



**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

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Office of Detention Oversight  
Compliance Inspection

Enforcement and Removal Operations  
ERO El Paso Field Office

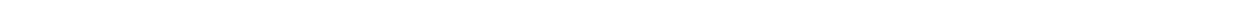
Torrance County Detention Facility  
Estancia, New Mexico

November 30-December 3, 2020

**COMPLIANCE INSPECTION**  
**of the**  
**TORRANCE COUNTY DETENTION FACILITY**  
Estancia, New Mexico

**TABLE OF CONTENTS**

<b>FACILITY OVERVIEW .....</b>	<b>4</b>
<b>COMPLIANCE INSPECTION PROCESS .....</b>	<b>5</b>
<b>FINDINGS BY PERFORMANCE-BASED NATIONAL DETENTION STANDARDS 2011 (REVISED 2016) MAJOR CATEGORIES.....</b>	<b>6</b>
<b>DETAINEE RELATIONS .....</b>	<b>7</b>
<b>COMPLIANCE INSPECTION FINDINGS .....</b>	<b>8</b>
<b>SECURITY .....</b>	<b>8</b>
Facility Security and Control .....	8
Special Management Units .....	8
<b>CONCLUSION .....</b>	<b>8</b>



## COMPLIANCE INSPECTION TEAM MEMBERS

[REDACTED]	Team Lead	ODO
[REDACTED]	Senior Inspections and Compliance Specialist	ODO
[REDACTED]	Inspections and Compliance Specialist	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 compliance inspection of the Torrance County Detention Facility (TCDF) in Estancia, New Mexico, from November 30 to December 3, 2020.<sup>1</sup> 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 (Revised 2016).

ERO has assigned deportation officers and a detention services manager to the facility. A TCDF warden handles daily facility operations and is supported by ██████ personnel. Trinity Food Service provides food services, 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 <sup>2</sup>	842
Average ICE Detainee Population <sup>3</sup>	████
Male Detainee Population (as of 11/30/2020)	████

During its last inspection, in Fiscal Year (FY) 2020, ODO found 6 deficiencies in the following areas: Admission and Release (1); Medical Care (3); and Special Management Units (2).

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

<sup>2</sup> Data Source: ERO Facility List Report as of November 23, 2020.

<sup>3</sup> *Ibid.*

## COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population greater than ten, 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.<sup>4</sup>

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.

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<sup>4</sup> ODO reviews the facility’s compliance with selected standards in their entirety.

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

PBNS 2011 (Revised 2016) Standards Inspected <sup>5</sup>	Deficiencies
<b>Part 1 – Safety</b>	
Environmental Health and Safety	0
Emergency Plans	0
<b>Sub-Total</b>	<b>0</b>
<b>Part 2 – Security</b>	
Admission and Release	0
Custody Classification System	0
Facility Security and Control	2
Funds and Personal Property	0
Population Counts	0
Sexual Abuse and Assault Prevention and Intervention	0
Special Management Units	1
Staff-Detainee Communication	0
Use of Force and Restraints	0
<b>Sub-Total</b>	<b>3</b>
<b>Part 4 – Care</b>	
Food Service	0
Medical Care	0
Hunger Strikes	0
Significant Self-harm and Suicide Prevention and Intervention	0
Disability Identification, Assessment, and Accommodation	0
<b>Sub-Total</b>	<b>0</b>
<b>Part 5 – Activities</b>	
Religious Practices	0
Telephone Access	0
<b>Sub-Total</b>	<b>0</b>
<b>Part 6 – Justice</b>	
Grievance Systems	0
Law Libraries and Legal Material	0
<b>Sub-Total</b>	<b>0</b>
<b>Total Deficiencies</b>	<b>3</b>

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

## DETAINEE RELATIONS

ODO interviewed 12 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, nor abuse. Most detainees reported satisfaction with facility services except for the concerns listed below. ODO attempted to conduct detainee interviews via video teleconference; however, the ERO field office and facility were not able to accommodate this request due to technology issues. As such, the detainee interviews were conducted via telephone.

*Medical Care:* One detainee complained of frequent chest pains and stated the facility had not provided him proper medical treatment.

- Action Taken: On November 30, 2020, ODO reviewed the detainee's medical record and interviewed the health services administrator (HSA). ODO found the detainee received an initial health appraisal on May 7, 2020, which included a chest X-ray examination. On September 29, 2020, the detainee submitted a sick call request concerning chest pains, which an electrocardiogram (EKG) was completed and returned a normal prognosis. On December 1, 2020, a physician evaluated the detainee due to chest pain, which the detainee was diagnosed with acid reflux and prescribed medication as treatment. The HSA advised ODO the detainee will be scheduled for a follow-up X-ray examination in December 2020 to discuss and review the detainee's previous diagnoses.

*Medical Care:* One detainee complained of severe back pain and stated the facility had not provided him with the proper medical treatment.

- Action Taken: On November 30, 2020, ODO reviewed the detainee's medical records and interviewed the HSA. On November 9, 2020, the detainee submitted a sick call request concerning back pain and was seen by the nurse practitioner (NP) on November 12, 2020, which the detainee was prescribed a muscle relaxer and acetaminophen as treatment. Furthermore, during the same sick call request, the NP denied the detainee's request for Ibuprofen due to the other medications the detainee was prescribed. On November 19, 2020, during the detainee's follow-up examination, the NP added a muscle cream to the detainee's medical treatment and advised the detainee of the facility's inability to prescribe stronger pain medications. Additionally, during the same appointment, the detainee advised his pain had improved while sleeping; however, the pain continued throughout the day. The HSA advised ODO the detainee will be scheduled for a follow-up examination in December 2020.

# COMPLIANCE INSPECTION FINDINGS

## SECURITY

### FACILITY SECURITY AND CONTROL (FS&C)

ODO reviewed the facility's FS&C program, the visitation log, and determined there is no time of departure column recorded on the visitation log (**Deficiency FS&C-59<sup>6</sup>**).

ODO reviewed the facility's FS&C program, the vehicle log, and determined the facility's on-site vehicle logbook does not record the name of the employee assigned responsibility for the on-site vehicle (**Deficiency FS&C-24<sup>7</sup>**).

### SPECIAL MANAGEMENT UNITS (SMU)

ODO reviewed the facility's SMU Program, reviewed one out of one detainee file, and found the detainee's medical evaluation was conducted by a medical professional prior to being placed in segregation; however, the assessment did not include a review of whether the detainee was previously diagnosed as having a mental illness (**Deficiency SMU-131<sup>8</sup>**).

## CONCLUSION

During this inspection, ODO assessed the facility's compliance with 20 standards under	FY 2020 (PBNS 2011 Revised 2016)	FY 2021 (PBNS 2011 Revised 2016)
Standards Reviewed	18	20
Deficient Standards	3	2
Overall Number of Deficiencies	6	3
Repeat Deficiencies	N/A	N/A
Areas of Concern	0	0
Corrective Actions	1	0

<sup>6</sup> "The post officer shall maintain the visitor logbook, a bound ledger in which all non-staff visits are to be recorded. 2) Every entry in the logbook shall identify the person or department visited, date and time of the visitor's arrival, purpose of visit, unusual requests and time of departure." See ICE PBNS 2011, Standard, Facility Security and Control, Section (V)(C)(b)(1)(2).

<sup>7</sup> "The post officer shall log the following information regarding every vehicle: tag number, driver's name, firm represented, purpose of the visit, (e.g., repairs, delivery, etc.), vehicle contents, date, time in, time out and facility employee responsible for the vehicle on-site." See ICE PBNS 2011, Standard, Facility Security and Control, Section (V)(C)(2)(b).

<sup>8</sup> "Detainees must be evaluated by a medical professional prior to placement in an SMU (or when that is infeasible, as soon as possible and no later than within 24 hours of placement). The assessment should include a review of whether the detainee has been previously diagnosed as having a mental illness." See ICE PBNS 2011, Standard, Special Management Units, Section (V)(D)(3)(b).