



**U.S. Department of Homeland Security**  
Immigration and Customs Enforcement  
Office of Professional Responsibility  
Inspections and Detention Oversight Division  
Washington, DC 20536-5501

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**Office of Detention Oversight  
Compliance Inspection**

**Enforcement and Removal Operations  
ERO San Diego Field Office**

**Imperial Regional Detention Facility  
Calexico, California**

**February 14-18, 2022**

**COMPLIANCE INSPECTION**  
**of the**  
**IMPERIAL REGIONAL DETENTION FACILITY**  
Calexico, California

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## COMPLIANCE INSPECTION TEAM MEMBERS



|                                       |                      |
|---------------------------------------|----------------------|
| Acting Team Lead                      | ODO                  |
| Inspections and Compliance Specialist | ODO                  |
| Inspections and Compliance Specialist | ODO                  |
| Contractor                            | Creative Corrections |
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| Contractor                            | Creative Corrections |
| Contractor                            | Creative Corrections |

## FACILITY OVERVIEW

The U.S. Immigration and Customs Enforcement (ICE) Office of Professional Responsibility (OPR) Office of Detention Oversight (ODO) conducted a compliance inspection of the Imperial Regional Detention Facility (IRDF) in Calexico, California, from February 14 to 18, 2022.<sup>1</sup> The facility opened in 2014, and is owned by Imperial Valley Gateway Center, LLC and operated by Management and Training Corporation (MTC). The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at IRDF in 2014 under the oversight of ERO’s Field Office Director in San Diego (ERO San Diego). The facility operates under the Performance-Based National Detention Standards (PBNDS) 2011 (Revised 2016).

ERO has assigned deportation officers and a detention services manager to IRDF. A facility administrator handles daily facility operations and manages █████ support personnel. MTC provides food services and medical care, and Keefe Commissary provides commissary services at the facility. In February 2022, the facility was accredited by the National Commission on Correctional Health Care, and in January 2022, by the American Correctional.

| Capacity and Population Statistics                | Quantity |
|---|----------|
| ICE Bed Capacity <sup>2</sup>                     | █████    |
| Average ICE Population <sup>3</sup>               | █████    |
| Adult Male Population (as of February 14, 2022)   | █████    |
| Adult Female Population (as of February 14, 2022) | █████    |

During its last inspection, in Fiscal Year (FY) 2021, ODO found five deficiencies in the following areas: Admission and Release (1); Funds and Personal Property (1); Grievance System (1); Medical Care (1); and Use of Force and Restraints (1).

<sup>1</sup> This facility holds male and female detainees with low, medium-low, medium-high, and high security classification levels for periods greater than 72 hours.

<sup>2</sup> Data Source: ERO Facility List as of February 14, 2022.

<sup>3</sup> *Ibid.*

## COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population greater than 10, and where detainees are housed for over 72 hours, to assess compliance with ICE national detention standards. These inspections focus solely on facility compliance with detention standards that directly affect detainee life, health, safety, and/or well-being.<sup>4</sup>

ODO identifies violations of ICE detention standards, ICE policies, or operational procedures, as “deficiencies.” ODO highlights instances when the facility resolves deficiencies prior to completion of the ODO inspection. Where applicable, these corrective actions are annotated with “C” under the *Compliance Inspection Findings* section of this report.

Upon completion of each inspection, ODO conducts a closeout briefing with facility and local ERO officials to discuss preliminary findings. A summary of these findings is shared with ERO management officials. Thereafter, ODO provides ICE leadership with a final compliance inspection report to: (i) assist ERO in developing and initiating corrective action plans; and (ii) provide senior executives with an independent assessment of facility operations. ODO’s findings inform ICE executive management in its decision-making to better allocate resources across the agency’s entire detention inventory.

ODO was unable to conduct an on-site inspection of this facility, as a result of the COVID-19 pandemic, and instead, conducted a remote inspection of the facility. During this remote inspection, ODO interviewed facility staff, ERO field office staff, and detainees, reviewed files and detention records, and was able to assess compliance for at least 90 percent or more of the ICE national detention standards reviewed during the inspection.

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<sup>4</sup> ODO reviews the facility’s compliance with selected standards in their entirety.

## FINDINGS BY PERFORMANCE-BASED NATIONAL DETENTION STANDARDS (PBNDS) 2011 (REVISED 2016) MAJOR CATEGORIES

| PBNDS 2011 (Revised 2016) Standards Inspected <sup>5,6</sup>  | Deficiencies |
|---|--------------|
| <b>Part 1 - Safety</b>  |              |
| Emergency Plans   | 0            |
| Environmental Health and Safety                               | 0            |
| <b>Sub-Total</b>  | <b>0</b>     |
| <b>Part 2 - Security</b>                                      |              |
| Admission and Release   | 0            |
| Custody Classification System                                 | 0            |
| Funds and Personal Property                                   | 0            |
| Post Orders   | 0            |
| Searches of Detainees   | 0            |
| Sexual Abuse and Assault Prevention and Intervention          | 0            |
| Special Management Units                                      | 0            |
| Use of Force and Restraints                                   | 0            |
| <b>Sub-Total</b>  | <b>0</b>     |
| <b>Part 4 - Care</b>  |              |
| Food Service  | 0            |
| Hunger Strikes  | 0            |
| Medical Care  | 0            |
| Medical Care (Women)  | 0            |
| Personal Hygiene  | 0            |
| Significant Self-harm and Suicide Prevention and Intervention | 1            |
| <b>Sub-Total</b>  | <b>1</b>     |
| <b>Part 5 - Activities</b>                                    |              |
| Correspondence and Other Mail                                 | 1            |
| Trips for Non-Medical Emergencies                             | 0            |
| Marriage Requests   | 0            |
| Voluntary Work Program  | 0            |
| <b>Sub-Total</b>  | <b>1</b>     |
| <b>Part 6 – Justice</b>                                       |              |
| Legal Rights Group Presentations                              | 0            |
| <b>Sub-Total</b>  | <b>0</b>     |
| <b>Part 7 – Administration and Management</b>                 |              |
| Detention Files   | 0            |

<sup>5</sup> For greater detail on ODO’s findings, see the *Compliance Inspection Findings* section of this report.

<sup>6</sup> Beginning in FY 2022, ODO instituted a process of rotating all standards on a 3-year basis. As a result, some standard components may not be present in all standards.

|                           |          |
|---------------------------|----------|
| Interviews and Tours      | 0        |
| Detainee Transfers        | 0        |
| <b>Sub-Total</b>          | <b>0</b> |
| <b>Total Deficiencies</b> | <b>2</b> |

## DETAINEE RELATIONS

ODO interviewed 12 detainees, who each voluntarily agreed to participate. Three of the detainees made allegations of verbal or physical abuse by IRDF staff. ODO immediately reported these allegations to IRDF leadership. Most detainees reported satisfaction with facility services except for the concerns listed below. ODO attempted to conduct detainee interviews via video teleconference; however, ERO San Diego and IRDF were not able to accommodate this request due to technology issues. As such, ODO conducted the detainee interviews via telephone.

*Medical Care:* One detainee stated she has not had her menstrual cycle in 3 months. The detainee stated she submitted a sick call request the week of February 7, 2022, and an IRDF doctor has not examined her.

- Action Taken: ODO confirmed from the medical record review by the health services administrator (HSA), the detainee submitted a sick call request on February 3, 2022, for an issue with her menstrual cycle. The nurse practitioner (NP) met with the detainee on the same day and ordered a urine pregnancy test. On February 6, 2022, an IRDF nurse met with the detainee, and the detainee reported it had been 3 months since her last menstrual cycle. The detainee denied fever, chills, cough, pain, dizziness, nausea, or vomiting, and the nurse reminded the detainee she had an upcoming appointment with the NP. On February 8, 2022, the NP met with the detainee, advised, and documented a negative urine pregnancy test, and scheduled her for a female exam. On February 15, 2022, the detainee refused the female exam appointment with the NP. On the same day, the HSA met with the detainee, reviewed with her the reasons for the appointment, answered the detainee's concerns, and convinced the detainee to undergo the female exam. On February 17, 2022, the detainee completed the female exam. The NP ordered lab work and a follow-up visit for March 3, 2022; however, on February 22, 2022, the facility released the detainee to her home address.

*Medical Care:* One detainee stated he suffers from allergies, had not received any treatment, and found his prescribed medication to be ineffective.

- Action Taken: ODO confirmed from the HSA's medical record review, the IRDF medical staff prescribed the detainee Singulair, Zyrtec, and saline spray for his complaint of allergies on December 6, 2021. On January 7, 2022, the NP examined the detainee and prescribed Robitussin for his cough. In addition, the NP advised the detainee of a scheduled appointment with an allergist on April 18, 2022, and also scheduled him for the next available appointment with the IRDF physician. On January 13, 2022, the physician evaluated the detainee for chronic issues and did not document any mention of allergies. On February 7, 2022, the detainee submitted a sick call request for ibuprofen for arm pain but refused to see the IRDF nurse. On the next day,

the detainee reported for sick call, complaining of chronic right shoulder pain. The physician examined the detainee on the same day and documented a tender right shoulder with limited range of motion due to physical activity. The physician diagnosed the detainee with acute, chronic right shoulder bursitis, ordered X-rays of the right shoulder, and prescribed Naproxen for the pain. On February 18, 2022, the IRDF medical staff scheduled the detainee for X-rays.

*Medical Care:* One detainee stated the facility denied his request for dental services in March 2021.

- Action Taken: ODO confirmed from the HSA medical record review, on April 22, 2021, the dentist met with the detainee for a routine cleaning. The dentist noted the detainee wanted deep cleaning and submitted the request to ERO San Diego. On April 23, 2021, ERO San Diego denied the request, and the IRDF dental staff placed the detainee on the schedule for routine cleaning in 6 months. On November 30, 2021, the detainee received his 6-month cleaning, and facility staff informed him ERO San Diego disapproved his request. On February 17, 2022, the IRDF medical staff examined the detainee and informed him that he will continue to receive cleanings every 6 months.

*Medical Care:* One detainee stated his concerns over his allergy to face masks issued by IRDF for COVID-19 and also his trouble with his lower back.

- Action Taken: ODO confirmed from the HSA medical record review, on March 10, 2021, the IRDF nurse saw the detainee for a complaint of a rash on his hands and issued the detainee hydrocortisone cream. On January 31, 2022, the detainee submitted a sick call request stating the mask caused an allergic reaction for him. On February 1, 2022, the IRDF medical staff examined the detainee and issued him a different type of mask. The detainee has not made any additional complaints to date. On February 17, 2022, the IRDF medical staff issued the detainee a new surgical mask and advised him IRDF staff would issue him a new mask every week or more frequently as needed.

The IRDF medical staff examined the detainee at various times from May 14 to July 30, 2021, diagnosed a problem with his sciatic nerve, prescribed different types of medication, ordered an X-ray, and authorized him use of a lower bunk. The detainee's back pain subsided while at IRDF, but he requested another MRI and to send the results to IRDF. On August 17, 2021, a facility NP examined the detainee, reviewed his previous MRI, and ordered another MRI to be scheduled. On September 3, 2021, the detainee received an MRI and the results on September 10, 2021. IRDF medical staff referred him to an orthopedic specialist to review the MRI results, which included intervertebral disc displacement and spinal stenosis. The NP and physician examined the detainee on September 21, 2021, and October 21, 2021, respectively, and on October 5, 2021, the orthopedic specialist evaluated the detainee. On October 18, 2021, the NP documented the orthopedic specialist's recommendations of:

- Conservative treatment;
- Anti-inflammatory medications;



- A round of physical therapy (PT);
- Referral to pain management for consideration of epidural injection; and
- Additional MRI studies of the lumbar spine at some point.

IRDF medical records documented multiple rescheduled appointments by the providers for pain management and PT. On December 2, 2021, the NP examined the detainee and renewed his medication. Additionally, the pain management team met with the detainee and applied an epidural steroid injection to his spine. On December 17, 2021, the NP examined the detainee for a follow-up, and the detainee stated some lessening of his pain following the pain management appointment. The detainee stated his pain worsened with movement, and the NP advised him of the importance of attending his pending PT appointment. The NP prescribed additional medications and a follow-up after his PT appointment. On December 22, 2021, the detainee refused the PT appointment; however, on February 17, 2022, the detainee met with the IRDF medical staff and requested to try physical therapy.

*Medical Care:* One detainee stated his concern over prolonged waiting for an IRDF doctor to examine his right hand.

- Action Taken: ODO confirmed from the HSA, the detainee submitted a sick call request for pain in his right hand on February 9, 2022. On February 16, 2022, the IRDF orthopedic staff examined the detainee's right hand and scheduled a follow-up examination with the doctor for February 21, 2022. The IRDF medical staff started pain injections on his right hand. During the detainee's follow-up exam, the doctor continued the pain injections and ordered an X-ray. On March 11, 2022, the detainee was scheduled for a follow-up with the IRDF doctor and the orthopedic staff.

*Personal Hygiene:* One detainee stated the facility did not replace soap and shampoo as needed.

- Action Taken: ODO interviewed the IRDF compliance manager and informed him of the detainee's complaints regarding the facility not replacing hygiene items as needed and having to purchase such items from the commissary. On February 17, 2022, the IRDF lieutenant (LT) interviewed the detainee and informed her that the facility issued shampoo bottles to detainees housed in COVID-19 quarantine. However, once the facility reassigned previously quarantined detainees to the general population, the facility stocked the showers and washbasins with bulk shampoo and soap dispensers for their personal hygiene use. The LT asked the detainee if she ever reached out to a housing unit officer for a shampoo bottle, and she replied no because she thought the replacement bins were her only source. The LT confirmed from the housing unit officer on the availability of personal hygiene items in the unit and advised the housing unit officer to note restocking of personal hygiene items in the daily log. Facility staff followed up by supplying the detainee with personal hygiene items.

*Personal Hygiene:* One detainee stated the difficulty in obtaining a resupply of soap, shampoo, and toothpaste in the special management unit (SMU).

- Action Taken: ODO interviewed the IRDF compliance manager and reviewed the facility's personal hygiene policy. On August 2, 2021, the detainee submitted a grievance for not receiving soap, toothpaste, and shampoo, but the IRDF staff resolved the issue. On the same day, the IRDF staff explained to the detainee the exchange process for replacement items.

*Recreation*: One detainee stated the facility staff allowed him no outside recreation while confined to the SMU.

- Action Taken: ODO interviewed the IRDF chief of security and reviewed photographs of the SMU recreation areas and the detainee's daily housing unit records. On February 17, 2022, ODO found the detainee consistently participated in outdoor recreation, 7 days a week while the facility housed him in the SMU. Additionally, the facility maintains two outdoor recreation areas and an indoor/outdoor recreation area for detainees in the SMU.

*Special Management Unit*: One detainee stated he had been in the SMU for over 1-year.

- Action Taken: ODO interviewed the IRDF chief of security, reviewed the detainee's SMU file, and found IRDF initially placed the detainee in SMU on June 8, 2021, for refusing to accept a housing assignment. The detainee remained in the SMU for multiple disciplinary infractions:
  - Misconduct;
  - Encouraging a work stoppage;
  - Interfering with staff; and
  - Refusing to obey orders.

On December 21, 2021, the facility placed the detainee in protective custody status in the SMU for refusing to accept a housing assignment in the general population. On February 3, 2022, facility staff moved the detainee to disciplinary segregation due to fighting with another detainee. On February 17, 2022, an IRDF LT spoke with the detainee and reviewed the detainee's current housing status. The detainee was readvised of his 30-day disciplinary sanction he received at his disciplinary hearing for fighting with another detainee.

*Staff-Detainee Communication*: One detainee stated she received a bond on approximately February 2, 2022, and had not been released due to COVID-19 quarantine in the housing unit.

- Action Taken: ODO interviewed the ERO San Diego Supervisory Detention Deportation Officer (SDDO) and found the detainee did receive a bond through the immigration judge. On February 16, 2022, ERO San Diego explained to the detainee that the immigration judge sets the conditions for her bond and the facility for releasing her unit from COVID-19 quarantine. The facility scheduled the release of the detainee's unit from quarantine for February 19, 2022. On February 22, 2022, the facility released the detainee from IRDF on bond.

*Staff-Detainee Communication:* One detainee stated an IRDF LT verbally abused him.

- Action Taken: ODO interviewed the IRDF compliance manager and reviewed the grievance submitted by the detainee. On May 3, 2021, the detainee submitted a grievance stating verbal abuse by an IRDF LT, and facility staff found the grievance in the detainee's favor. IRDF management verbally counselled the LT and then informed and gave the detainee a copy of the grievance. On May 7, 2021, IRDF notified ERO San Diego of the incident. ERO San Diego reviewed the incident and determined the incident did not meet the criteria for Joint Intake Center (JIC) notification.

*Staff-Detainee Communication:* One detainee stated sometime in December 2021, he submitted a request to speak with a supervisor to ask about his housing unit reassignment, and the supervisor was verbally abusive towards him when the supervisor spoke to him.

- Action Taken: ODO interviewed the IRDF compliance manager and reviewed the request slip submitted by the detainee. Facility staff took the detainee to an outside appointment, returned to IRDF, and assigned him to a different housing unit. The detainee requested to speak with a supervisor about his housing assignment and stated the supervisor became verbally abusive during the conversation. On February 17, 2022, IRDF staff spoke with the detainee and found the housing assignment had upset him. The staff asked whether the supervisor verbally demeaned or threatened him. The detainee stated the supervisor did not verbally abuse him and further explained his housing unit assignment caused his frustration.

*Telephone Access:* One detainee stated his frustration with inconsistent telephone service.

- Action Taken: ODO interviewed the IRDF compliance manager and reviewed the detainee phone logs and phone repair reports from the contractor, Talton Communications. The IRDF compliance manager stated IRDF staff check and verify the phones for serviceability at each shift change. On February 16, 2022, ODO received an email with attached call logs for the detainee, all call logs from the detainee's housing unit, and an email from Talton Communications for a maintenance report for the telephones in the detainee's housing unit. After reviewing the detainee's call logs, ODO verified the detainee did make telephone calls from his housing unit.

*Use of Force and Restraints:* One detainee stated an IRDF sergeant (SGT) physically abused him on approximately December 7, 2021. The detainee stated he submitted a grievance on approximately December 8, 2021, and called the Detention Reporting Information Line (DRIL) as well.

- Action Taken: ODO interviewed the IRDF compliance manager and reviewed the grievance submitted by the detainee. On December 7, 2021, the detainee submitted a grievance in reference to physical abuse during a medical transport. The detainee stated the transportation staff abused him. The detainee also stated that an IRDF SGT placed the handcuffs too tightly on his wrists and the SGT threatened to charge him with a rule violation for refusing to fasten his seat belt properly. The transportation officer

rechecked the handcuffs and found them to be properly secured on the detainee. On December 8, 2021, ERO San Diego was notified of the incident. ERO San Diego reviewed the incident and recommended counseling and retraining for the SGT. Per ERO San Diego the incident did not meet the criteria for JIC notification. On February 17, 2022, an IRDF LT spoke with the detainee concerning the detainee's allegations. The detainee stated the situation still upset him and he had reached out to his lawyer. ODO reviewed the DRIL line report and did not find a report made by the detainee.

## COMPLIANCE INSPECTION FINDINGS

### CARE

#### SIGNIFICANT SELF-HARM AND SUICIDE PREVENTION AND INTERVENTION (SSHSPI)

ODO reviewed ■ IRDF security suicide watch logs for ■ detainees placed on suicide watch during this inspection period and found staff did not document continuous monitoring at least every 15 minutes or more frequently if necessary. Specifically, ODO found ■ instances on the security suicide watch logs in which staff members documented their continuous monitoring of the detainee occurred between 16 and 32 minutes (**Deficiency SSHSPI-347**).

### ACTIVITIES

#### CORRESPONDENCE AND OTHER MAIL (COM)

ODO reviewed the IRDF detainee handbook and found no mention of the facility considering identity documents, such as passports, birth certificates, etc., they find in a detainee's possession as being contraband, and ICE/ERO may use as evidence against the detainee for other purposes authorized by law (**Deficiency COM-22<sup>8</sup>**).

*Corrective Action:* On February 17, 2022, the IRDF compliance manager updated the IRDF detainee handbook. Facility staff posted a memo on housing unit bulletin boards to notify all detainees of this update. ODO reviewed photos of the bulletin boards with the notification posted (**C-1**).

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<sup>7</sup> “The qualified mental health professional may place the detainee in a special isolation room designed for evaluation and treatment with continuous monitoring that must be documented every 15 minutes or more frequently if necessary.” See ICE PBNDS 2011 (Revised 2016), Standard, Significant Self-harm and Suicide Prevention and Intervention, Section (V)(F).

<sup>8</sup> “At a minimum, the notification shall specify: ...

8. That identity documents, such as passports, birth certificates, etc., in a detainee's possession are contraband and may be used by ICE/ERO as evidence against the detainee or for other purposes authorized by law (however, upon request, the detainee shall be provided a copy of each document, certified by an ICE/ERO officer to be a true and correct copy; the facility shall consult ICE/ERO with any and all requests for identity documents).”

See ICE PBNDS 2011 (Revised 2016), Standard, Correspondence and Other Mail, Section (V)(C)(8).

## CONCLUSION

During this inspection, ODO assessed the facility's compliance with 24 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 22 of those standards. ODO found two deficiencies in the remaining two standards. ODO commends IRDF staff for its responsiveness during this inspection. ODO recommends ERO San Diego work with IRDF to resolve any deficiencies that remain outstanding in accordance with contractual obligations. ERO provided ODO with the uniform corrective action plan for ODO's last inspection of IRDF on December 1, 2021.

| <b>Compliance Inspection Results Compared</b> | <b>FY 2021<br/>(PBNDS 2011)<br/>(Revised 2016)</b> | <b>FY 2022<br/>(PBNDS 2011)<br/>(Revised 2016)</b> |
|---|--|--|
| Standards Reviewed                            | 13   | 24   |
| Deficient Standards                           | 5  | 2  |
| Overall Number of Deficiencies                | 5  | 2  |
| Repeat Deficiencies                           | 2  | 0  |
| Areas Of Concern                              | 0  | 0  |
| Corrective Actions                            | 0  | 1  |
| Corrected Deficiencies                        | 0  | 0  |
| Facility Rating                               | N/A  | Superior   |