

U.S. Department of Homeland Security U.S. 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 San Diego Field Office

San Luis Regional Detention Center San Luis, Arizona

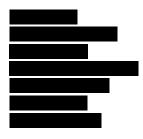
November 15-18, 2021

COMPLIANCE INSPECTION of the SAN LUIS REGIONAL DETENTION CENTER San Luis, Arizona

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COMPLIANCE INSPECTION TEAM MEMBERS



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ODO ODO ODO Creative Corrections Creative Corrections Creative Corrections 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 San Luis Regional Detention Center (SLRDC) in San Luis, Arizona, from November 15 to 18, 2021.¹ The facility opened in March 2007 and is owned by the city of San Luis and operated by LaSalle Corrections Inc. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at SLRDC in January 2008 under the oversight of ERO's Field Office Director in San Diego (ERO San Diego). The facility operates under the National Detention Standards (NDS) 2019.

ERO has no assigned staff to the facility. An SLRDC warden handles daily facility operations and manages support personnel. LaSalle Corrections Inc. provides food services, medical care, and commissary services at the facility. In February 2019, SLRDC was audited for the Department of Justice (DOJ) Prison Rape Elimination Act (PREA) and was DOJ PREA certified.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity ²	
Average ICE Detainee Population ³	
Male Detainee Population (as of November 15, 2021)	
Female Detainee Population (as of November 15, 2021)	

During its last inspection, in Fiscal Year (FY) 2021, ODO found one deficiency in the following area: Food Service (1).

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

² Data Source: ERO Facility List Report 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 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.⁴

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.

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

FINDINGS BY NATIONAL DETENTION STANDARDS 2019 MAJOR CATEGORIES

NDS 2019 Standards Inspected ^{5,6}	Deficiencies
Part 1 – Safety	•
Environmental Health and Safety	0
Sub-Total	0
Part 2 – Security	
Admission and Release	0
Custody Classification System	0
Funds and Personal Property	0
Post Orders	0
Searches of Detainees	0
Use of Force and Restraints	0
Special Management Units	0
Sexual Abuse and Assault Prevention and Intervention	0
Sub-Total	0
Part 4 – Care	
Food Service	0
Hunger Strikes	0
Medical Care	4
Personal Hygiene	0
Significant Self-Harm and Suicide Prevention and Intervention	0
Sub-Total	4
Part 5 – Activities	
Correspondence and Other Mail	0
Voluntary Work Program	0
Sub-Total	0
Part 6 – Justice	
Detainee Handbook ⁷	1
Legal Rights Group Presentations	0
Sub-Total	1
Part 7 – Administration and Management	
Detention Files	0
Detainee Transfers	0
Sub-Total	0
Total Deficiencies	5

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 inspections.

⁷ ODO did not review the Detainee Handbook standard in its entirety, as it's not part of the FY 2022 standards to review. However, as a result of a detainee interview, ODO partially reviewed the standard.

DETAINEE RELATIONS

ODO interviewed six detainees, who each voluntarily agreed to participate. The facility's ICE detainee population count was seven during ODO's inspection, and one detainee refused ODO's request for an interview. 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.

Detainee Handbook: Three Russian-speaking detainees and one Cantonese-speaking detainee stated they did not receive interpretation services for the ICE National Detainee Handbook nor the facility handbook.

• <u>Action Taken</u>: ODO reviewed the detainee detention files, interviewed intake staff, and found the detainees had signed acknowledgement forms of receiving both handbooks. However, the acknowledgement forms did not indicate the native language of the detainees nor the intake staff's use of interpretation services. ODO interviewed the facility compliance manager and confirmed he is responsible for printing handbooks in English and the native languages of detainees, but he did not receive a request from the intake staff for handbooks in Russian nor Cantonese. On November 16, 2021, facility staff printed copies of the handbook for the Russian-speaking detainees, and the intake staff used interpretation services to review both handbooks with the Cantonese-speaking detainee. ODO cited this as a deficiency in the *Detainee Handbook* section of the report.

Personal Hygiene: One detainee stated she did not know the procedure for requesting a razor for shaving.

• <u>Action Taken</u>: ODO interviewed a facility lieutenant and confirmed the detainee did not receive the ICE National Detainee Handbook and facility handbook in Russian, which provides instruction on how to request personal care items. On November 16, 2021, facility staff printed copies of the ICE National Detainee Handbook and facility handbook in Russian for the detainee and informed her of the requesting procedure using interpretation services.

COMPLIANCE INSPECTION FINDINGS

<u>CARE</u>

MEDICAL CARE (MC)

ODO reviewed \blacksquare detainee medical records and found in \blacksquare out of \blacksquare records, a health care practitioner or a specially trained detention officer did not conduct an initial medical, dental, and mental health screening within 12 hours of the detainees' arrival. Specifically, a health care practitioner completed the initial intake screenings between 13 to 20 hours after the detainees'

arrival (Deficiency MC-12⁸).

ODO reviewed \blacksquare detainee medical records and found in \blacksquare out of \blacksquare records, a health care practitioner did not conduct a comprehensive health assessment within 14 days of the detainees' arrival. Specifically, a health care practitioner completed the comprehensive health assessments 16 and 17 days after the detainees' arrival (**Deficiency MC-27**⁹). This is a repeat deficiency.

ODO reviewed \blacksquare detainee medical records and found in \blacksquare out of \blacksquare records, a medical assistant did not use professional interpretation services during an encounter with a detainee (**Deficiency MC-40**¹⁰).

ODO reviewed \blacksquare detainee medical records and found in \blacksquare out of \blacksquare records, a registered nurse did not perform an initial dental screening exam within 14 days of the detainees' arrival. Specifically, a registered nurse completed the initial dental screenings 16 and 17 days after the detainees' arrival (**Deficiency MC-43**¹¹).

JUSTICE

DETAINEE HANDBOOK (DH)

ODO did not review the Detainee Handbook Standard in its entirety; however, ODO reviewed four detainee detention files, interviewed four detainees and facility intake staff, and found the facility did not provide three Russian-speaking detainees and one Cantonese-speaking detainee with interpretation services to explain the contents of the ICE National Detention Handbook nor the facility handbook (**Deficiency DH-4**¹²).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 20 standards under NDS 2019 and found the facility in compliance with 18 of those standards. ODO found five deficiencies in the remaining two standards. ODO recommends ERO work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations. ERO provided ODO with the uniform corrective action plan for ODO's last inspection of SLRDC on September 29, 2021.

⁸ "As soon as possible, but no later than 12 hours after arrival, all detainees shall receive, by a health care practitioner or a specially trained detention officer, an initial medical, dental and mental health screening and be asked for information regarding any known acute, emergent, or pertinent past or chronic medical conditions, including history of mental illness, particularly prior suicide attempts or current suicidal/homicidal ideation or intent, and any disabilities or impairments affecting major life activities." *See* ICE NDS 2019, Standard, Medical Care, Section (II)(D).

⁹ "The facility will conduct and document a comprehensive health assessment, including a physical examination and mental health screening, on each detainee within 14 days of the detainee's arrival at the facility." *See* ICE NDS 2019, Standard, Medical Care, Section (II)(E).

¹⁰ "When appropriate staff interpretation is not available, facilities will make use of professional interpretation services." *See* ICE NDS 2019, Standard, Medical Care, Section (II)(G).

¹¹ "An initial dental screening exam shall be performed within 14 days of the detainee's arrival." *See* ICE NDS 2019, Standard, Medical Care, Section (II)(H).

¹² "Oral interpretation or assistance shall be provided to any detainee who speaks another language into which written material has not been translated or who is illiterate." *See* ICE NDS 2019, Standard, Detainee Handbook, Section, (II)(C).

Compliance Inspection Results Compared	FY 2021 (NDS 2019)	FY 2022 (NDS 2019)
Standards Reviewed	14	20
Deficient Standards	1	2
Overall Number of Deficiencies	1	5
Repeat Deficiencies	0	1
Areas of Concern	0	0
Corrective Actions	1	0
Facility Rating	N/A	Superior