



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

**Office of Detention Oversight
Unannounced Compliance Inspection
2024-001-220**

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

**Otay Mesa Detention Center
San Diego, California**


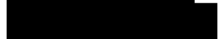
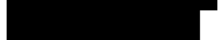
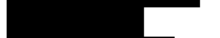
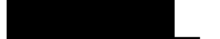
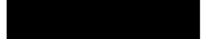
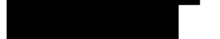
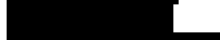
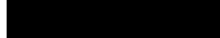
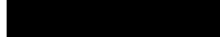
October 31-November 2, 2023

UNANNOUNCED COMPLIANCE INSPECTION
of the
OTAY MESA DETENTION CENTER
San Diego, California

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COMPLIANCE INSPECTION TEAM MEMBERS

	Team Lead	ODO
	Assistant Team Lead	ODO
	Senior Inspections and Compliance Specialist	ODO
	Senior Inspections and Compliance Specialist	ODO
	Inspections and Compliance Specialist	ODO
	Section Chief	ODO
	Contractor	Creative Corrections
	Contractor	Creative Corrections
	Contractor	Creative Corrections
	Contractor	Creative Corrections

FACILITY OVERVIEW

The U.S. Immigration and Customs Enforcement (ICE) Office of Professional Responsibility (OPR) Office of Detention Oversight (ODO) conducted an unannounced compliance inspection of the Otay Mesa Detention Center (OMDC) in San Diego, California, from October 31 to November 2, 2023.¹ 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 OMDC 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).

[REDACTED] A senior warden handles daily facility operations and manages [REDACTED] support personnel. Trinity Services provides food services, CoreCivic provides medical care, and Keefe Commissary provides commissary services at the facility. The facility was accredited by the National Commission on Correctional Health Care in July 2021 and the American Correctional Association in January 2023. In July 2022, OMDC 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 October 31, 2023)	[REDACTED]
Adult Female Population (as of October 31, 2023)	[REDACTED]

During its last full inspection, in Fiscal Year (FY) 2023, ODO found eight deficiencies in the following areas: Key and Lock Control (4) and Tool Control (4).

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

² Data Source: ERO Custody Management Division Authorized Facility List as of October 23, 2023.

³ *Ibid.*

UNANNOUNCED COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population of 10 or more, and where detainees are housed for over 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 2024 ODO added additional standards to the scope of each full inspection to ensure ODO inspects every standard at each facility at least once every other year.⁴

ODO identifies violations of ICE detention standards, ICE policies, or operational procedures, as “deficiencies.” ODO highlights instances when the facility resolves deficiencies prior to completion of the ODO inspection. Where applicable, these corrective actions are annotated with “C” under the *Unannounced Compliance Inspection Findings* section of this report.

In FY 2022, ODO began conducting special reviews of under 72-hour ICE detention facilities with an ADP of 1 or more detainees and over 72-hour ICE detention facilities with an ADP of 1 to 9 detainees. Additionally, ODO began conducting unannounced inspections of ICE detention facilities, regardless of ADP of detainees, as well as reviews of ICE special/emerging detention facilities/programs. As such, these facility inspections will result in an ODO Inspection Compliance Rating; however, for facilities that are not contractually obligated to an ICE NDS, those ratings will be for ERO’s informational purposes. ODO will conduct a complete review of several core standards, in accordance with the facility’s contractually required ICE NDS or in accordance with the ICE NDS listed in the current ERO Custody Management Division Authorized Facility List for facilities that are not contractually obligated to an ICE NDS, which may include but are not limited to Medical Care/Health Care, Medical Care (Women)/Health Care (Females), Significant Self-harm and Suicide Prevention and Intervention, Hunger Strikes, Food Service, Environmental Health and Safety, Special Management Units (SMU) or Hold Rooms (if the facility does not have an SMU), Use of Force and Restraints/Use of Physical Control Measures, and Sexual Abuse and Assault Prevention and Intervention.

Upon completion of each special review or unannounced 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 uniform corrective action plans (UCAPs); 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.

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 Inspected ^{5,6,7}	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
Population Counts	0
Post Orders	3
Searches of Detainees	0
Sexual Abuse and Assault Prevention and Intervention	0
Special Management Units	0
Staff-Detainee Communication	1
Use of Force and Restraints	0
Sub-Total	4
Part 4 - Care	
Food Service	0
Hunger Strikes	1
Medical Care	1
Medical Care (Women)	0
Personal Hygiene	0
Significant Self-harm and Suicide Prevention and Intervention	0
Sub-Total	2
Part 5 - Activities	
Correspondence and Other Mail	0
Trips for Non-Medical Emergencies	0
Marriage Requests	0
Religious Practices	0
Telephone Access	0

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

⁶ Beginning in FY 2024, ODO instituted a process of rotating all standards every other year. As a result, some standards may not be present in all inspections.

⁷ During an unannounced inspection, ODO will review a facility's compliance with at least 10 individual standards; however, unannounced full inspections will include a review of the same standards as announced full inspections.

Voluntary Work Program	0
Sub-Total	0
Part 6 - Justice	
Grievance System	0
Law Libraries and Legal Material	0
Sub-Total	0
Part 7 - Administration and Management	
Detention Files	0
Detainee Transfers	0
Sub-Total	0
Total Deficiencies	6

DETAINEE RELATIONS

ODO interviewed 45 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.

Medical Care: One detainee stated he went a week and a half without medication for depression after his initial arrival to the facility. The detainee stated he arrived with medication, but facility staff did not allow him to take it during this time.

- Action Taken: ODO interviewed facility medical staff, reviewed the detainee’s medical file, and found the detainee arrived at the facility on October 8, 2023. During admission the detainee informed the medical provider he arrived at the facility in possession of medication for diabetes, high blood pressure, and depression. On October 9, 2023, the detainee submitted a sick call request, stating he took depression medication and needed to speak to a psychologist. On October 10, 2023, a qualified health care professional met with the detainee and scheduled him to see a psychiatrist. On October 12, 2023, a mental health provider conducted a telehealth visit with the detainee and prescribed Venlafaxine (75 mg), once per day for depression. On October 14, 2023, a licensed vocational nurse administered the medication to the detainee for the first time. Medical staff stated the delay in medicating the detainee was due to the pending order in the pharmacy. At ODO’s request, medical staff reiterated the medical treatment plan to the detainee, and the detainee acknowledged understanding. ODO cited the delay in evaluation by a qualified mental health care professional as a deficiency under the *Medical Care* section of this report.

Staff-Detainee Communication: One detainee stated ICE does not respond to detainee requests in a timely manner.

- Action Taken: ODO reviewed the electronic ICE request log and found the detainee submitted an ICE request using the facility tablet system on July 19, 2023, but did not receive a response until August 3, 2023. ODO cited the delayed response as a deficiency under the *Staff-Detainee Communication* section of this report.

UNANNOUNCED COMPLIANCE INSPECTION FINDINGS

SECURITY

POST ORDERS (PO)

ODO reviewed 25 POs and found in 4 out of 25 orders, no stated duty hours for each post (**Deficiency PO-10⁸**).

ODO reviewed 37 PO classification folders and found in 2 out of 37 folders, facility staff did not sign the review and signature form (**Deficiency PO-19⁹**).

ODO reviewed 37 PO classification folders and found 2 out of 37 general POs were not current. Specifically, the general POs were dated January 19 and March 9, 2022, while the most current version was dated January 5, 2023 (**Deficiency PO-30¹⁰**).

STAFF-DETAINEE COMMUNICATION (SDC)

ODO reviewed 25 detainee requests to ERO San Diego and found in 1 out of 25 requests, no response within 3 business days. Specifically, a detainee submitted a request on July 19, 2023, and did not receive a response until August 3, 2023, a lapse of 11 business days (**Deficiency SDC-16¹¹**).

CARE

HUNGER STRIKES (HS)

ODO reviewed [REDACTED] medical staff training records and found in [REDACTED] out of [REDACTED] records, no documented annual hunger strike retraining (**Deficiency HS-1¹²**).

⁸ “The chief security officer shall supervise the preparation of all post orders, which shall: ...

2. Specifically state the duty hours for each post.”

See ICE PBNDS 2011 (Revised 2016), Standard, Post Orders, Section (V)(C)(2).

⁹ “The post orders for each post shall be issued in a six-part classification folder and shall be organized as follows: ...

Section 6: Review and signature form, dated and with the officer’s name printed and signed.”

See ICE PBNDS 2011 (Revised 2016), Standard, Post Orders, Section (V)(D).

¹⁰ “Post Orders shall be kept current at all times.” *See* ICE PBNDS 2011 (Revised 2016), Standard, Post Orders, Section (V)(G).

¹¹ “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 (Revised 2016), Standard, Staff-Detainee Communication, Section (V)(B)(1)(a).

¹² “All staff shall be trained initially and annually thereafter to recognize the signs of a hunger strike, and to implement the procedures for referral for medical assessment and for management of a detainee on a hunger strike.” *See* ICE PBNDS 2011 (Revised 2016), Standard, Hunger Strikes, Section (V)(A).

MEDICAL CARE (MC)

ODO reviewed █ detainee medical records and found in █ out of █ records, a detainee arrived at the facility on October 8, 2023, with prescription medication for depression and he reported the prescription to facility medical staff during intake. However, a qualified health care provider did not meet with the detainee until October 10, 2023, and a mental health care provider did not issue him a new prescription for his depression medication until October 12, 2023 (**Deficiency MC-210**¹³).

CONCLUSION

During this unannounced compliance inspection, ODO assessed the facility's compliance with 29 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 25 of those standards. ODO found six deficiencies in the remaining four standards. Since OMDC's last full inspection in October 2022, the facility has maintained consistent compliance with the PBNDS 2011 (Revised 2016). OMDC went from 2 deficient standards and 8 deficiencies in October 2022 to 4 deficient standards and 6 deficiencies during this most recent inspection. ODO did not inspect the Post Orders, Staff-Detainee Communication, and Hunger Strikes standards during the FY 2023 full inspection, and those 3 standards accounted for 5 out of 6 deficiencies ODO cited during this most recent inspection. ODO received the UCAP for ODO's last inspection of OMDC in September 2023, which likely resolved the deficiencies the facility had in the Tool Control and the Key and Lock Control standards. ODO recommends ERO San Diego continue to work with the facility to resolve the remaining deficiencies in accordance with contractual obligations.

Compliance Inspection Results Compared	FY 2023 Full Inspection (PBNDS 2011) (Revised 2016)	FY 2024 Full Inspection (PBNDS 2011) (Revised 2016)
Standards Reviewed	25	29
Deficient Standards	2	4
Overall Number of Deficiencies	8	6
Priority Component Deficiencies	0	0
Repeat Deficiencies	0	0
Areas Of Concern	0	0
Corrective Actions	0	0
Facility Rating	Superior	Good ¹⁴

¹³ "Detainees who arrive at a detention facility with prescribed medications or who report being on such medications, shall be evaluated by a qualified health care professional as soon as possible, but not later than 24 hours after arrival, and provisions shall be made to secure medically necessary medications." See ICE PBNDS 2011 (Revised 2016), Standard, Medical Care, Section (V)(U)(5).

¹⁴ ODO revised their rating system at the end of FY 2023 and beginning in FY 2024, facilities rated as "Superior" will have no or very minimal deficiencies, and will have no repeat or priority component deficiencies.