

**IN THE UNITED STATES DISTRICT COURT  
FOR THE DISTRICT OF COLUMBIA**

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**IN RE:**

**GUANTANAMO BAY  
DETAINEE LITIGATION**

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)  
) Misc. No. 08-442 (TFH)<sup>1</sup>

) Civil Action Nos.  
)

) 04-CV-1194, 04-CV-1254, 04-CV-2022, 05-CV-0023  
) 05-CV-0280, 05-CV-0569, 05-CV-0764, 05-CV-0883,  
) 05-CV-1048, 05-CV-1124, 05-CV-1312, 05-CV-1506,  
) 05-CV-1592, 05-CV-1607, 05-CV-1623, 05-CV-1638,  
) 05-CV-1646, 05-CV-1971, 05-CV-1983, 05-CV-2104,  
) 05-CV-2186, 05-CV-2223, 05-CV-2348, 05-CV-2371,  
) 05-CV-2380, 05-CV-2386, 05-CV-2387, 05-CV-2479,  
) 06-CV-1690, 06-CV-1725, 07-CV-2337, 08-CV-1207,  
) 08-CV-1228, 08-CV-1236, 08-CV-1238, 08-CV-1360,  
) 08-CV-1440, 08-CV-1645, 08-CV-1923, 08-CV-2083,  
) 09-CV-0031, 09-CV-0745, 09-CV-0873, 09-CV-1385,  
) 09-CV-1462, 10-CV-0407, 10-CV-1020, 11-CV-0923,  
) 15-CV-0681, 15-CV-1257, 16-CV-1462  
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**ERRATA**

Respondents previously filed a Notice to the Court, to which the Declaration of Rear Admiral Peter J. Clarke was attached, in the above captioned cases. The Notice and Declaration were inadvertently placed under seal via the ECF system. Respondents are refiling the Notice and Declaration as attachments to this Errata to place accessible versions on the public docket.

Dated: September 26, 2016

Respectfully submitted,

BENJAMIN C. MIZER  
Principal Deputy Assistant Attorney General

JOSEPH H. HUNT  
Branch Director

TERRY M. HENRY  
Assistant Branch Director

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<sup>1</sup> Respondents have filed this notice in all Guantanamo Bay habeas cases in which at least one petitioner is currently held at Guantanamo Bay, whether the case remains pending or not.

*/s/ Kristina A. Wolfe*

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08-CV-1440, 08-CV-1645, 08-CV-1923, 08-CV-2083,  
09-CV-0031, 09-CV-0745, 09-CV-0873, 09-CV-1385,  
09-CV-1462, 10-CV-0407, 10-CV-1020, 11-CV-0923,  
15-CV-0681, 15-CV-1257, 16-CV-1462

**NOTICE TO THE COURT**

Respondents respectfully notify the Court that the Department of Defense (DOD) has commenced renovation of one wing and an outbuilding in Camp V at the United States Naval Station, Guantanamo Bay, Cuba, to construct new medical facilities for detainees and administrative office space for their medical providers. Some former and current Guantanamo detainees were previously housed in Camp V, which is no longer occupied, and the outbuilding, Building 2240, was previously used as a detainee classroom. As a result of the decreasing detainee population, Joint Task Force-Guantanamo (JTF-GTMO) has been consolidating camp operations. Currently, all detainees, other than those designated as “High Value Detainees”

<sup>1</sup> Respondents have filed this notice in all Guantanamo Bay habeas cases in which at least one petitioner is currently held at Guantanamo Bay, whether the case remains pending or not.

(HVDs),<sup>2</sup> are housed in Camp VI, which is adjacent to Camp V and has its own classroom for educational programs. As explained below, developing new detainee medical facilities and medical administrative offices in closer proximity to Camp VI will improve the safety and security for both detainees and military personnel by reducing the scope of movement needed to transport detainees for health-care related matters compared to the current situation. It will also enhance the overall quality of health care available to detainees, as well as increase cost efficiency.

Rear Admiral Peter J. Clarke, Commander, JTF-GTMO, explains in the attached declaration that the current detainee medical facilities, consisting of a temporary infirmary and Behavioral Health Unit (BHU), were built in 2002 and are located in Camp Delta, where the detainee population was housed prior to the construction of Camps V and VI. *See* Clarke Decl., ¶ 3. The infirmary and BHU were not designed to be enduring facilities and have deteriorated over time. *Id.* In addition, the medical facilities in Camp Delta do not have an isolation room for tuberculosis (“TB”) and other infectious diseases or an operational surgical suite—facilities that, as reflected in Rear Admiral Clarke’s declaration, will be beneficial to the continued care of the aging detainee population. *Id.* Further, all detainees who are not designated as HVDs are currently housed in Camp VI and must be transported via a specially equipped van to the medical facilities at Camp Delta for specialty appointments, such as dentistry and optometry, as well as substantive hospital care. *Id.* Detainees requiring isolation or surgery must be transported via a specially equipped van to the Guantanamo Bay Naval Hospital. *See id.* These movements are time-and-resource intensive and increase the safety risk of both detainees and the guard force. *Id.* Further, utilization of the Naval Hospital for detainees essentially shuts down the section of

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<sup>2</sup> So called “High Value Detainees” are detainees whose cases presumptively involve Top Secret//Sensitive Compartmented Information and who are housed in Camp VII at Guantanamo.

the hospital providing detainee care, which can cause a disruption in care for the base population. *See id.*

To address these concerns, JTF-GTMO has begun implementing a plan to renovate one wing and an outbuilding of Camp V to house a new detainee medical facility and administrative office space for medical personnel in closer proximity to Camp VI, where all detainees other than HVDs are presently housed. *See Clarke Decl.*, ¶¶ 3, 6, 9. Currently vacant, Camp V was built in 2004 as a maximum-security facility to house detainees. *Id.* ¶ 4. The main building has four, two-story wings of cells and one additional wing of office space. *Id.* The renovation, as currently planned, will create a medical facility in the wing located closest to Camp VI, with additional medical treatment and administrative office space in and adjacent to Building 2240, an outbuilding located within Camp V's perimeter fence. *Id.* ¶ 4, 6-8. The new detainee medical facility, excluding the administrative space, will be approximately the same size as the current medical clinic in Camp Delta, but with greater overall capability. *Id.* ¶¶ 6, 7. It will consist of updated medical spaces and equipment, including an isolation room, a surgical suite, a new acute care unit, new X-ray equipment, and a new Central Sterilization Room that can be used to sterilize the equipment used for operations. *Id.* ¶ 6.

Importantly, because Camp V is located in close proximity to Camp VI, the need to transport detainees for medical care in specially equipped vans will be eliminated, improving both the safety and security of detainees and military personnel, as well as cost efficiency. *Id.* ¶¶ 5, 6. Eliminating the use of specially equipped vans will also reduce the time it takes to transport detainees to their medical appointments, thereby causing less disruption to their daily schedule. *See id.* ¶ 6. In addition, relocating the administrative office space for the Joint

Medical Group (JMG), the unit charged with the detainees' medical care, to Building 2240 will increase the efficiency of the medical staff, ultimately enhancing the quality of care. *See id.* ¶ 8.

The wing slated for renovation in Camp V is one of the four wings that previously housed detainees. *See* Clarke Decl. ¶ 7. Some detainees housed in the wing required enteral feedings and some of those feedings, in all likelihood, took place in rooms within that wing. *Id.* The proposed renovation will not modify the other four wings of Camp V. *See id.* Each wing of Camp V was constructed to the same specifications; thus, the current construct of the wing that is slated for renovation will remain replicated in the other four wings. *Id.* Building 2240 was primarily used as a classroom for detainee educational programs. *See id.* ¶ 8. At certain times in years past it was also used, when needed, for enteral feedings. *Id.*

Although initial construction to implement the proposed renovation of one wing of Camp V and Building 2240 commenced in August 2, the construction has been limited to the exterior of the two buildings. Clarke Decl., ¶ 9. Specifically, temporary fencing and a new Sally Port (a secure entrance that will be used to admit detainees and personnel coming from Camp VI) has been installed, and the area around Building 2240 has been prepared to receive new modules (trailers) to be used as medical treatment and storage facilities. *Id.* The contractor is currently digging trenches for utilities and will next pour concrete slabs, which are necessary for exterior renovation. *Id.*

Interior demolition of Building 2240 is currently scheduled to begin in early October 2016. *Id.* ¶ 11. Demolition of the interior of Camp V is currently scheduled to follow later that month. *Id.* Prior to beginning this demolition or making these interior modifications, the Federal Bureau of Investigation (FBI) will create digital recordings that could be used, if necessary, to

create a three-dimensional modeling of the interiors of the two buildings. *See id.* ¶ 11. The digital record will be preserved in an accessible format. *Id.*

Dated: September 26, 2016

Respectfully submitted,

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## **DECLARATION OF REAR ADMIRAL PETER J. CLARKE**

I, Rear Admiral Peter J. Clarke, pursuant to 28 U.S.C. § 1746, hereby declare as follows:

1. I am a Rear Admiral in the United States Navy. I serve as the Commander of Joint Task Force-Guantanamo (JTF-GTMO), at Naval Station, Guantanamo Bay, Cuba. I have held this position since 4 November 2015. As such, I am responsible for the safe and humane care and custody of detainees, including those convicted by military commission. My primary concerns are the safety of my service members, the well-being of the detainees, and the defense of my area of operations.

2. I make the following statements based upon my years of service and experience in the United States military, personal knowledge, and information made available to me in my official capacity, as well as my assessments and evaluations of the current status of detention operations at JTF-GTMO. I have served in the United States Armed Forces for over 30 years at various levels of command and staff. In addition to commanding the *USS Rhode Island* (SSBN 740), an *Ohio* class ballistic missile submarine, and Submarine Squadron Two, a squadron of fast-attack submarines, I have served in various capacities as a career submarine officer. I have also served as a staff officer for the Commander, U.S. Naval Forces Europe, Commander U.S. 6<sup>th</sup> Fleet, and Commander Task Force 69; Special Assistant to the Director, Naval Nuclear Propulsion for Personnel Policy and Training; Director for Operations, Commander Submarine Forces Atlantic; Assistant Deputy Director for Regional Operations and Force Management in the Operations Directorate of the Joint Staff; and Deputy Director, Joint Interagency Task Force South.

3. As the Commander, JTF-GTMO, my responsibilities include ensuring both quality medical care facilities for detainees and safety of guard force personnel. The current medical facilities for detainees, consisting of a temporary infirmary and Behavioral Health Unit (BHU), were expeditionary construction projects originally built in 2002. While the medical care currently provided to detainees at JTF-GTMO is on par with the medical care provided to U.S. military personnel also stationed here, I am cognizant of the fact that the detainee population continues to age and the medical needs of those detainees remaining at Guantanamo will become more complex and challenging to our medical staff. The medical facilities where detainees are presently treated have deteriorated over time and were not designed to be enduring facilities;



specifically, they consist of modular buildings that are temporary in nature. The current detainee medical facilities are located at Camp Delta, where detainees were housed prior to the construction of Camps V and VI. Detainees are presently housed in Camp VI, but are no longer housed in Camp V. Substantive hospital care, and other ancillary services such as dental and optometry visits, requires transporting detainees from Camp VI to Camp Delta. Such transport includes moving the detainee to a van, securing him in the van with the transport team, moving him approximately a quarter mile from Camp VI to Camp Delta and then moving him from the van into the medical facility. These movements from Camp VI to Camp Delta are time and resource intensive and increase the risk to safety and security of both detainees and the guard force. In addition, the current expeditionary detainee medical facility does not have an isolation room for tuberculosis (TB) or infectious diseases, or an operational surgical suite. Although such facilities at Naval Hospital Guantánamo Bay can be used as needed for detainee care, I believe that the continued long-term medical care of this population of detainees, and the efficiency of such care, would benefit from having such facilities in closer proximity to the camp in which detainees are housed. Utilization of the Naval Hospital for detainee care essentially shuts down that section of the hospital, and can create a major imposition on the operation of that facility and a disruption of care for the base population. Finally, the current medical administration building is geographically separated from most of the Joint Medical Group (JMG) personnel work spaces, making it inefficient for their purposes. To address these concerns, we plan to renovate one wing of Camp V and a building formerly used as a classroom for detainees into medical spaces.

4. Camp V is a maximum-security facility built in April 2004. It is a climate-controlled facility with a hub and spoke design. The hub consists of a centrally located automated control center that enables staff to control all operations throughout the building, including ingress/egress, opening and closing of doors, and other operations. The spokes consist of four, 2-story wings, each with two rows of adjoining cells that face each other, and one additional wing for administrative offices. Detainees are no longer housed in Camp V. Camp V is currently not in use.

5. Camp VI became operational in December 2006, and currently houses all detainees not designated as high value detainees (HVDs). Built as a medium security, climate-controlled facility, Camp VI detainees reside in eight pods that are each equipped with approximately 20

cells. Each pod is a two-story wedge shaped wing attached to the main structure, with cells on each story and a common area located in the middle of the first floor to allow comingling of the resident detainees. Camp VI is located approximately 150 yards from Camp V.

6. As a result of the declining number of detainees held at JTF GTMO, we have been considering options for consolidating camp operations to increase efficiency and resource management, as well as to reduce cost. We are ready to move forward with aspects of the consolidation plan; specifically, to renovate a wing and outbuilding of Camp V into a medical facility for the remaining non-HVD detainees who are all now housed in Camp VI, which will improve operational and cost efficiency and will improve upon the already comprehensive medical care available to detainees housed at JTF-GTMO. Converting these aspects of Camp V into a medical facility will provide a medical suite roughly the same size as the current clinic, but with greater overall capability. The planned renovation will create updated medical spaces and equipment, such as a surgical suite, an entirely new detainee acute care unit, an isolation suite, new X-ray equipment, and new Central Sterilization Room that can be used to sterilize necessary operating room equipment. Movement of detainees between Camps V and VI for the purpose of providing medical treatment will be significantly less resource and time intensive than the current construct. Utilizing a portion of Camp V to house detainee medical care facilities will improve the safety and security for detainees and military personnel by eliminating the need for moving detainees with specially equipped vans for all medical visits. This change will also make for less disruptive, quicker movements for detainees for the purpose of medical care, significantly reducing the amount of time it takes to get detainees to various appointments.

7. The proposed modifications will be made to one of the five wings in Camp V, specifically, the wing located closest to Camp VI; for now, the other four wings will remain as is. Every wing of Camp V was constructed to the same specifications; therefore, the current construct of the wing which is to be renovated will remain replicated in the other four wings of Camp V. The wing slated to be renovated did previously house detainees who required enteral feeding with some of the enteral feedings likely occurring in rooms within that wing in past years.

8. Building 2240 is located within the Camp V perimeter fence, adjacent to the Camp V building. Until recently, Building 2240 was used as a detainee classroom. At certain times in past years when needed, it was used for enteral feedings. Building 2240 will be modified

including for use as administrative spaces for medical personnel. This will ensure we maintain the highest quality of medical care by having medical professionals' administrative spaces in close proximity to the medical spaces. The detainee classroom is now located inside Camp VI – where all non-HVD detainees are currently housed.

9. Initial construction for this project commenced in August 2016 and has included the contractor installing temporary fencing and a new Sally Port, which will serve to secure the entrance used by those coming from Camp VI to the new medical wing of Camp V, and preparing the area surrounding Building 2240 to receive new modules (trailers) to be used as medical treatment and storage facilities. The contractor is currently trenching for utilities and will next pour the concrete slabs necessary for the exterior renovation. This initial construction phase is conducted entirely exterior to Building 2240 and Camp V, and did not modify locations that housed or were used by detainees.


10. To date, the government has spent approximately \$1 million of the total \$8.4 million contracted amount. To terminate or even delay the project, the government would incur considerable additional expense to compensate the contractor for material and demobilization. My Chief Engineer estimates that a termination for convenience could cost the government an additional \$3-4 million, and would have to be negotiated with the contractor.

11. Interior demolition in Building 2240 is currently scheduled to begin in early October with demolition inside Camp V to follow. Prior to beginning this demolition or making these interior modifications, we will create digital recordings which could be used to, eventually, create a three-dimensional model of the wing of Camp V and Building 2240 to maintain a record of the facilities for future use. The digital record will be preserved and in an accessible form that can be made available if necessary. The Federal Bureau of Investigation has agreed to conduct the digital imaging for the model.

12. This project has been Congressionally approved and funded as a military construction project, and has been deemed necessary for operations by various levels of the chain of command. Any delay in the project will result in significant costs to the government.

I declare under penalty of perjury under the laws of the United States of America that the forgoing is true and correct.

Dated: 23 Sep 16

  
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Peter J. Clarke  
Rear Admiral, U.S. Navy  
Commander, Joint Task Force Guantanamo