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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 Office
San Luis Regional Detention and Support
Center
San Luis, Arizona**

January 31-February 2, 2017

**COMPLIANCE INSPECTION
for the
SAN LUIS REGIONAL DETENTION AND SUPPORT CENTER
SAN LUIS, ARIZONA**

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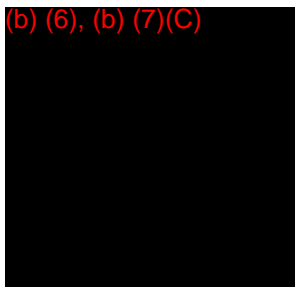
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COMPLIANCE INSPECTION TEAM MEMBERS



Lead Inspections and Compliance Specialist	ODO
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FACILITY OVERVIEW

The Office of Detention Oversight (ODO), a unit within U.S. Immigration and Customs Enforcement (ICE), Office of Professional Responsibility (OPR), conducted a compliance inspection of the San Luis Regional Detention and Support Center (SLRDSC) in San Luis, Arizona, from January 31-February 2, 2017.¹ SLRDSC opened in 2007 and is owned and operated by the Emerald Companies L.L.C. The Office of Enforcement and Removal Operations (ERO) began housing detainees at SLRDSC in January 2009 pursuant to a United States Marshals Service (USMS) Intergovernmental Service Agreement (IGSA), under the oversight of ERO's Field Office Director (FOD) in San Diego.

An ERO staff member is not assigned to the facility, nor is a Detention Services Manager. An Emerald Company Warden is responsible for oversight of daily facility operations and is supported by (b) (7) personnel. The Aramark Corporation provides food services, and Emerald Correctional Health Care provides medical services. The facility holds no accreditations. The SLRDSC is not contractually obligated to comply with the ICE Performance-Based National Detention Standards (PBNDS) 2011, Sexual Abuse and Assault Prevention and Intervention (SAAPI) standard, although it has made efforts to comply.²

This is ODO's first compliance inspection of the SLRDSC.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity ³	400
Average ICE Detainee Population ⁴	314
Male Detainee Population (as of 11/29/2016)	140
Female Detainee Population (as of 11/29/2016)	69

¹ Male and female detainees with low, medium low, medium high and high security classifications levels are detained at the facility for longer than 72 hours.

² The SLRDSC has a stated "zero-tolerance" policy, and detainees are made aware of the zero tolerance policy during the admissions process.

³ Data Source: ERO Facility List Report as of February 6, 2017.

⁴ *Ibid.*

FY 2017 FINDINGS BY NDS 2000 MAJOR CATEGORIES

NDS 2000 STANDARDS INSPECTED ⁵	DEFICIENCIES
Part 1 – Detainee Services	
Access to Legal Material	1
Admission and Release	1
Detainee Classification System	1
Detainee Grievance Procedures	0
Detainee Handbook	2
Food Service	0
Funds and Personal Property	0
Staff-Detainee Communication	3
Telephone Access	2
Sub-Total	10
Part 2 – Security and Control	
Environmental Health and Safety	1
Special Management Unit (Administrative Segregation)	0
Special Management Unit (Disciplinary Segregation)	0
Use of Force	0
Sub-Total	1
Part 3 – Health Services	
Medical Care	0
Suicide Prevention and Intervention	0
Sub-Total	0
Total Deficiencies	11

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

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 over 72-hours to assess compliance with ICE National Detention Standards (NDS) 2000, or the Performance-Based National Detention Standards (PBNDS) 2008 or 2011, as applicable. These inspections focus solely on facility compliance with detention standards that directly affect detainee life, health, safety, and/or well-being.⁶ ODO identifies violations linked to ICE detention standards, ICE policies, or operational procedures as *deficiencies*. ODO also highlights instances when the facility resolves deficiencies prior to completion of the ODO inspection--these corrective actions are annotated with “C” under the Inspection Findings section of this report.

At the conclusion of each inspection, ODO hosts a closeout briefing with facility and local ERO officials to discuss preliminary findings. A summary of these findings is also shared with ERO management officials. Thereafter, ODO provides ICE leadership with a final compliance inspection report to: (i) assist ERO develop and initiate corrective action plans and (ii) provide senior executives with an independent assessment of facility operations. Additionally, ODO findings inform ICE executive management decision making in better allocating resources across the agency’s entire detention inventory.

⁶ ODO reviews the facility’s compliance with selected standards in their entirety.

DETAINEE RELATIONS

ODO interviewed 31 detainees, each of whom volunteered to participate. No detainee made allegations of discrimination, mistreatment, or verbal abuse. The majority of the remaining detainees reported being satisfied with facility services, with the exception of the below concerns.

Detainee Handbook: 19 detainees claimed (via an interpreter) they did not receive the ICE National Handbook or the facility supplement in a language which they understood (11 Haitian Creole, five Punjabi, two Portuguese and one Nepalese detainees).

- Action Taken: ODO reviewed the detainees' detention files, which revealed the detainees were issued and signed for both the National Detainee Handbook and facility handbook (in English). Both ERO staff and facility staff were made aware of the issue. Corrective action was taken prior to completion of the inspection by the SDDO and the facility. The SDDO provided several cases of the ICE National Handbook written in Haitian Creole to the facility for distribution as appropriate. In addition, the facility compliance manager used an online translation service and had the local supplement translated in person into Haitian Creole. The facility also used the language line to have key areas of the local supplement translated for two detainees who spoke Portuguese and another who spoke Nepalese. The detainees were provided with a pen and paper during the translation. *See* the Compliance Inspection Findings: Detainee Handbook section of this report for more information.

Sexual Assault Awareness and Prevention Intervention: Six detainees claimed when officers of the opposite sex enter the housing units they do not announce their presence.

- Action Taken: ODO informed the SDDO that this requirement is conveyed in the ICE SA-API Directive and should be implemented accordingly.

Staff-Detainee Communication: Six detainees claimed they have not seen or rarely see their deportation officers.

- Action Taken: ODO reviewed the housing unit logbooks and observed the posted scheduled hours and days ERO personnel came to the facility and were available to detainees. During the inspection, ODO observed ERO officers meeting with detainees in their housing units. ODO informed the SDDO of the detainee's claims; the SDDO indicated ERO would immediately implement a change requiring officers to sign in and out of the housing unit logbooks during their visits, in addition to signing into the control center logbook.

Telephone Access: Six detainees stated they did not know how to use the telephones because no instructions were available in their language.

- Action Taken: ODO notified the SDDO and facility staff of the need to translate telephone instructions and detainee handbooks into readable languages for the detainees. On the afternoon of February 1, 2017, facility staff instructed these six detainees on using the phone system. *See* the Compliance Inspection Findings: Detainee Handbook section of this report for further information on this finding.

COMPLIANCE INSPECTION FINDINGS

DETAINEE SERVICES

ACCESS TO LEGAL MATERIAL (ALM)

The facility handbook informs detainees of the law library hours and schedule and of their ability to request additional law library hours. ODO inspected the Law Library and found Lexis-Nexis instructions posted along with a list of up-to-date legal material; however, ODO did not find postings for the scheduled hours of access to the law library (**Deficiency ALM 1**⁷).

Corrective Action: Prior to completion of the inspection, the facility initiated corrective action by posting the scheduled hours of access to the law library (C-1).

ADMISSION AND RELEASE (AR)

ODO's review of the SLRDSC admissions process and interviews with admissions staff found no documentation verifying the facility orientation procedures were approved by ERO field office (**Deficiency AR-1**⁸).

Corrective Action: Prior to completion of the inspection, the facility initiated corrective action by obtaining a memorandum from the ERO field office approving the SLRDSC orientation procedures (C-2).

DETAINEE CLASSIFICATION SYSTEM (DCS)

ODO's review of the SLRDSC classification process found that the field office provides the facility with information necessary to support classification decisions. Specifically, the facility is provided with folders for each detainee containing the Order to Detain, the Detainee Classification System Primary Assessment Form and criminal history information. ODO's review of 25 detention files confirmed these forms were present and complete. However, no SLRDSC supervisor reviews the classification level of detainees arriving at the facility (**Deficiency DCS-1**⁹).

⁷ "The Detainee Handbook or equivalent, shall provide detainees with the rules and procedures governing access to legal materials, including the following information: The scheduled hours of access to the law library. These policies and procedures shall also be posted in the law library along with a list of the law library's holdings." See ICE NDS 2000, Standard, Access to Legal Material, Section (III)(Q)(2).

⁸ "All facilities shall have a medium to provide INS detainees an orientation to the facility. In IGSA, the INS office of jurisdiction shall approve all orientation procedures." See ICE NDS 2000, Standard, Admission and Release, Section (III)(J).

⁹ "The facility shall abide by INS policy, rules, and guidelines as set forth in this Standard and implement the attached Detainee Classification system for classifying detainees. CDFs and IGSA facilities may continue using the systems established locally, if the classification criteria are objective and all procedures meet INS requirements. The first-line supervisor will review and approve each detainee's classification." See ICE NDS 2000, Standard, Detainee Classification System, Section (III)(A)(3).

DETAINEE HANDBOOK (DH)

ODO reviewed the facility handbook and determined it did not contain information on educational opportunities available to detainees (**Deficiency DH-1¹⁰**).

Corrective Action: Prior to completion of the inspection, the facility initiated corrective action by updating the local handbook supplement to include educational opportunities for inclusion in the next reprint. The facility also posted memos throughout the detainee housing units and other prominent detainee common areas to make the change known to the detainees (C-3).

Detainee interviews conducted by ODO found that some detainees were provided detainee handbooks in languages they could not understand and were not consistently provided translation assistance (**Deficiency DH-2¹¹**).

STAFF-DETAINEE COMMUNICATION (SDC)

The facility handbook informs detainees they can submit written requests and concerns to ICE staff and informs the detainees the procedures for doing so, including the availability of assistance in preparing any requests. However, the facility handbook does not contain the Department of Homeland Security, Office of Inspector General hotline information. (**Deficiency SDC-1¹²**).

ODO reviewed the ERO detainee request log and found that it did not consistently record the date the request was returned to the detainee. Also, copies of the detainee's request are not being retained in his/her detention file. (**Deficiency SDC2¹³**). ODO reviewed 15 detainee detention files and did not find copies of any detainee requests.

ODO's review of staff detainee communication documents found that ERO uses a Facility Liaison Log and not the Facility Liaison Visit Checklist. ODO found that weekly facility liaison visits are not consistently conducted nor are they consistently documented. The Facility Liaison Log was not consistently filled out for the last seven months—with a total of five weeks which

¹⁰ "The overview will briefly describe individual programs and services and associated rules. Among others, these include recreation, visitation, education, voluntary work, telephone use, correspondence, library use, and the canteen/commissary." See ICE NDS 2000, Standard, Detainee Handbook, Section (III)(B).

¹¹ "The handbook will be written in English and translated into Spanish and, if appropriate, into the next most-prevalent language(s) among the facility's detainees. The OIC will provide translation assistance to detainees exhibiting literacy or language problems and those who request it. This may involve translators from the private sector or from the detainee population." See ICE NDS 2000, Standard, Detainee Handbook, Section (III)(E).

¹² "Each Field Office Director shall ensure that the attached document regarding the OIG Hotline is conspicuously posted in all units housing ICE detainees. This applies to all Service Processing Center, Contract Detention Facilities and Inter-Governmental Service Agreement facilities. The OIG Hotline Information is to be included in the detainee handbooks in each of the aforementioned locations." See Change Notice: NDS—Staff-Detainee Communication Standard, dated June 15, 2007.

¹³ "All requests shall be recorded in a logbook specifically designed for that purpose. The log, at a minimum, shall contain: The date that the request, with staff response and action, is returned to the detainee." See ICE NDS 2000, Standard, Staff-Detainee Communication, Section (III)(B)(2)(f).

had not been filled out at all (**Deficiency SDC2¹⁴**). ODO’s review of the Facility Liaison Log also found that the log was not comprehensive and was lacking key information found on the facility Liaison Visit Checklist and Model Protocol Change Notice directive.

TELEPHONE ACCESS

Although, ODO requested 52 weeks of Telephone Serviceability Worksheets, the facility was only able to provide the results of 19 weekly serviceability checks (these 19 worksheets were fully completed). However, based on the documentation provided, ODO was unable to verify that telephone serviceability checks were consistently conducted and documented on a weekly basis as required by the standard (**Deficiency TA-1¹⁵**).

The SLRDSC phone system is setup to electronically monitor all detainee telephone calls. Detainees may make unmonitored and untimed legal calls by submitting a detainee request identifying those individuals and their phone numbers who are associated with their legal case (i.e. attorneys, consulates, etc.). Subsequently, the approved individuals and their phone numbers will be programmed into the detainee phone system to “NOT” be monitored. However, the procedures for obtaining an unmonitored phone call were not consistently posted near all detainee telephones (**Deficiency TA-2¹⁶**).

Corrective Action: Prior to the completion of the inspection, the facility initiated corrective action by posting the procedures for requesting an unmonitored call near each monitored telephone (C-4).

SECURITY AND CONTROL

ENVIRONMENTAL HEALTH AND SAFETY (EVHS)

ODO interviewed facility staff and reviewed fire drill procedures and found that although SLRDC conducts multiple fire drills throughout the year to include the drawing of emergency keys as required, the facility was unable to provide documentation detailing the time keys are drawn or their arrival at the emergency doors (**Deficiency EH&S-1¹⁷**).

¹⁴ “Model Protocol forms should be completed weekly for all Service Processing Centers (SPCs), and Contract Detention Facilities (CDFs). For Inter-Governmental Service Agreements (IGSAs) facilities housing ICE detainees the model protocol should be completed weekly for regularly used facilities and each visit for facilities, which are used intermittently.” See Change Notice Staff-Detainee Communication, dated June 15, 2007.

¹⁵ “The Field Office Director shall ensure that all phones in all applicable facilities are tested on a weekly basis. Each serviceability test shall be documented using the attached form. The field office shall maintain forms in a retrievable format, organized by month, for a three-year period. See Memorandum for Field Office Directors, “Detainee Telephone Services,” dated April 04, 2007.

¹⁶ “The facility shall have a written policy on the monitoring of telephone calls. If telephone calls are monitored, the facility shall notify detainees in the detainee handbook or equivalent provided upon admission. It shall also place a notice at each monitored telephone stating the procedure for obtaining an unmonitored call to a court, legal representative, or for the purposes of obtaining legal representation.” See ICE NDS 2000, Standard, Telephone Access, Section (III)(K)(2).

¹⁷ “Monthly fire drills will be conducted and documented separately in each department. Emergency key drills will be included in each fire drill, and timed. Emergency keys will be drawn and used by the appropriate staff to unlock one set of emergency exit doors not in daily use. NFPA recommends a limit of four and one-half minutes for drawing keys and unlocking emergency doors.” See ICE NDS 2000, Standard, Environmental Health and Safety Section (III)(L)(4)(c).

CONCLUSION

This was ODO's first compliance inspection of the SLRDSC under the National Detention Standards (NDS) 2000. ODO reviewed the facility's compliance with 15 standards and found the facility compliant with eight standards. ODO found 11 deficiencies in the remaining seven standards. ODO identified four instances where the facility initiated corrective action during the course of the inspection.

Compliance Inspection Results	FY 2017 (NDS 2000)
Standards Reviewed	15
Deficient Standards	7
Overall Number of Deficiencies	11
Corrective Action	4