



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

**Office of Detention Oversight
Compliance Inspection**

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

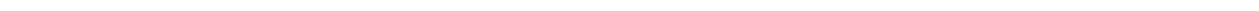
**Otay Mesa Detention Center (San Diego CDF)
San Diego, California**

October 25-28, 2021

COMPLIANCE INSPECTION
of the
OTAY MESA DETENTION CENTER (SAN DIEGO CDF)
San Diego, California

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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 Otay Mesa Detention Center (San Diego CDF) (SDCDF) in San Diego, California, from October 25 to 28, 2021.¹ The facility opened in 2015 and is owned and operated by CoreCivic. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at SDCDF in 2015 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 the facility. An SDCDF warden handles daily facility operations and manages █████ support personnel. Trinity Food Service provides food services, and CoreCivic provides medical care and commissary services at the facility. The facility was accredited by the American Correctional Association in January 2020.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity ²	█████
Average ICE Detainee Population ³	█████
Male Detainee Population (as of October 25, 2021)	█████
Female Detainee Population (as of October 25, 2021)	█████

During its last inspection, in Fiscal Year (FY) 2021, ODO found five deficiencies in the following areas: Admission and Release (2); Funds and Personal Property (1); Special Management Units (1); and Medical Care (1).

¹ This facility holds male and female detainees with low, medium-low, medium-high, and high security classification levels for periods longer than 72 hours.

² Data Source: ERO Facility List Report as of September 27, 2021.

³ *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 longer than 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.⁴

ODO identifies violations of ICE detention standards, ICE policies, or operational procedures as “deficiencies.” ODO also highlights instances in which 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 their 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.

⁴ ODO reviews the facility’s compliance with selected standards in their entirety.

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

PBNDS 2011 (Revised 2016) Standards Inspected⁵	Deficiencies
Part 1 – Safety	
Emergency Plans	0
Environmental Health and Safety	0
Sub-Total	0
Part 2 – Security	
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
Sub-Total	0
Part 4 – Care	
Food Service	0
Hunger Strikes	0
Medical Care	1
Medical Care (Women)	0
Personal Hygiene	0
Significant Self-Harm and Suicide Prevention and Intervention	0
Sub-Total	1
Part 5 – Activities	
Correspondence and Other Mail	0
Trips for Non-Medical Emergencies	0
Marriage Requests	0
Voluntary Work Program	0
Sub-Total	0
Part 6 – Justice	
Legal Rights Group Presentations	0
Sub-Total	0

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

Part 7 – Administration and Management	
Detention Files	0
Interviews and Tours	0
Detainee Transfers	0
Sub-Total	0
Total Deficiencies	1

DETAINEE RELATIONS

ODO interviewed 12 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. All detainees reported satisfaction with facility services. ODO conducted detainee interviews via video teleconference.

COMPLIANCE INSPECTION FINDINGS

CARE

MEDICAL CARE (MC)

ODO reviewed ■■■ medical staff training records and found ■■■ mid-level provider did not have a current cardiopulmonary resuscitation training documented in their training record (**Deficiency MC-193**⁶).

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 23 of those standards. ODO found one deficiency in the remaining one standard. ODO commends facility staff members for their responsiveness during this inspection. ODO recommends ERO work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations. ODO has not received the uniform corrective action plan for ODO’s last inspection of SDCDF in April 2021.

⁶ “Each facility shall have a written emergency services plan for delivery of 24-hour emergency health care. This plan shall be prepared in consultation with the facility’s CMA or the HSA, and must include the following: ...
d. all detention and medical staff shall receive cardiopulmonary resuscitation (CPR, AED), and emergency first aid training annually.” *See* ICE PBNDS 2011, Standard, Medical Care, Section (V)(T)(1)(c).

Compliance Inspection Results Compared	Second FY 2021 (PBNS 2011) (Revised 2016)	First FY 2022 (PBNS 2011) (Revised 2016)
Standards Reviewed	14	24
Deficient Standards	4	1
Overall Number of Deficiencies	5	1
Repeat Deficiencies	0	0
Areas of Concern	0	0
Corrective Actions	0	0
Facility Rating	N/A	Superior