June 3, 2022

TO:  
[Name Redacted]  
Acting Assistant Director Custody Management

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

SUBJECT:  Annual Inspection of the San Luis Regional Detention Center

The Nakamoto Group, Inc. performed an annual inspection for compliance with the ICE National Detention Standards (NDS 2019) of the San Luis Regional Detention Center in San Luis, AZ during the period of June 1-3, 2022. This is an IGSA.

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

<table>
<thead>
<tr>
<th>Subject Matter Field</th>
<th>Team Member</th>
</tr>
</thead>
<tbody>
<tr>
<td>Detainee Rights</td>
<td>[Name Redacted]</td>
</tr>
<tr>
<td>Security</td>
<td>[Name Redacted]</td>
</tr>
<tr>
<td>Medical Care</td>
<td>[Name Redacted]</td>
</tr>
<tr>
<td>Medical Care</td>
<td>[Name Redacted]</td>
</tr>
<tr>
<td>Safety</td>
<td>[Name Redacted]</td>
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**Type of Inspection**

This is a scheduled annual inspection, performed to determine overall compliance with the ICE NDS 2019 for Over 72-hour facilities. The facility received a rating of Meets Standards during the April 2021 inspection.

**Inspection Summary**

The San Luis Regional Detention Center is currently accredited by:
- The American Correctional Association (ACA) – No
- The National Commission on Correctional Health Care (NCCHC) – No
- 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 and 2022 annual compliance inspections:

Page 1 of 3
<table>
<thead>
<tr>
<th>2021 Annual Inspection</th>
<th>2022 Annual Inspection</th>
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<tbody>
<tr>
<td>Meets Standards</td>
<td>31</td>
</tr>
<tr>
<td>Does Not Meet Standards</td>
<td>0</td>
</tr>
<tr>
<td>Repeat Finding</td>
<td>0</td>
</tr>
<tr>
<td>Not Applicable</td>
<td>2</td>
</tr>
</tbody>
</table>

The inspection team identified five (5) deficient components in the following four (4) standards:

- Food Service – 1
- Medical Care – 2
- Staff/Detainee Communication – 1
- Telephone Access -1

**Facility Snapshot/Description**

The San Luis Regional Detention Center is located approximately twenty miles south of Yuma, Arizona on the Mexican border. The [redacted] facility, an IGSA owned by the city of San Luis and operated by LaSalle Corrections West, houses male and female detainees for the U. S. Marshals and local agencies, and adult male and female ICE detainees of all classification levels.

The facility is comprised of two single-story buildings surrounded by dual chain-link fences supplemented with razor ribbon. The compound is encircled by a perimeter road patrolled by an armed officer 24 hours a day. The perimeter is also camera surveillance monitored by central control officers. There are [redacted] housing units ranging in size/configuration from [redacted] cells to [redacted] dormitories. The restricted housing unit (RHU) consists of [redacted] cells; it houses disciplinary and administrative segregation status detainees. ICE detainees are housed separately from detainees from other jurisdictions.

Medical housing capabilities include [redacted] negative pressure rooms and [redacted] suicide observation rooms. The medical department provides medical services to detainees 24 hours a day. Sick call is conducted daily.

Inspectors visited all areas of the facility during the inspection. The facility was observed to be well-maintained with acceptable sanitation levels. It was noted that there were flies in several areas of the facility. Staff reported this is a problem in the area at this time of the year and that steps were being taken to attempt to eradicate them.

During visits to the housing units, a total of 27 detainees were interviewed informally in a non-confidential setting. A total of eighteen detainees agreed to be interviewed in a private, confidential setting. All of the detainees stated they were treated respectfully by staff, they felt safe, and that the food was good. Detainees reported that the telephones worked and that all of their questions were answered by staff. Two detainees stated they had been in the facility for four days and had only been out for recreation one time. The inspector reviewed the recreation logs for their housing unit and interviewed staff. It was determined that recreation had been offered each day, but the detainees had not gone outside. One female detainee stated that she felt that medical staff was slow in responding to her complaint. She did not pro-
vide any specific information and it was determined that she had only been in the facility four days. None of the detainees had filed a grievance nor had they contacted the Office of the Inspector General (OIG).

The facility provided the inspection team all requested documentation as evidence of practices and procedures within the facility. 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. Sanitation throughout the facility was average.

LaSalle Corrections West employees provide all facility services. Detainees are not charged co-pay fees for medical, dental, or mental health services.

**Areas of Concern/Significant Observations**

This was a hybrid inspection with one inspector working remotely and the remainder of the inspection team working on site. The remote inspector was unable to personally observe practices and procedures within the facility. The remote inspector relied upon photographs and/or videos to validate the observation of many standards.

There were no areas of concern or significant observations noted during the inspection.

**Recommended Rating and Justification**

The Lead Compliance Inspector recommends that the facility receive a rating of Meet Standard. The facility complies with the ICE National Detention Standards (NDS 2019) unless unobserved practices and conditions are contrary to what was reported to the inspection team. No (0) standards were found Does Not Meet Standard, two (2) standards were Not Applicable (N/A). The remaining thirty-one (31) 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. An out brief was conducted telephonically with facility and ICE representatives. In addition to the Nakamoto Group on-site inspectors, the following participated:

- **ICE Officials**
- **Facility Staff**

[Redacted names]

**Lead Compliance Inspector**

June 3, 2022

Date