



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
Follow-Up Compliance Inspection**

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

**Torrance County Detention Facility
Estancia, New Mexico**

May 3-7, 2021

FOLLOW-UP COMPLIANCE INSPECTION
of the
TORRANCE COUNTY DETENTION FACILITY
Estancia, New Mexico

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FOLLOW-UP COMPLIANCE INSPECTION TEAM MEMBERS



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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 Torrance County Detention Facility (TCDF) in Estancia, New Mexico, from May 3 to 7, 2021.¹ This inspection focused on the standards found deficient during ODO’s last inspection of TCDF from November 30 to December 3, 2020. The facility opened in May 2019 and is owned and operated by CoreCivic. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at TCDF in August 2019 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 (2013 Errata).²

ERO has assigned deportation officers (DO) and a detention services manager to the facility. A TCDF warden handles daily facility operations and manages ██████ personnel. Trinity Food Service provides food services, and CoreCivic provides medical care and commissary services at the facility. The facility does not hold any accreditations from any outside entities.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity ³	842
Average ICE Detainee Population ⁴	████
Male Detainee Population (as of May 3, 2021)	████
Female Detainee Population (as of May 3, 2021)	N/A

During its last inspection, in Fiscal Year (FY) 2021, ODO found 3 deficiencies in the following areas: Facility Security and Control (2) and Special Management Units (1).

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

² On January 12, 2021, ERO Custody Management informed ODO TCDF had not changed to PBNDS 2011 (Revised 2016) and to inspect the facility in accordance with PBNDS 2011 (2013 Errata).

³ Data Source: ERO Facility List Report as of May 3, 2021.

⁴ *Ibid.*

⁵ Per the ERO Facility List Report of May 3, 2021, TCDF had an FY 2020 average daily population of 23 detainees, and hence justification for ODO to schedule TCDF for an inspection in FY 2021. Although the facility’s population count during the inspection was less than 10, the facility has a current contract to house ICE detainees, serving as further justification for ODO to continue with the inspection.

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 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.

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.

FINDINGS BY PERFORMANCE-BASED NATIONAL DETENTION STANDARDS 2011 (2013 ERRATA) MAJOR CATEGORIES

PBNDS 2011 (2013 Errata) Standards Inspected ⁶	Deficiencies
Part 1 – Safety	
Environmental Health and Safety	0
Sub-Total	0
Part 2 – Security	
Admission and Release	2
Custody Classification System	1
Facility Security and Control	0
Funds and Personal Property	3
Special Management Units	0
Use of Force and Restraints	0
Sub-Total	6
Part 4 – Care	
Food Service	2
Medical Care	1
Hunger Strikes	0
Significant Self-harm and Suicide Prevention and Intervention	0
Sub-Total	3
Total Deficiencies	9

⁶ For greater detail on ODO's findings, see the *Follow-Up Compliance Inspection Findings* section of this report.

DETAINEE RELATIONS

There were only [REDACTED] detainees assigned to the facility, who all voluntarily agreed to participate in ODO interviews. None of the detainees made allegations of discrimination, mistreatment, nor abuse. Most detainees reported satisfaction with facility services except for the concern listed below. ODO conducted detainee interviews via video teleconference.

Staff-Detainee Communication: One detainee stated all documents he received were in English, which he does not understand, and had requested a Spanish-speaking translator.

- Action Taken: ODO interviewed the assigned DO and found ERO El Paso did know of this detainee's need for translation services. ERO El Paso provided document translation for the detainee and instructed the detainee how to request future translation services.

FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

SAFETY

ENVIRONMENTAL HEALTH AND SAFETY (EHS)

ODO interviewed the safety manager (SM) and found the facility had not received annual fire inspections since July 2019 due to COVID-19 protocols. The SM provided ODO documentation showing the facility's requests for annual inspections in 2020 and 2021, which showed the city fire marshal declined. ODO cited this as an **Area of Concern**.

SECURITY

ADMISSION AND RELEASE (AR)

ODO reviewed five detainee release files and found no Order to Release form (Form I-203) in two out of five release files (**Deficiency AR-80**⁷).

ODO reviewed five detainee release files and found one out of five release files did not contain a copy of the detainee's property inventory form (**Deficiency AR-91**⁸).

⁷ "A detainee's out-processing begins when release processing staff receive the Form I-203, "Order to Detain or Release," signed by an authorizing official." See ICE PBNDS 2011 (2013 Errata), Standard, Admission & Release, Section (V)(H)(1).

⁸ "The detainee shall check his/her property against the original personal property inventory form. If all property is correctly accounted for, the detainee shall sign the inventory sheet, a copy of which the officer shall place in the detainee's detention file." See ICE PBNDS 2011 (2013 Errata), Standard, Admission and Release, Section (V)(H)(9)(c).

CUSTODY CLASSIFICATION SYSTEM (CCS)

ODO reviewed the facility's detainee handbook and found no explanation of the classification levels with the conditions and restrictions applicable to each. Specifically, the handbook did not include an explanation of a high-classification level with the conditions and restrictions (**Deficiency CCS-66⁹**).

ODO reviewed the facility's assigned detainees' [REDACTED], based on classification levels with medium-high and high classifications wearing the same colors. The facility assigned uniforms as follows: [REDACTED]. However, the facility's detainee handbook documented the following uniform colors for classification: [REDACTED]. ODO cited this as an **Area of Concern**.

FUNDS AND PERSONAL PROPERTY (FPP)

ODO reviewed the facility's detainee handbook and found no procedures for filing a claim for lost or damaged property (**Deficiency FPP-19¹⁰**)

ODO reviewed the facility's detainee handbook and found no notification to detainees on how to access personal funds to pay for legal services (**Deficiency FPP-20¹¹**)

ODO reviewed seven personal property forms and found seven out of seven forms did not indicate the detainee's time of admission (**Deficiency FPP-85¹²**)

CARE

FOOD SERVICES (FS)

ODO reviewed photographs of bread used for kosher trays and found the facility did not purchase bread labeled "pareve" or "parve" (**Deficiency FS-199¹³**).

⁹ "The ICE Detainee Handbook standard section on classification shall include: ...

- An explanation of the classification levels, with the conditions and restrictions applicable to each.
- The procedures by which a detainee may appeal his or her classification." *See* ICE PBNDS 2011 (2013 Errata), Standard, Custody Classification System, Section (V)(K).

¹⁰ "The detainee handbook or equivalent shall notify the detainees of facility policies and procedures related to personal property, including: ...

5. the procedure for filing a claim for lost or damaged property." *See* ICE PBNDS 2011 (2013 Errata), Standard, Funds and Personal Property, Section (V)(C)(5).

¹¹ "The detainee handbook or equivalent shall notify the detainees of facility policies and procedures related to personal property, including: ...

6. access to detainee personal funds to pay for legal services." *See* ICE PBNDS 2011 (2013 Errata), Standard, Funds and Personal Property, Section (V)(C)(6).

¹² "The personal property inventory form must contain the following information at a minimum:

1. date and time of admission." *See* ICE PBNDS 2011 (2013 Errata), Standard, Funds and Personal Property, Section (V)(I)(1).

¹³ Only bread and margarine labeled "pareve" or "parve" shall be purchased for the kosher tray." *See* ICE PBNDS 2011 (2013 Errata), Standard, Food Service, Section (V)(G)(5).

ODO reviewed six purchase requests for controlled-food items and found the food service director did not mark the item “hot” in six out of six purchase requests for sugar to signal the need for special handling (**Deficiency FS-426¹⁴**).

MEDICAL CARE (MC)

ODO reviewed 12 detainee medical records and found no reviews to assess priority of treatment by the clinical medical authority in 7 out of 12 records (**Deficiency MC-140¹⁵**).

CONCLUSION

During this inspection, ODO assessed the facility’s compliance with 11 standards under PBNDS 2011 (2013 Errata) and found the facility in compliance with 6 of those standards. ODO found nine deficiencies in the remaining five standards. ODO recommends ERO work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations.

Compliance Inspection Results Compared	First FY 2020 (PBNDS 2011) (Revised 2016)	Second FY 2021 (PBNDS 2011) (2013 Errata)
Standards Reviewed	20	11
Deficient Standards	2	5
Overall Number of Deficiencies	3	9
Repeat Deficiencies	0	0
Areas of Concern	0	2
Corrective Actions	0	0

¹⁴ “On the purchase request for potentially dangerous items (e.g. ██████████), and other items considered contraband if found in a detainee’s possession), the FSA shall mark them “hot,” signaling the need for special handling.” See ICE PBNDS 2011 (2013 Errata), Standard, Food Service, Section (V)(K)(1).

¹⁵ “The CMA shall be responsible for review of all comprehensive health assessments to assess the priority for treatment.” See ICE PBNDS 2011 (2013 Errata), Standard, Medical Care, Section (V)(I).