



The Nakamoto Group, Inc.

February 3, 2021

TO: [REDACTED]  
Assistant Director for Detention Management

FROM: [REDACTED]  
Lead Compliance Inspector  
The Nakamoto Group, Inc.

SUBJECT: **Annual Inspection of the Otay Mesa Detention Facility**

The Nakamoto Group, Inc. performed an annual inspection for compliance with the ICE Performance Based National Detention Standards (PBNDS 2011) of the Otay Mesa Detention Facility in San Diego, California during the period of February 1-3, 2021 This is a CDF.

The inspection was performed under the guidance of [REDACTED], Lead Compliance Inspector. Team Members were:

| Subject Matter Field | Team Member |
|----------------------|-------------|
| Detainee Rights      | [REDACTED]  |
| Security             | [REDACTED]  |
| Medical Care         | [REDACTED]  |
| Medical Care         | [REDACTED]  |
| Safety               | [REDACTED]  |

### **Type of Inspection**

This is a scheduled annual inspection which is performed to determine overall compliance with the ICE PBNDS 2011 for Over 72 hour facilities. The facility received a rating of Meets Standards during the January 2020 inspection.

### **Inspection Summary**

The Otay Mesa Detention Facility is currently accredited by:

- The American Correctional Association (ACA) – Yes
- The National Commission on Correctional Health Care (NCCHC) – Yes
- The Joint Commission (TJC) - No
- Prison Rape Elimination Act (PREA) - Yes

### **Standards Compliance**

The following information is a summary of the standards that were reviewed and overall compliance that was determined as a result of the 2020 and 2021 compliance annual inspections:



| <b>2020 Annual Inspection</b> |    |
|-------------------------------|----|
| Meets Standards               | 41 |
| Does Not Meet Standards       | 0  |
| Repeat Finding                | 0  |
| Not Applicable                | 1  |

| <b>2021 Annual Inspection</b> |    |
|-------------------------------|----|
| Meets Standards               | 41 |
| Does Not Meet Standards       | 0  |
| Repeat Finding                | 0  |
| Not Applicable                | 2  |

The inspection team identified seven (7) deficient components in the following three (3) standards:

- Admission and Release - 1
- Medical Care - 2, one of which is a Priority component
- Visitation - 4, two of which are Priority components

### Facility Snapshot/Description

The Otay Mesa Detention Facility is owned and operated by CoreCivic under contract with Immigration and Customs Enforcement (ICE). The facility is located approximately twenty-five miles South of San Diego, California, near the United States/ Mexico border.

The facility houses adult male and female detainees for ICE and the U.S. Marshals Service.

Food Service is provided by Trinity and detainee telephone services are provided by Talton. Health services were provided IHSC until September 2020 when CoreCivic began providing health services. Detainees are not charged co-pay fees for medical, dental, or mental health services.

The two-story facility houses the detention center and all of its support services network, ICE/ERO offices, court rooms, and multiple attorney visiting rooms. The direct-supervision facility has seventeen general population housing units. The ICE housing units are all configured into four to eight-bed bays divided into a two-tier wing. There are two special management units which house all populations: one 64-bed unit for males and one twelve-bed unit for females. General population ICE detainees are not housed with non-ICE detainees.

Detainees have access to televisions, board games, cards, library books, and a microwave in the dayrooms. Telephones are provided in the dayrooms for detainee use. Each general population housing unit has direct access to outdoor recreation which is available to all detainees. The facility provides a main law library and detainees also have access to LexisNexis on the computers in the housing units and on the electronic tablets. During this remote inspection, sixteen detainees were interviewed telephonically. LEP detainees were interviewed using a telephonic translation service. There were no issues or concerns expressed by detainees regarding conditions of confinement or quality of life. Detainees stated they felt safe and were satisfied with the sanitary conditions in the facility. Detainees indicated they were aware of the grievance system and how to use it. One of the detainees stated he had contacted the OIG but provided no other information. Several detainees stated that they did not like the food and the portions were too small. The safety SME reviewed the menus and found that they have been approved by a dietitian. Several detainees complained that medical services were too slow. One detainee complained that he had a sore shoulder and had been scheduled for a follow-up with a specialist and had been waiting for a month for the visit and he felt that was too long. Since he stated that he had been scheduled to see a specialist, no



follow up was done as a month is not an excessive amount of time for an appointment with a specialist. A detainee stated that his family had sent a package that he had not received and another package was received but was missing important papers. A review of the mail logs indicated that the detainee had not received any packages but he had received a certified envelope.

Due to COVID-19 this inspection was conducted remotely. The facility provided the inspection team all requested documentation, photographs, and videos as evidence of practices and procedures within the facility. In addition to these materials, staff were interviewed by the inspection team. All staff interviewed were well versed in facility policy and the requirements of the standards and were responsive to all requests made by the inspection team. The safety SME reviewed photographs and videos provided by the facility and determined that sanitation appeared to be above average.

During the inspection, optimal compliance was found while reviewing the following standards: Special Management Unit; Recreation; Telephone Access; and Law Libraries and Legal Materials. Details of these achievements are noted in the component and/or overall remarks of each standard listed.

The facility has an aggressive COVID-19 prevention program in place. There are currently two ICE detainees who have tested positive for COVID-19 and several housing units are on COHORT status.

### **Areas of Concern/Significant Observations**

Priority Components rated Does Not Meet Standard.

#### **Standard 4.3 Medical Care**

*Component # 37 - PRIORITY:* The facility performs mental health intake screenings, as well as mental health evaluations based on screening results, the comprehensive health assessment, medical documentation, or subsequent observations, that include prior history of mental health treatment, medications, drug use, suicidal tendencies and abuse, observations of current physical and intellectual condition, and recommendations for any appropriate medical or custodial treatment. If the practitioner is not a mental health provider and further referral is necessary, the detainee will be evaluated by a mental health provider within the next business day.

Detainees are appropriately referred to a mental health provider for diagnosis, treatment, and/or intervention, and transferred to licensed mental health facilities where detainee mental health needs exceed the capabilities of the facility.

*Finding:* Two detainees were identified with mental health issues (history of sexual assault, psychotropic medication, and recent suicide attempt) on their mental health intake screening forms. The intake was completed by an RN and both were referred to mental health for urgent evaluations. One was seen by mental health three days later, and the other detainee was seen thirteen days later.

*Recommendation:* Mental health evaluations should be completed within the next business day.

#### **Standard 5.7 Visitation**

*Component # 5 – PRIORITY:* General visitation is permitted during set hours on Saturdays, Sundays, and holidays, and, to the extent practicable, the facility also establishes visiting hours on weekdays and during evening hours. The facility accommodates the scheduling needs of visitors for whom scheduled visiting



hours pose a hardship. The number of visitors a detainee receives and the length of visits are limited only by reasonable constraints of space, scheduling, staff availability, safety, security, and good order.

*Finding:* General visitation has been suspended since March 2020 due to COVID-19 concerns. There is a video visitation option available on the electronic tablets available to detainees in the housing units; however, video visits are not free. Indigent detainees do not have access to general visitation. The facility has continued to provide legal visitation.

*Recommendation:* The facility should provide an equal opportunity for detainees to participate in general visitation without paying a fee.

*Component #9 – PRIORITY:* The facility’s written rules shall specify time limits for visits. Visits should be for the maximum period practicable but not less than one hour with special consideration given to family circumstances and individuals who have traveled long distances.

*Finding:* General visitation has been suspended since March 2020 due to COVID-19 concerns. There is a video visitation option available on the electronic tablets in the housing units; however, video visits are not free. Indigent detainees do not have access to general visitation. The facility has continued to provide legal visitation.

*Recommendation:* The facility should provide an equal opportunity for detainees to participate in general visitation without paying a fee.

### **Recommended Rating and Justification**

The Lead Compliance Inspector recommends that the facility receive a rating of Meets Standards. The facility complies with the ICE Performance Based National Detention Standards (PBNDS 2011) unless unobserved practices and conditions are contrary to what was reported to the inspection team. No standards were found Does Not Meet Standard and two (2) standards were Not Applicable (N/A). All remaining forty-one (41) standards were found to Meet Standards.

### **LCI Assurance Statement**

The findings of compliance and non-compliance are accurately and completely documented on the G-324 Inspection Form and are supported by documentation in the inspection file. A telephone call-in out brief was conducted with the facility. In addition to the entire Nakamoto Group Inspection Team, the following participated in the conference call:

- ICE Officials – [REDACTED]
- Facility staff – [REDACTED]



The Nakamoto Group, Inc.

[Redacted]

[Redacted]

[Redacted], Lead Compliance Inspector

February 3, 2021

Printed Name of LCI

Date

[Redacted]