was positive. Kosher religious diets are offered. A nutritional adequacy statement is on file certified by the contract dietitian. At the time of review, there were forty nine medical and zero kosher meals prepared. The medical meals were observed and found to be acceptable.

## **F - Safety and Sanitation**

## **Deficient**

A review of the Safety and Sanitation Program at WCCC is based on staff and detainee interviews, review of the facility's policy and procedures and direct observation of daily operations.

The WCCC is not maintaining compliance with all applicable federal and state codes as well as fire codes mandated by the National Fire Protection Association (NFPA) and the Occupational Safety and Health Administration (OSHA) on the fire alarm and detection systems.

The facility is protected throughout with smoke detectors, manual pull stations, smoke exhaust systems and audible alarms system. However, the smoke detectors have not been calibrated through sensitivity tests every two years as required. This maintenance requirement was identified on September 2, 2015 by Simplex Grinnell.

The facility has an evacuation plan in place for use in the event of a fire or a major emergency. An annual inspection of the facility was conducted by the City of Raymondville, Fire Marshall Office on July 20, 2015. The fire emergency plan was approved by Fire Marshal on December 28, 2015.

Direct observation and document review confirms the Safety Manager conducts monthly checks of all fire extinguishers. All fire extinguishers have updated inspection tags and fire evacuation plans are posted and correctly oriented throughout the facility in English and Spanish for detainees, visitors and



staff. Staff are trained in the use of fire extinguishers. Fire drills are conducted and evaluated. A fire drill was conducted during the QAR and staff were found to have adhered to all proper procedures and it was determined that the fire alarm system in the control center annunciated as required.

WCCC has policies and procedures in place to ensure all facility furnishings meet fire safety performance requirements. Mattresses and pillows used in the housing units met established standards for flammability; however, trash cans located in detainee housing units do not meet safety performance requirements. Prior to the QAR closure the identified trash cans were replaced with metal trash cans which comply with fire safety standards; immediately correcting this finding.

Flammable, toxic, and caustic materials and chemicals are not maintained in accordance with OSHA regulations. Flammable chemicals in the barbershop (barbicide and clippercide) were not stored properly. Once identified facility staff provided an appropriate chemical storage cabinet; immediately correcting this finding. Caustic cleaning chemicals used by Food Service are accessible to detainees.

The Texas Department of State Health Services is responsible for conducting safety inspections for WCCC. An annual inspection was conducted August 13, 2015 and no discrepancies were noted. Monthly safety inspections are conducted by the Facility Risk Manager who documents findings on monthly inspection forms. The sanitation and maintenance weekly inspections did not list any discrepancies. However, QAR observations noted the presence of graffiti in detainee living areas.

Weekly fire prevention inspections are conducted by the Risk Manager and documented on the weekly fire prevention inspection forms. Corrective action work orders are submitted when deficiencies are noted during these inspections and are corrected in a timely manner. Housing units receive cleaning supplies to ensure that detainees living quarters are maintained in accordance with their cleaning schedules.

A review of inspection records indicated that vermin and pests are identified and controlled through monthly inspections and are treated by a qualified pest control technician. The facility has a contract with Pest Free Extermination. WCCC is designated as a tobacco free facility. A program exists to monitor environmental conditions of the facility. The facility's water source is provided by the City of Raymondville and inspected by Texas Department of State Health Services. Noise level surveys are conducted every three years. The last survey was conducted on November 5 and 6, 2013, this inspection found the night time noise levels were above the required reading of 45dba (A scale).

Documentation review confirms that detainees are issued clean, well maintained clothing and towels each week. A sufficient quantity of clothing is being issued and laundered weekly. Detainees have access to operable and clean showers with temperature controlled hot and cold running water. Showers are available daily for detainees in general population and SHU. Detainees have access to hygiene items through the commissary. A review of policy indicates toilet paper is issued twice a week; however there were no procedures in place to provide detainees with additional rolls.



Indigent detainees receive hygiene necessity items from staff weekly with no cost. Direct observation confirms both male and female detainees are afforded opportunity for hair care services and equipment was properly maintained by the end of the QAR.

The facility's physical plant presented a hazard to staff, detainees, or visitors. The lower part of shower partitions are eroding and the Plexiglas in the shower areas of alpha and bravo units are cracked and broken forming a sharp surface. The same unit had water running from the showers onto the unit floor causing a slip hazard.

## **G - Services and Programs**

**Acceptable**

Facility staff review relevant information provided by the USMS to determine appropriate classification and housing for detainees. The classification system is used to separate detainees into groups that reduce the probability of assault and disruptive behavior. Detainee housing is based on age, gender, legal status, custody needs, special problems and needs, and behavior. Detainees are re-classified every six months or earlier as a result of misconduct infractions, convictions, and security level changes.

Detainees have access to legal materials by submitting a request to staff. The law library is accessible 5-days a week. Detainees are provided access on one hour intervals. In the law library detainees have access to a research computer. There are eight attorney-client visiting rooms within the facility. To make unmonitored phone calls to their attorneys, detainees in general population use a phone located in the law library. Although this phone is designated by MTC for detainees to make unmonitored phone calls, during such calls staff and detainees were observed present in the immediate area and are able to listen-in on the attorney-client conversation.

Detainees are allowed to send and receive mail. Upon receiving mail, it is processed and delivered to detainees by staff within 24 hours. Indigent detainees are provided with two stamped envelopes and five sheets of paper and a pencil in order to maintain community ties. Detainees are provided access to telephones within the housing units.

Detainees are provided with a variety of religious programs to include, Catholic, Protestant and Jehovah Witness services. The Chaplain attended and successfully completed Theological School and Clinical Pastoral Education exceeding minimum qualifications. Adequate space and equipment are provided for conducting and administering religious programs. A review of religious volunteers revealed direct supervision of religious volunteers by the Chaplain.

Detainees are given access to exercise opportunities and equipment on a daily basis for one hour. Detainees are provided with leisure-time activities which include crocheting and playing card games. The facility provides a visitation program in order for detainees to maintain community ties. There is sufficient space for non-contact visiting. Detainees are allowed two 20 minute visits each week. Special visits for 40 minutes are provided for detainees, who have visitors traveling more than 50 miles.



Detainees are afforded work opportunities thru the detainee work program. Detainees work on a voluntary basis with the approval of the USMS. The detainee workers sign a work waiver. Detainees are assigned to food service, laundry, intake and classification as janitorial workers.

A grievance program with one level of appeal is available to detainees. Detainees have access to grievance forms kept within the housing units. However, it was noted that the grievance forms utilized by the facility is as a 2-copy form as opposed to the approved 3-copy form. Grievance forms are collected by staff on a daily basis. A grievance log which records the disposition of the grievance is maintained.



## Detailed Findings by Functional Area

### A - Administration and Management

	Standard	Finding Options
		<ul style="list-style-type: none"> <li>- Acceptable</li> <li>- Deficient</li> <li>- Repeat Deficiency</li> <li>- At-Risk</li> <li>- Not Applicable</li> </ul>
A.1	Policy and Procedures	Acceptable
A.2	Quality Control	Acceptable
A.3	Prisoner Records	Acceptable
A.4	Facility Admission and Orientation Program	Acceptable
A.5	Prisoner Property	Acceptable
A.6	Prisoner Transfers and Releases	Acceptable
A.7	Prisoners with Disabilities	Acceptable
A.8	Discrimination Prevention	Acceptable
A.9	Staffing	Acceptable
A.10	Training	Acceptable
A.11	Emergency Plans	Acceptable

### Additional Comments





**B - HealthCare**

	Standard	Finding Options
		<ul style="list-style-type: none"> <li>- Acceptable</li> <li>- Deficient</li> <li>- Repeat Deficiency</li> <li>- At-Risk</li> <li>- Not Applicable</li> </ul>
B.1	Health Care Administration	Acceptable
B.2	Intake Screening	Acceptable
B.3	Medical, Mental Health, and Dental Appraisals	Acceptable
B.4	Access to Health Care	Acceptable
B.5	Provision of Health Care	Acceptable
B.6	Incident Health Care	Acceptable

**Additional Comments**

**C - Security and Control**

	Standard	Finding Options
		<ul style="list-style-type: none"> <li>- Acceptable</li> <li>- Deficient</li> <li>- Repeat Deficiency</li> <li>- At-Risk</li> <li>- Not Applicable</li> </ul>
C.1	Correctional Supervision	Acceptable
C.2	Prisoner Accountability	Deficient
C.3	Control of Contraband	Acceptable
C.4	Use of Force/Non-Routine Application of Restraints	Acceptable
C.5	Weapons	Deficient
C.6	Keys, Tools, and Medical Instruments	Acceptable
C.7	Post Orders	Acceptable
C.8	Prisoner Discipline	Acceptable
C.9	Special Housing Units	Acceptable
C.10	Prisoner Transportation	Acceptable

**Additional Comments**



**D - Food Service**

	Standard	Finding Options
		<ul style="list-style-type: none"> <li>- Acceptable</li> <li>- Deficient</li> <li>- Repeat Deficiency</li> <li>- At-Risk</li> <li>- Not Applicable</li> </ul>
D.1	Food Service Administration	Acceptable
D.2	Food Service Employee/Worker Health	Acceptable
D.3	Food Storage and Preparation	Acceptable
D.4	Equipment, Utensils, and Linens	Deficient
D.5	Prisoner Meals and Special Diets	Acceptable

**Additional Comments**

**F - Safety and Sanitation**

	Standard	Finding Options
		<ul style="list-style-type: none"> <li>- Acceptable</li> <li>- Deficient</li> <li>- Repeat Deficiency</li> <li>- At-Risk</li> <li>- Not Applicable</li> </ul>
F.1	Fire Safety and Chemical Control	Deficient
F.2	Sanitation and Environmental Control	Acceptable
F.3	Clothing and Bedding	Acceptable
F.4	Prisoner Hygiene	Acceptable
F.5	Facility Physical Plant	Deficient

**Additional Comments**



**G - Services and Programs**

	Standard	Finding Options
		- Acceptable - Deficient - Repeat Deficiency - At-Risk - Not Applicable
G.1	Classification and Housing	Acceptable
G.2	Access to the Courts and Legal Materials	Acceptable
G.3	Mail	Acceptable
G.4	Telephones	Acceptable
G.5	Religious Programs	Acceptable
G.6	Recreation	Acceptable
G.7	Visitation	Acceptable
G.8	Work Programs	Acceptable
G.9	Grievance Program	Acceptable

**Additional Comments**

