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U.S. Immigration and Customs Enforcement Office of Professional Responsibility ICE Inspections Washington, DC 20536-5501

Office of Detention Oversight Follow-Up Compliance Inspection 2023-002-101

Enforcement and Removal Operations ERO San Diego Field Office

San Luis Regional Detention Center San Luis, Arizona

May 16-18, 2023

FOLLOW-UP COMPLIANCE INSPECTION of the SAN LUIS REGIONAL DETENTION CENTER

San Luis, Arizona

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FOLLOW-UP COMPLIANCE INSPECTION TEAM MEMBERS

Team Lead	ODO
Senior Inspections and Compliance Specialist	ODO
Inspections and Compliance Specialist	ODO
Contractor	Creative Corrections

FACILITY OVERVIEW

The U.S. Immigration and Customs Enforcement (ICE) Office of Professional Responsibility (OPR) Office of Detention Oversight (ODO) conducted a follow-up compliance inspection of the San Luis Regional Detention Center (SLRDC) in San Luis, Arizona, from May 16 to 18, 2023. This inspection focused on the standards found deficient during ODO's last inspection of SLRDC from November 15 to 17, 2022. The facility opened in 2007 and is owned by the City of San Luis and operated by LaSalle Corrections. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at SLRDC in 2011 under the oversight of ERO's Field Office Director in San Diego (ERO San Diego). The facility operates under the National Detention Standards (NDS) 2019.

ERO deportation officers are not assigned full-time to the facility but conduct weekly scheduled visits on Mondays, Wednesdays, and Fridays, from 11:00 a.m. to 12:00 p.m., and conduct unscheduled weekly visits. A warden handles daily facility operations and manages support personnel. LaSalle Corrections provides food services, medical care, and commissary services at the facility. In February 2023, SLRDC was audited for the Department of Homeland Security (DHS) Prison Rape Elimination Act (PREA) and was DHS PREA certified.

Capacity and Population Statistics	Quantity	
ICE Bed Capacity ²		
Average ICE Population ³		
Adult Male Population (as of May 16, 2023)	-	
Adult Female Population (as of May 16, 2023)		

During its last full inspection, in Fiscal Year (FY) 2023, ODO found five deficiencies in the following areas: Disability Identification, Assessment, and Accommodation (1); Medical Care (2); Significant Self-Harm and Suicide Prevention and Intervention (1); and Staff-Detainee Communication (1).

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

² Data Source: ERO Facility List as of May 8, 2023.

³ Ibid.

FOLLOW-UP COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population of 10 or more detainees, 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. In FY 2021, to meet congressional requirements, ODO began conducting follow-up inspections at all ICE ERO detention facilities, which ODO inspected earlier in the FY.

While follow-up inspections are intended to focus on previously identified deficiencies, ODO will conduct a complete review of several core standards, which include but are not limited to Medical Care, Suicide Prevention, Food Service, Environmental Health and Safety, Emergency Plans, Use of Force and Restraints/Use of Physical Control Measures and Restraints, Admission and Release, Classification, and Funds and Personal Property. ODO may decide to conduct a second full inspection of a facility in the same FY based on additional information obtained prior to ODO's arrival on-site. Factors ODO will consider when deciding to conduct a second full inspection will include the total number of deficiencies cited during the first inspection, the number of deficient standards found during the first inspection, the completion status of the first inspection's uniform corrective action plan (UCAP), and other information ODO obtains from internal and external sources ahead of the follow-up compliance inspection. Conditions found during the inspection may also lead ODO to assess new areas and identify new deficiencies or areas of concern should facility practices run contrary to ICE standards. Any areas found non-compliant during both inspections are annotated as "Repeat Deficiencies" in this report.

FINDINGS BY NATIONAL DETENTION STANDARDS 2019 **MAJOR CATEGORIES**

NDS 2019 Standards Inspected ^{4,5}	Deficiencies
Part 1 - Safety	
Environmental Health and Safety	1
Sub-Total	1
Part 2 - Security	
Admission and Release	0
Custody Classification System	0
Facility Security and Control	0
Funds and Personal Property	0
Use of Force and Restraints	0
Special Management Units	0
Staff-Detainee Communication	0
Sub-Total	0
Part 4 - Care	•
Food Service	0
Medical Care	0
Significant Self-Harm and Suicide Prevention and Intervention	0
Terminal Illness and Death	0
Disability Identification, Assessment, and Accommodation	0
Sub-Total	0
Part 5 - Activities	•
Recreation	0
Telephone Access	0
Sub-Total	0
Part 6 - Justice	
Grievance System	0
Sub-Total	0
Total Deficiencies	1

For greater detail on ODO's findings, see the *Follow-up Compliance Inspection Findings* section of this report.
Beginning in FY 2022, ODO instituted a process of rotating all standards on a 3-year basis. As a result, some standard components may not be present in all standards.

DETAINEE RELATIONS

ODO interviewed 12 detainees, who each voluntarily agreed to participate. ODO attempted to interview the other detainees at the facility, but they declined ODO's request for an interview. None of the detainees made allegations of discrimination, mistreatment, or abuse. All detainees reported satisfaction with facility services.

FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

SAFETY

ENVIRONMENTAL HEALTH AND SAFETY (EHS)

ODO reviewed the facility's EHS policy and procedure, toured the facility, and found the facility did not maintain environmental health conditions at a level, which met recognized standards of hygiene. Specifically, ODO toured three detainee housing units and found in three out of three units, lime buildup and soap scum on the floors, walls, stainless steel fixtures and curtains. Additionally, ODO found multiple open bottles of hygiene products, trash in the shower areas, and toothpaste stains in the sinks of two of out of three housing units (**Deficiency EHS-58**⁶).

ODO toured the barbershop and found the following items at an exceptional level of service: procedures, sanitation, security, accountability of tools, and chemicals. Specifically, the facility maintained a barbershop scheduling log, a barbershop daily inventory log, a daily cleaning and disinfection log for barbershop hair cutting tools, barbicide weekly exchange logs, and posted sanitation requirements. Additionally, the facility staffed the barbershop with an officer to ensure a high-level of security and sanitation. ODO cites this high-level of safety and sanitation as a **Best Practice**.

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 16 standards under NDS 2019 and found the facility in compliance with 15 of those standards. ODO found one deficiency in the remaining standard. Since SLRDC's last full inspection in November 2022, the facility's overall compliance has trended upward. SLRDC went from four deficient standards and five deficiencies in November 2022 to one deficient standard and one deficiency during this most recent inspection. However, the standard ODO found deficient was the EHS standard, which SLRDC did not have a deficiency in during the FY 2023 full inspection. ERO San Diego improved in the SDC standard by implementing a digital record keeping system to log detainee requests. The facility's high-level of compliance is likely the result of completing a uniform corrective action plan for ODO's last inspection of SLRDC in November 2022. ODO recommends ERO San Diego continue to work with the facility to resolve the remaining deficiency in accordance with contractual obligations.

⁶ "Environmental health conditions will be maintained at a level that meets recognized standards of hygiene." *See* ICE NDS 2019, Standard, Environmental Health and Safety, Section (II)(I).

Compliance Inspection Results Compared	FY 2023 Full Inspection (NDS 2019)	FY 2023 Follow-Up Inspection (NDS 2019)
Standards Reviewed	20	16
Deficient Standards	4	1
Overall Number of Deficiencies	5	1
Priority Component Deficiencies	0	0
Repeat Deficiencies	0	0
Areas Of Concern	0	0
Corrective Actions	1	0
Facility Rating	Superior	N/A