



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

Office of Detention Oversight
Compliance Inspection

Enforcement and Removal Operations
ERO El Paso Field Office

Otero County Processing Center
Chaparral, New Mexico

October 26-28, 2021

COMPLIANCE INSPECTION
of the
OTERO COUNTY PROCESSING CENTER
Chaparral, New Mexico

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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 compliance inspection of the Otero County Processing Center (OCPC) in Chaparral, New Mexico, from October 26 to 28, 2021.¹ The facility opened in 2008, is owned by Otero County, and is operated by Management and Training Corporation. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at OCPC in 2001 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. An OCPC warden handles daily facility operations and manages █████ support personnel. Management and Training Corporation provides food services and medical care, and Keefe Group provides commissary services at the facility. The facility received accreditation by the American Correctional Association in January 2019 and the National Commission on Correctional Health Care in February 2019. In February 2019, OCPC was audited by 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 October 26, 2021)	████
Adult Female Population (as of October 26, 2021)	████

During its last inspection, in Fiscal Year (FY) 2021, ODO found three deficiencies in the following areas: Admission and Release (1); Environmental Health and Safety (1); and Staff-Detainee Communication (1).

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

² Data Source: ERO Facility List as of October 12, 2021.

³ *Ibid.*

COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population greater than 10, 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.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 *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.

⁴ ODO reviews the facility's compliance with selected standards in their entirety.

FINDINGS BY PERFORMANCE-BASED NATIONAL DETENTION STANDARDS (PBNDS) 2011 (REVISED 2016) MAJOR CATEGORIES

PBNDS 2011 (Revised 2016) Standards Inspected ^{5,6}	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	1
Facility Security and Control	2
Funds and Personal Property	0
Post Orders	3
Searches of Detainees	0
Sexual Abuse and Assault Prevention and Intervention	1
Special Management Units	0
Use of Force and Restraints	0
Sub-Total	7
Part 4 - Care	
Food Service	0
Hunger Strikes	0
Medical Care	11
Personal Hygiene	1
Significant Self-harm and Suicide Prevention and Intervention	0
Sub-Total	12
Part 5 - Activities	
Correspondence and Other Mail	2
Trips for Non-Medical Emergencies	0
Marriage Requests	0
Voluntary Work Program	1
Sub-Total	3
Part 6 - Justice	
Grievance System	0
Legal Rights Group Presentations	0
Sub-Total	0

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

⁶ 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.

Part 7 - Administration and Management	
Detention Files	0
Interview and Tours	0
Detainee Transfers	1
Sub-Total	1
Total Deficiencies	23

DETAINEE RELATIONS

ODO interviewed 18 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.

Staff-Detainee Communication: One detainee stated he needed a copy of a form he signed as part of his deportation case and submitted an ICE request via an electronic tablet on October 14, 2021. ERO provided an electronic copy of the form; however, the facility cannot print the document from the tablet system.

- Action Taken: ODO interviewed the supervisory detention and deportation officer (SDDO) and informed him the facility cannot print the form for the detainee. The SDDO stated he did not know that detainees could not print from the tablets and on October 27, 2021, he printed and provided a copy of the printed form to the detainee.

Medical Care: One detainee stated he submitted a request for a flu shot, but medical staff have not provided the shot.

- Action Taken: ODO reviewed the detainee's medical file and found the detainee requested the flu shot on October 16, 2021. On October 18, 2021, medical staff closed the sick call request without taking any action. At ODO's request, the facility scheduled the detainee to receive a flu shot on October 29, 2021. However, ODO contacted the facility after the inspection ended and found that medical staff did not provide the detainee a flu shot and that the detainee had transferred to another facility on November 8, 2021. As a result, ODO cited two deficiencies in the *Medical Care* section of this report.

COMPLIANCE INSPECTION FINDINGS

SECURITY

CUSTODY CLASSIFICATION SYSTEM (CCS)

ODO reviewed █ detainee detention files and found in █ files, intake staff did not screen detainees for risk of victimization or abusiveness (**Deficiency CCS-14**⁷).

FACILITY SECURITY AND CONTROL (FSC)

ODO interviewed the visitation room officer and found a visitor accidentally left the facility without returning their visitation badge and the officer did not draft a memo to document the lost badge and visitor's identification card left at the facility (**Deficiency FSC-51**⁸).

ODO interviewed the front sallyport officer, observed sallyport operations, and found the front sallyport officer did not hold the driver's license of every person entering the facility (**Deficiency FSC-58**⁹).

ODO reviewed the facility's staffing plan, the officer vacancy rate, and found the vacancy rate is approximately 10%. Although the facility's contract does not specify a vacancy rate for the facility, ODO cites the high vacancy rate as an **Area of Concern**.

POST ORDERS (PO)

ODO reviewed █ post orders and found the housing unit control center post orders were missing (**Deficiency PO-1**¹⁰).

ODO reviewed █ post order acknowledgement forms and found █ instance in which an officer

⁷ "Special consideration shall be given to any factor that would raise the risk of vulnerability, victimization or assault." See ICE PBNDS 2011 (Revised 2016), Standard, Custody Classification System, Section (V)(C).

⁸ "If a visitor leaves the facility without surrendering the visitor pass and retrieving his/her identification card, the post officer shall photocopy the identification card and attach it to a memo to the shift supervisor stating the:

- 1) visitor's name;
- 2) visitor's title (if applicable);
- 3) person or department visited;
- 4) time the pass was issued;
- 5) reason for not retrieving the pass from the visitor and/or not returning the identification card; and
- 6) other relevant observations (for example, suspicious or emotionally charged behavior, use of rude language, demeanor)." See ICE PBNDS 2011 (Revised 2016), Standard, Facility Security and Control, Section (V)(C)(1)(g)(1-6).

⁹ "While the driver is within the facility's secure perimeter, the officer shall hold the driver's license or identification of every person entering the facility, as specified under the 'Visitor Passes' section in this standard." See ICE PBNDS 2011 (Revised 2016), Standard, Facility Security and Control, Section (V)(C)(2)(a).

¹⁰ "The facility administrator shall ensure that:

1. there are written post orders for each security post." See ICE PBNDS 2011 (Revised 2016), Standard, Post Orders, Section (V)(A)(1).

did not acknowledge the post order before assuming the post (**Deficiency PO-7¹¹**).

ODO reviewed █ post order acknowledgement forms and found █ instance in which a supervisor did not ensure an officer acknowledged the post order (**Deficiency PO-8¹²**).

SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION (SAAPI)

ODO reviewed █ detainee detention files and found in █ files, intake staff did not screen detainees for risk of victimization and abusiveness (**Deficiency SAAPI-88¹³**).

ODO reviewed the SAAPI training for facility volunteers and found volunteers did not receive biennial training because the facility has not allowed volunteers in the facility due to the COVID-19 pandemic. This is an **Area of Concern**. During the inspection, the training manager stated the facility would resume training for volunteers in 2022.

CARE

MEDICAL CARE (MC)

During detainee interviews, a detainee informed ODO he requested a flu shot, but did not receive a response from the medical staff. ODO reviewed the detainee's medical file and found medical staff did not provide the detainee a flu shot (**Deficiency MC-4¹⁴**). Furthermore, at ODO's request, the facility scheduled the detainee for a flu shot; however, 11 days after the inspection, ERO had transferred the detainee to another facility prior to receiving the scheduled flu shot (**Deficiency MC-7¹⁵**).

ODO reviewed █ detainee medical files and found in █ files, detainees did not receive tuberculosis (TB) screenings within 12 hours of intake (**Deficiency MC-29¹⁶**).

¹¹ "Even in the event that an officer has worked a post in the past, he/she shall assume the post orders have changed and shall be required to read and comprehend all Post Order documents upon assuming their posts." See ICE PBNDS 2011 (Revised 2016), Standard, Post Orders, Section (V)(B).

¹² "Supervisors shall ensure that officers understand the post orders, regardless of whether the assignment is temporary, permanent, or due to an emergency." See ICE PBNDS 2011 (Revised 2016), Standard, Post Orders, Section (V)(B).

¹³ "In accordance with standards "2.1 Admission and Release" and "2.2 Custody Classification System", the facility shall assess all detainees on intake to identify those likely to be sexual aggressors or sexual abuse victims and shall house detainees to prevent sexual abuse, taking necessary steps to mitigate any such danger." See ICE PBNDS 2011 (Revised 2016), Standard, Sexual Abuse and Assault Prevention and Intervention, Section (V)(I)(1).

¹⁴ "Every facility shall directly or contractually provide its detainee population with the following: ...
3. Comprehensive, routine and preventive health care, as medically indicated." See ICE PBNDS 2011 (Revised 2016), Standard, Medical Care, Section (V)(A)(3).

¹⁵ "Every facility shall directly or contractually provide its detainee population with the following: ...
6. Timely responses to medical complaints." See ICE PBNDS 2011 (Revised 2016), Standard, Medical Care, Section (V)(A)(6).

¹⁶ "All new arrivals shall receive TB screening within 12 hours of intake and in accordance with CDC guidelines (www.cdc.gov/tb)." See ICE PBNDS 2011 (Revised 2016), Standard, Medical Care, Section (V)(C)(2).

ODO reviewed █ detainee medical files and found in █ files, medical staff did not use professional interpretation services to explain medical consent forms (**Deficiency MC-71¹⁷**).

ODO interviewed medical staff, reviewed █ detainee medical files, and found in █ files, medical staff did not promptly approve and obtain medicines that were not on the formulary. Specifically, medical staff approved and obtained the prescribed medication 5 days later, at which point the detainee had transferred to another facility prior to receiving the medication (**Deficiency MC-89¹⁸**).

ODO reviewed █ detainee medical files and found in █ files, medical staff did not complete full mental health evaluations within 72 hours (**Deficiency MC-120¹⁹**). **This is a repeat deficiency.**

ODO reviewed █ detainee medical files and found in █ files, medical staff did not complete full mental health evaluations within 72 hours after referral (**Deficiency MC-156²⁰**). **This is a repeat deficiency.**

ODO reviewed █ detainee medical files and found in █ files, medical staff did not complete full mental health evaluations for detainees that indicated prior sexual victimization or perpetrated sexual abuse within 72 hours after the referral (**Deficiency MC-171²¹**). **This is a repeat deficiency.**

ODO reviewed █ detainee medical files and found in █ files, medical staff did not conduct an initial dental screening within 14 days of the detainee's arrival (**Deficiency MC-176²²**).

ODO reviewed █ detainee medical files and found in █ files, medical staff did not date and time stamp written sick call requests (**Deficiency MC-183²³**).

ODO reviewed █ detainee medical files and found in █ files, the detainee did not receive prescribed medications and medically necessary treatment without interruption. Specifically, medical staff did not submit a prescription request until five days later and the detainee transferred

¹⁷ "Where appropriate staff interpretation is not available, facilities will make use of professional interpretation services." See ICE PBNDS 2011 (Revised 2016), Standard, Medical Care, Section (V)(E).

¹⁸ "Each detention facility shall have and comply with written policy and procedures for the management of pharmaceuticals, to include: ...

2. identification of a method for promptly approving and obtaining medicines not on the formulary." See ICE PBNDS 2011 (Revised 2016), Standard, Medical Care, Section (V)(G)(2).

¹⁹ "Mental health evaluations must be conducted within the timeframes prescribed in "O. Mental Health Program" of this standard." See ICE PBNDS 2011 (Revised 2016), Standard, Medical Care, Section (V)(J).

²⁰ "Any detainee referred for mental health treatment shall receive an evaluation by a qualified health care provider no later than 72 hours after the referral, or sooner if necessary." See ICE PBNDS 2011 (Revised 2016), Standard, Medical Care, Section (V)(O)(4).

²¹ "When a referral for mental health follow-up is initiated, the detainee shall receive a mental health evaluation no later than 72 hours after the referral." See ICE PBNDS 2011 (Revised 2016), Standard, Medical Care, Section (V)(P).

²² "An initial dental screening shall be performed within 14 days of the detainee's arrival." See ICE PBNDS 2011 (Revised 2016), Standard, Medical Care, Section (V)(R).

²³ "All written sick call requests shall be date and time stamped and filed in the detainee's medical record." See ICE PBNDS 2011 (Revised 2016), Standard, Medical Care, Section (V)(S)(4).

from the facility before receiving his medication (**Deficiency MC-209²⁴**).

PERSONAL HYGIENE (PH)

ODO inspected the facility housing units and found washbasins only had hot running water (**Deficiency PH-36²⁵**).

ACTIVITIES

CORRESPONDENCE AND OTHER MAIL (COM)

ODO reviewed the local detainee handbook and found the handbook does not notify detainees that identity documents such as passports and birth certificates in a detainee's possession are contraband and ICE/ERO may use it as evidence against the detainee or for other purposes authorized by law (**Deficiency COM-24²⁶**).

ODO reviewed the facility's mailroom contraband logbook and found officers did not sign the logbook for contraband entries (**Deficiency COM-89²⁷**).

Corrective Action: During the inspection, the facility created a new mailroom contraband logbook, which included a space for the officer's signature. The mailroom officer created a memorandum, informing staff of the new signature requirement for entries into the logbook effective immediately (**C-1**).

VOLUNTARY WORK PROGRAM (VWP)

ODO reviewed the national regulations the facility had on file and found the facility did not have a current version of the Occupational Safety and Health Administration (OSHA) regulations (**Deficiency VWP-59²⁸**).

Corrective Action: During the inspection, the facility purchased the current version of the

²⁴ "All prescribed medications and medically necessary treatments shall be provided to detainees on schedule and without interruption, absent exigent circumstances." See ICE PBNDS 2011 (Revised 2016), Standard, Medical Care, Section (V)(U)(4).

²⁵ "Detainees shall be provided: ...

2. an adequate number of washbasins with temperature controlled hot and cold running water 24 hours per day." See ICE PBNDS 2011 (Revised 2016), Standard, Personal Hygiene, Section (V)(E)(2).

²⁶ "At a minimum, the notification shall specify: ...

8. That identity documents, such as passports, birth certificates, etc., in a detainee's possession are contraband and may be used by ICE/ERO as evidence against the detainee or for other purposes authorized by law." See ICE PBNDS 2011 (Revised 2016), Standard, Correspondence and Other Mail, Section (V)(C)(8).

²⁷ "When an officer finds an item that must be removed from a detainee's mail, he/she shall make a written record that includes: ...

6. the officer's signature." See ICE PBNDS 2011 (Revised 2016), Standard, Correspondence and Other Mail, Section (V)(I)(6).

²⁸ "Each facility administrator's designee is responsible for providing access to complete and current versions of the documents listed above." See ICE PBNDS 2011 (Revised 2016), Standard, Voluntary Work Program, Section (V)(N)(1).

OSHA regulations and provided ODO a copy of the receipt (C-2).

ADMINISTRATION AND MANAGEMENT

DETAINEE TRANSFERS (DT)

ODO interviewed facility intake staff and ERO staff, reviewed six archived detention files, and found the facility did not place a copy of the Detainee Transfer Notification Form in any detainee detention files when detainees transferred from the facility (**Deficiency DT-16²⁹**).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 25 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 16 of those standards. ODO found 23 deficiencies in the remaining 9 standards. ODO commends facility staff members for their responsiveness during this inspection and noted two instances where the facility initiated immediate corrective action. 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 uniform corrective action plan for ODO's last inspection of OCPC in June 2021.

Compliance Inspection Results Compared	FY 2021 PBNDS 2011 (Revised 2016)	FY 2022 PBNDS 2011 (Revised 2016)
Standards Reviewed	12	25
Deficient Standards	3	9
Overall Number of Deficiencies	3	23
Repeat Deficiencies	0	3
Areas Of Concern	0	2
Corrective Actions	0	2
Facility Rating	N/A	Good

²⁹ "The sending facility will place a copy of the Detainee Transfer Notification Form in the detainee's detention file." See ICE PBNDS 2011 (Revised 2016), Standard, Detainee Transfers, Section (V)(B)(2)(d).