



The Nakamoto Group, Inc.

November 25, 2020

TO: [REDACTED]
Assistant Director for Detention Management

FROM: [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, Arizona, during the period of November 23-25, 2020. This is an IGSA.

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 NDS 2019 for Over 72 hour facilities. The facility received a rating of Acceptable during the May 2019 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 2019 and 2020 compliance annual inspections:



2019 Annual Inspection	
Meets Standards	37
Does Not Meet Standards	0
Repeat Finding	0
Not Applicable	2

2020 Annual Inspection	
Meets Standards	31
Does Not Meet Standards	0
Repeat Finding	0
Not Applicable	2

The inspection team identified nine (9) deficient components in the following five (5) standards:

- Environmental Health and Safety - 2
- Staff-Detainee Communication - 3
- Medical Care - 1
- Suicide Prevention and Intervention - 2
- Law Library and Legal Materials - 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, houses male and female detainees for the U. S. Marshals and adult male and female ICE detainees of all classification designations. [REDACTED]

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

The facility is comprised of two single-story buildings surrounded by dual chain-link fences supplemented with razor ribbon and barbed wire. The compound is encircled by a perimeter road patrolled by an armed officer 24 hours a day. The perimeter is also under camera surveillance monitored by central control officers. There are 37 housing units ranging in size/configuration from one-bed cells to 48-bed dormitories. The restricted housing unit (RHU) consists of 36 single cells; it houses disciplinary and administrative segregation status detainees. ICE detainees are housed separately from detainees from other jurisdictions.

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

Three male and one female detainee from the general population housing units were interviewed by telephone. These interviews were conducted in a confidential manner. One detainee was interviewed using the language line as the detainee was LEP. None of the detainees expressed any concerns about their overall treatment. They all stated they are treated respectfully by security officers and felt safe. All stated they were offered outdoor recreation each day and the televisions and telephones worked. There were no complaints about access to medical care or the treatment received. Two detainees stated they were taking medication and had no complaints about receiving their medication. They all stated the living units were clean and the sinks, toilets, and showers were in good working order. All stated the food was good. All four detainees reported they had received a copy of the local handbook upon admission to the facility. A single detainee reported he had used the law library and had no complaints about access to the law library.



All of the detainees reported they knew how to file a grievance and were aware of the OIG phone number. One detainee reported having filed a grievance and receiving a response which satisfied her. No detainee reported having called the OIG.

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 facility appears to be well-maintained with acceptable sanitation levels in all areas.

The facility has developed a COVID-19 plan to limit exposures/infections. All newly admitted detainees are on COHORT status for fourteen days. During the inspection there were no ICE detainees that had tested positive for COVID-19.

Areas of Concern/Significant Observations

There were no areas of concern or significant observations noted during the inspection. The inspection was conducted remotely and inspectors were unable to personally observe practices and procedures within the facility. The inspection team relied upon photographs and/or videos to validate the observation of many standards.

Recommended Rating and Justification

The Lead Compliance Inspector recommends that the facility receive a rating of Meets Standards. 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 Standards and two (2) standards were Not Applicable (N/A). All 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. A telephone, call-in out brief was conducted with the facility. In addition to the entire Nakamoto Group, Inc. Inspection Team, the following participated in the conference call:

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

[REDACTED]

[REDACTED], Lead Compliance Inspector

November 25, 2020

Printed Name of LCI

Date

[REDACTED]