



**U.S. Department of Homeland Security**  
U.S. Immigration and Customs Enforcement  
Office of Professional Responsibility  
Inspections and Detention Oversight Division  
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Office of Detention Oversight  
Compliance Inspection

Enforcement and Removal Operations  
ERO San Diego Field Office

Imperial Regional Detention Facility  
Calexico, California

August 24-28, 2020

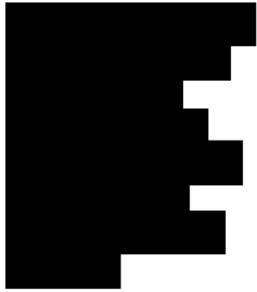
**COMPLIANCE INSPECTION**  
**of the**  
**IMPERIAL REGIONAL DETENTION FACILITY**  
Calexico, California

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## COMPLIANCE INSPECTION TEAM MEMBERS



Section Chief, Team Lead	ODO
Inspections and Compliance Specialist	ODO
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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 compliance inspection of the Imperial Regional Detention Facility (IRDF) in Calexico, California, from August 24-28, 2020.<sup>1</sup> The facility opened in 2014 and is operated by Management and Training Corporation (MTC) and owned by Imperial Valley Gateway Center, LLC. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at IRDF in 2014 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 (DOs) and a detention service manager to the facility. An IRDF facility administrator handles daily facility operations and is supported by [REDACTED] personnel. IRDF staff provides food services, MTC Medical provides medical care, and Keefe Group provides commissary services at the facility. The facility was accredited by the American Correctional Association in January 2019 and the National Commission on Correctional Health Care in February 2020.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity <sup>2</sup>	704
Average ICE Detainee Population <sup>3</sup>	528
Male Detainee Population (as of 8/24/2020)	241
Female Detainee Population (as of 8/24/2020)	31

During its last inspection, in Fiscal Year (FY) 2018, ODO conducted an inspection of IRDF and found 10 deficiencies in the following areas: Admissions and Release (3); Contraband (1); Disability Identification, Assessment, and Accommodation (1); Environmental Health and Safety (1); Telephone Access (2); and Use of Force and Restraints (2).

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

<sup>2</sup> Data Source: ERO Facility List Report as of August 17, 2020.

<sup>3</sup> *Ibid.*

## COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population greater than ten, 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.<sup>4</sup>

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.

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<sup>4</sup> 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 Inspected <sup>5</sup>	Deficiencies
<b>Part 1 – Safety</b>	
Environmental Health and Safety	0
<b>Sub-Total</b>	<b>0</b>
<b>Part 2 – Security</b>	
Admission and Release	0
Custody Classification System	0
Funds and Personal Property	0
Sexual Abuse and Assault Prevention and Intervention	0
Special Management Units	0
Staff-Detainee Communication	2
Use of Force and Restraints	1
<b>Sub-Total</b>	<b>3</b>
<b>Part 4 – Care</b>	
Food Service	2
Medical Care	0
Medical Care (Women)	0
Significant Self-harm and Suicide Prevention and Intervention	0
Disability Identification, Assessment, and Accommodation	0
<b>Sub-Total</b>	<b>2</b>
<b>Part 5 – Activities</b>	
Recreation	1
Religious Practices	0
Telephone Access	0
Visitation	1
<b>Sub-Total</b>	<b>2</b>
<b>Part 6 – Justice</b>	
Grievance Systems	0
Law Libraries and Legal Material	0
<b>Sub-Total</b>	<b>0</b>
<b>Total Deficiencies</b>	<b>7</b>

<sup>5</sup> For greater detail on ODO's findings, see the *Compliance Inspection Findings* section of this report.

## DETAINEE RELATIONS

ODO interviewed 14 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. Most detainees reported satisfaction with facility services except for the concerns listed below. ODO conducted detainee interviews via video teleconference.

*Staff-Detainee Communication:* Five female detainees complained about communication issues with the facility and ICE/ERO San Diego staff. Also, the detainees received the ICE National Detainee and facility handbooks upon admission to the facility; however, the handbooks were in English, which they did not comprehend since the detainees spoke Chinese Mandarin. Additionally, the detainees did not know how to use the tablets, which were used in all the housing units by detainees for various modes of communication.

- Action Taken: ODO informed the facility and ICE/ERO San Diego staff about the sporadic communication between the female detainees and staff members. On Tuesday, August 25, 2020, the facility compliance supervisor and admissions and release (A&R) officer spoke with the detainees using the Language Translation Line (LTL). The facility staff members explained how to use the tablet to communicate with the housing unit officers, DOs, and submit requests. The rules and responsibilities of the facility were also explained and understood by the detainees. In addition, the detainees were given the ICE National Detainee Handbook in Chinese and the compliance supervisor and A&R officer reviewed the facility detainee handbook using the LTL. The facility staff members also explained the recreation schedule, the law library schedule, and how to ask for additional time if desired to research the necessary information needed for their cases. ODO followed up with the female detainees on Wednesday, August 26, 2020, via video conferencing using the LTL and determined the detainees were satisfied with how the communication concern was resolved.

*Environmental Health and Safety:* Three female detainees stated the hot water in the shower was extremely hot.

- Action Taken: ODO reviewed the pictures sent by the facility of the temperatures being taken of the hot water from the shower in the women's dorm. A reading of 106.2 degrees Fahrenheit was displayed on the thermometer, which falls between the required temperature of 100 – 120 degrees Fahrenheit per the standard. Water temperature logs were not required to be kept for the housing units by the facility.

*Medical Care:* One male detainee complained about having difficulty urinating.

- Action Taken: ODO reviewed the detainee's medical record and determined the detainee submitted a sick call request on July 31, 2020, because he was having difficulty urinating. He was seen by a registered nurse (RN) and the detainee reported having a history of kidney stones usually with pain and burning when urinating. A urine test was ordered and the results were negative. The detainee was instructed to drink plenty of water and he was referred to the nurse practitioner (NP). The NP saw the detainee on August 11, 2020, and the plan was for labs and an abdominal x-ray to be completed.

The detainee was seen again by the NP on August 24, 2020, in which the labs and x-ray were negative, which was shared with the detainee.

*Medical Care:* One female detainee complained about having dental issues.

- Action Taken: ODO reviewed the detainee's medical record and determined the detainee was seen for a dental screening on June 3, 2020, by the RN. The detainee stated she experienced discomfort from her left upper tooth for two months. The detainee was given a routine referral to see the dentist on July 10, 2020. The dentist said she had mild swelling near her left nostril, and he advised the detainee to take medication, get a root canal therapy, or get an extraction. The detainee conveyed she only wanted medication and the dentist told her medication alone would not cure the dental issue. The dentist prescribed an antibiotic for 10-days, ibuprofen for 10-days, and Tylenol for 21-days. The detainee was educated on taking the medication and given discharge instructions.

# COMPLIANCE INSPECTION FINDINGS

## SECURITY

### STAFF-DETAINEE COMMUNICATION (SDC)

ODO reviewed ICE/ERO San Diego's electronic detainee request logs and determined the log was missing the date the request, with the staff response and action, was returned to the detainee (**SDC-1<sup>6</sup>**).

ODO reviewed ICE/ERO San Diego's electronic detainee requests and determined 6 out of 232 requests were not answered within three business days of receipt (**SDC-2<sup>7</sup>**).

### USE OF FORCE AND RESTRAINTS (UOF&R)

ODO reviewed 8 UOF packets and discovered 8 out of 8 UOF packets did not include the required number of team members for the after-action review team (**Deficiency UOF&R-1<sup>8</sup>**).

## CARE

### FOOD SERVICE (FS)

ODO reviewed pictures and a nutritional analysis of sack lunches provided to detainees and determined the lunches lacked the minimum requirement of two sandwiches, one of which shall contain a meat (non-pork) product (**Deficiency FS-1<sup>9</sup>**).

ODO reviewed 1,044 hot water temperature logs; however, 1,017 out of 1,044 log entries were not between 105-120 degrees Fahrenheit as required (**Deficiency FS-2<sup>10</sup>**).

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<sup>6</sup> "All requests shall be recorded in a logbook (or electronic logbook) specifically designed for that purpose. At a minimum, the log shall record: f. date that the request, with staff response and action, was returned to the detainee." See ICE PBNDS 2011, Standard, Staff-Detainee Communication, Section, (V)(B)(2)(f).

<sup>7</sup> "a. In Facilities with ICE/ERO Onsite Presence the ICE/ERO staff member receiving the request shall normally respond in person or in writing as soon as possible and practicable, but no later than within three (3) business days of receipt." See ICE PBNDS 2011, Standard, Staff-Detainee Communication, Section, (V)(B)(1)(a).

<sup>8</sup> "The facility administrator, the assistant facility administrator, the Field Office Director's designee and the health services administrator (HSA) shall conduct the after-action review. This four-member after-action review team shall convene on the workday after the incident. The after-action review team shall gather relevant information, determine whether policy and procedures were followed, make recommendations for improvement, if any, and complete an after-action report to record the nature of its review and findings. The after-action report is due within two workdays of the detainee's release from restraints." See ICE PBNDS 2011, Standard, Use of Force and Restraints, Section, (V)(P)(3).

<sup>9</sup> "For any detainee who shall be transported by the ICE Air Operations (IAO), the sack lunch must comply with IAO criteria. Otherwise, the following requirements are applicable: Each sack shall contain at least two sandwiches of which at least one shall be meat (non-pork). Commercial bread or rolls may be preferable because they include preservatives. To ensure freshness, fresh, facility-made bread may be used only if made on the day of lunch preparation. Sandwiches shall be individually wrapped or bagged in a secure fashion to prevent the food from spoiling. Meats, cheeses, etc., shall be freshly sliced the day of sandwich preparation. Leftover cooked meats shall not be used after 24 hours." See ICE PBNDS 2011, Standard, Food Service, Section, (V)(I)(6)(c).

<sup>10</sup> "All facilities shall meet the following environmental standards: i. Facilities must possess a ready supply of hot water (105-120 F degrees)." See ICE PBNDS 2011, Standard, Food Service, Section, (V)(J)(5)(i).

## ACTIVITIES

### RECREATION (R)

ODO reviewed the [REDACTED] training file and determined the staff member had not completed training in implementation and oversight of the facility's recreation program (**Deficiency R-1<sup>11</sup>**).

### VISITATION (V)

ODO reviewed the facility's legal visitation log and determined the log was missing the visitor's address and whether the detainee currently had a Notice of Entry of Appearance as Attorney or Accredited Representative (Form G-28) on file (**Deficiency V-1<sup>12</sup>**).

## CONCLUSION

During this inspection, ODO assessed the facility's compliance with 19 standards under PBNDS 2011 and found the facility in compliance with 14 of those standards. ODO found 7 deficiencies in the remaining 5 standards.

ODO recommends ERO work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations.

<b>Compliance Inspection Results Compared</b>	<b>FY 2018 (PBNDS 2011)</b>	<b>FY 2020 (PBNDS 2011)</b>
Standards Reviewed	18	19
Deficient Standards	6	5
Overall Number of Deficiencies	10	7
Repeat Deficiencies	N/A	N/A
Corrective Actions	4	0

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<sup>11</sup> "The facility administrator shall designate an individual responsible for the development and oversight of the recreation program. Every facility with a rated capacity of 350 or more ICE detainees shall employ a [REDACTED] with special training in implementing and overseeing a recreation program. The recreation specialist shall assess the needs and interests of the detainees." See ICE PBNDS 2011, Standard, Recreation, Section, (V)(C).

<sup>12</sup> "Staff shall maintain a separate log to record all legal visitors, including those denied access to the detainee. The log shall include the reason(s) for denying access. Log entries shall include the following information: a. date; b. time of arrival; c. visitor's name; d. visitor's address; e. supervising attorney's name (if applicable); f. detainee's name and A-number; g. whether the detainee currently has a G-28 on file; h. time visit began; and i. time visit ended. Staff shall also record any important comments about the visit." See ICE PBNDS 2011, Standard, Visitation, Section, (V)(J)(14)(d)(g).