

January 27, 2022

TO:

Acting Assistant Director Custody Management

FROM:

Lead Compliance Inspector The Nakamoto Group, Inc.

SUBJECT: Annual Inspection of the Otero County Processing Center

The Nakamoto Group, Inc. performed an annual hybrid inspection for compliance with the ICE Performance-Based National Detention Standards (PBNDS) 2011 of the Otero County Processing Center in Chaparral, New Mexico during the period of January 25-27, 2022. This is a DIGSA facility.

The inspection was performed under the guidance of Lead Compliance Inspector. Team members were:

Subject Matter Field	Team Member
Detainee Rights	
Security	
Medical Care	
Medical Care	
Safety	

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 previous rating of Meet Standards during the January 2021 annual inspection.

Inspection Summary

The Otero County Processing Center 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 2021 annual inspection and 2022 annual inspection:



2021 Annual Inspection	
Meets Standard	40
Does Not Meet Standard	0
Repeat Finding	0
Not Applicable	3

2022 Annual Inspection	
Meets Standard	40
Does Not Meet Standard	0
Repeat Finding	0
Not Applicable	3

No deficient components were identified by the inspection team.

Facility Snapshot/Description

The Otero County Processing Center (OCPC) was built in 2008 and is located in Chaparral, New Mexico, approximately 25 miles north of El Paso, Texas. The facility is owned by Otero County and operated by Management and Training Corporation (MTC). This Dedicated IGSA (DIGSA) facility has an operational capacity of 1,000 beds and employs the direct model of supervision to all custody levels of adult male detainees. ICE official offices are located on-site. Four courtrooms are available for immigration judicial reviews. The count on the first day of the inspection was

Detainees are housed in dormitory style living quarters. Detainees are housed and recreate with detainees in compatible custody levels. Each of the twenty dormitories has a self-bed capacity. The facility maintains a bed special management unit (SMU). The SMU (referred to as Restricted Housing Unit) cells are doubled bunked. However, detainees are housed individually. A fifteen-bed medical housing area is available for short term medical care. Living units were observed to be well lit with both natural and artificial light and have adequate open space for detainees. The dayrooms in each of the housing units are furnished with tables and chairs for detainees to participate in leisure time activities and socializing. Board games, leisure reading material, playing cards, and televisions are among the amenities available to detainees. Electronic tablets are available in the living units to communicate with family and friends, video visitation, and submitting electronic requests to ICE officials and facility staff. A large outdoor recreation yard is used to play soccer, volleyball, jog or walk. The large outdoor recreation yard is supplemented by four smaller outdoor recreation areas offering basketball and handball courts and access to stationary exercise equipment. Indoor recreation areas include the dayroom portions of each housing unit and two multi-purpose rooms equipped with stationary exercise equipment, video games, and table tennis. General visitation and group religious services have been suspended due to COVID-19 restrictions. Video visitation is available on the electronic tablets for a fee. This DIGSA facility has initiated the ICE authorized Phased Plan to Return to Social Visitation. Visits from legal representatives have not been suspended. Other COVID-19 response operational changes include all newly received detainees have been/are quarantined and COVID-19 tested upon admission. Each detainee is provided 520 free minutes per month in the absence of general visitation.

The facility is climate controlled and in good repair. All staff interviewed were well-versed in facility guidelines, operating procedures, and the National Detention Standards. Officers and staff were professional during interviews.

Five formal detainee interviews were conducted. LEP detainees gave no indications, nor made any claims, that they were not safe. They further did not complain about any issues with access to services or communication in the housing units. Detainee one expressed concerned about anxiety causing a pressure in his chest; medical staff was advised and the SME was informed that the detainee has been seen by mental health (MH) professionals within the past two weeks and started a medication regiment. He was also scheduled to see MH today. Detainee two expressed concerned about a delay to be seen on sick call;



medical staff was advised and the SME was informed that the detainee has never submitted a sick call request. Staff was assigned to assist the detainee. Detainee three expressed concerned about having a toothache and only getting medication for pain "which does not resolve the problem"; medical staff was advised. The detainee was seen on 01/23/2022 during sick call; he was also seen by the dentist on 01/11/2022 who recommended extraction of the tooth pending off-site appointment. Detainee four expressed concern about "other detainees hygiene practices in the dorm". The quality assurance manager was advised. The staff are aware of the concern. Detainee hygiene education is an ongoing process. Detainee four had no issues or concerns. All five detainees stated "they feel quite safe at this facility".

No additional detainees volunteered to be interviewed formally "unless we could discuss their case(s)". Thirty-one detainees were interviewed informally in the housing units, recreation yard, kitchen, and library. Each detainee interviewed felt safe, has had contact with an ICE representative, and understands how to use the tablets to communicate. Each stated that the "food is good and cleaning supplies are provided in the units". Several detainees commented on the puzzle program and confirmed that recreation is provided daily. Each detainee stated staff were professional and addressed their questions/needs promptly.

Eight detainees, without exception, expressed: "they feel safe, food is good, medical services are available and telephone services are available". The detainees stated the phones, tablets, showers and toilets work properly. They were knowledgeable of the OIG telephone number. They all stated they received both the local and national handbooks. They stated they know how to use and requests chemicals for sanitation purposes and know where the SDS sheets are located at in the housing units.

One detainee stated he attempted to communicate with ICE by utilizing the tablet and was not receiving any response. Documentation confirmed six responses to the detainee from ICE officials. The detainee did not file a grievance or contact the OIG hotline. He was aware of the options.

Detainees that expressed a concern were asked if they had submitted their concerns to the Office of Inspector General. No detainee reported that they had submitted their concerns to the Office of Inspector General.

Sanitation level of the facility was observed to be above average.

Medical services are provided by MTC Medical. All other services are provided by MTC employees. The facility does not charge co-pays for medical, mental health, or dental care.

Detainee telephone and electronic tablet services are provided by Talton Communications.

Areas of Concern/Significant Observations

The inspection was conducted as a hybrid. Four inspectors were on-site and one inspector worked remotely. The facility provided the remote inspector all requested documentation and photographs as evidence of practices and procedures within the facility. In addition to these materials, staff were interviewed by the inspection team.

Optimal compliance was confirmed in the following standards: Admission and Release; Special Management Unit; Medical Care; Significant Self Harm and Suicide Prevention and Intervention; Terminal Illness, Advance Directives, and Death; Recreation; Use of Force; and Telephone Access.



Recommended Rating and Justification

The Lead Compliance Inspector recommends that the facility receive a rating of Meets Standards unless unobserved practices and conditions are contrary to what was reported to the inspection team. The facility complies with the ICE Performance-Based National Detention Standards (PBNDS). No (0) standards were found Does Not Meet Standard and three (3) standards were Not Applicable (N/A). All remaining forty (40) standards were found to Meet Standards.

LCI Assurance Statement

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

• ICE Officials —

• Facility Staff —

Lead Compliance Inspector January 27, 2022
Printed Name of LCI Date