



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

**Office of Detention Oversight
Follow-Up Compliance Inspection**

**Enforcement and Removal Operations
ERO El Paso Field Office**

**Cibola County Correctional Center
Milan, New Mexico**

June 28-30, 2022

FOLLOW-UP COMPLIANCE INSPECTION
of the
CIBOLA COUNTY CORRECTIONAL CENTER
Milan, New Mexico

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FOLLOW-UP COMPLIANCE INSPECTION TEAM MEMBERS



Team Lead	ODO
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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 follow-up compliance inspection of the Cibola County Correctional Center (CCCC) in Milan, New Mexico, from June 28 to 30, 2022.¹ This inspection focused on the standards found deficient during ODO’s last inspection of CCCC from November 20 to December 2, 2021. The facility opened in 1994 and is owned and operated by CoreCivic. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at CCCC in 2016 under the oversight of ERO’s Field Office Director in El Paso (ERO El Paso). 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. A CCCC warden handles daily facility operations and manages [REDACTED] support personnel. Trinity Food Service provides food services, CoreCivic provides medical care, and Keefe Supply Company provides commissary services at the facility. CCCC was accredited by the American Correctional Association in January 2019. In December 2018, CCCC 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	[REDACTED]
Average ICE Population ³	[REDACTED]
Adult Male Population (as of June 28, 2022)	[REDACTED]
Adult Female Population (as of June 28, 2022)	[REDACTED]

During its last inspection, in Fiscal Year (FY) 2022, ODO found 13 deficiencies in the following areas: Admission and Release (1); Funds and Personal Property (2); Medical Care (5); and Special Management Units (5).

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

² Data Source: ERO Facility List as of June 28, 2022.

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, Hunger Strikes, 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 PERFORMANCE-BASED NATIONAL
DETENTION STANDARDS 2011 (REVISED 2016)
MAJOR CATEGORIES**

PBNS 2011 (Revised 2016) Standards Inspected ^{4,5}	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
Facility Security and Control	0
Funds and Personal Property	0
Special Management Units	1
Staff-Detainee Communication	0
Use of Force and Restraints	0
Sub-Total	1
Part 4 - Care	
Food Service	0
Hunger Strikes	0
Medical Care	0
Personal Hygiene	0
Significant Self-harm and Suicide Prevention and Intervention	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

⁴ For greater detail on ODO’s findings, see the *Follow-up Inspection Findings* section of this report.

⁵ 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 19 detainees, who each voluntarily agreed to participate. Due to language line limitations regarding Turkish translators along with other time restraints, ODO interviewed only 19 out of 75 detainees. Most detainees reported satisfaction with facility services except for the concerns listed below.

Personal Hygiene: Two detainees stated the facility did not replenish water jugs in their housing unit and jugs frequently remain empty or not sufficiently filled to meet detainee needs.

- Action Taken: During the inspection, ODO randomly checked the water jugs during the day. ODO observed CCCC staff refilling the water jugs when needed and never saw the jugs empty during the inspection. ODO interviewed facility staff members who stated they fill the housing unit water jugs twice a day. Additionally, ODO confirmed three sinks per housing unit with clean running water that meets hygiene and consumption standards. The detainee preference for the water jugs stems from the jugs being filled with ice water.

Food Service: Two detainees stated concern over small meal portions at CCCC and human hair found in an issued food tray.

- Action Taken: ODO observed CCCC's food service program, reviewed the general population menu, and observed the serving line for lunch. ODO confirmed adequate meal portion sizes, based on a menu approved by a registered dietitian. The general population menu provided 2500 calories per day. ODO also observed food service staff wearing required beard and head coverings.

Medical Care: One detainee stated a facility doctor examined him for back pain due to a herniated disk but the facility had no treatment on hand for the herniated disk. The detainee also stated he uses towels for back support since the facility did not issue him a back brace.

- Action Taken: ODO interviewed medical staff, reviewed the detainee's medical record, and confirmed an X-ray exam, on May 8, 2022, revealed no evidence of scoliosis nor a herniated disk and therefore no need for surgery or an assistive device like a back brace; however, the medical staff informed the detainee to continue taking ibuprofen for the pain. During a follow-up appointment on June 15, 2022, the detainee stated noticeable improvement with his back and less pain.

Medical Care: One detainee stated he received inadequate medical care for a ruptured tympanic membrane and never received an appointment for an outside specialist. The detainee also stated medical staff has not provided him medication he requested to alleviate his anxiety.

- Action Taken: ODO interviewed facility medical staff, reviewed the detainee's medical file, and found the medical staff examined him for pain in his ear on April 4, 2022, and the medical provider prescribed amoxicillin (500 mg), which the provider had to order, and took approximately 3 weeks for the facility to receive the prescription.

The provider instructed the detainee to make a plug for his ear with petroleum jelly and cotton for use during showering until the antibiotics arrived. On April 26, 2022, a nurse practitioner (NP) examined the detainee and noted a redness and decreased hearing in his left ear, symptoms of a perforated eardrum. Further review of the detainee's medical record confirmed his first dose of amoxicillin on April 27, 2022, followed by his second dose on April 28, 2022, and then an additional 20 capsules on April 29, 2022, for the detainee to take over the next 20 days. On June 3, 2022, the detainee submitted a sick call request for ear pain, and the medical staff examined him on the same day, prescribing him ibuprofen (200 mg) and ondansetron HCl (4 mg) for dizziness. Additionally, the medical provider refilled his prescription for amoxicillin (500 mg) during the sick call visit. On July 20, 2022, ODO verified with ERO El Paso the pending otolaryngology consultation. On August 19, 2022, ERO El Paso informed ODO the CCCC transferred the detainee to another ICE detention facility; however, the detainee's pending otolaryngology consultation was not completed prior to the detainee's transfer.

FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

SECURITY

SPECIAL MANAGEMENT UNITS (SMU)

ODO interviewed facility staff, reviewed the administration segregation order (ASO) for the one detainee in SMU during this inspection period, and found no date nor time of release of the detainee noted on the ASO (**Deficiency SMU-42⁶**). **This is a repeat deficiency.**

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 17 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 16 of those standards. ODO found one deficiency in the remaining one standard. ODO recommends ERO El Paso work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations. ODO has not received the UCAP for ODO's last inspection of CCCC in December 2021.

⁶ "When the detainee is released from the SMU, the releasing officer shall indicate the date and time of release on the administrative segregation order." See ICE PBNDS 2011 (Revised 2016), Standard, Special Management Units, Section (V)(A)(2)(h).

Compliance Inspection Results Compared	First FY 2022 (PBNDS 2011) (Revised 2016)	Second FY 2022 (PBNDS 2011) (Revised 2016)
Standards Reviewed	24	17
Deficient Standards	4	1
Overall Number of Deficiencies	13	1
Repeat Deficiencies	0	1
Areas Of Concern	0	0
Corrective Actions	0	0
Facility Rating	Superior	N/A