

December 13, 2018

TO:

Assistant Director for Detention Management

FROM:

Lead Compliance Inspector The Nakamoto Group, Inc

SUBJECT: Annual Detention Inspection of the El Paso Service Processing Center

The Nakamoto Group, Inc. performed an annual inspection for compliance with the ICE Performance-Based National Detention Standards (PBNDS) 2011 of the El Paso Service Processing Center, El Paso, TX during the period of December 11-13, 2018. This is an SPC.

The inspection was performed under the guidance of spector. Team Members were:

Subject Matter Field	Team Member
Detainee Rights	
Security	
Medical Care	
Medical Care	
Safety	

## **Type of Inspection**

This is a scheduled annual inspection, which is performed to determine overall compliance with the ICE PBNDS 2011 for Over 72 hour facilities. The facility received a previous rating of Meets Standards during the December 2017 inspection.

## **Inspection Summary**

The El Paso Service Processing Center is currently accredited by:

The American Correctional Association (ACA) - Yes

The National Commission on Correctional Health Care (NCCHC) - Yes

The Joint Commission (TJC) - No

Prison Rape Elimination Act (PREA) – Yes



## **Standards Compliance**

The following information is a summary of the standards that were reviewed and overall compliance that was determined as a result of the 2017 and 2018 PBNDS 2011 compliance annual inspections:

2017 Annual Inspection		
Meets Standards	41	
Does Not Meet Standards	0	
Repeat Finding	0	
Not Applicable	1	

2018 Annual Inspection		
Meets Standards	41	
Does Not Meet Standards	0	
Repeat Deficiency	0	
Not Applicable	1	

The inspection team identified five (5) deficient components in the following two (2) Standards:

Environmental Health and Safety- 1 Food Service- 4, one of which is a Priority Component

# **Facility Snapshot/Description**

The El Paso Service Processing Center is located in El Paso, TX, in a largely industrial area close to the El Paso International Airport. It is owned and operated by U.S. Immigration and Custom Enforcement. The facility shares land with the U.S. Border Patrol.

There are eight buildings that contain general population living units, all of which are dormitory-style. The administrative and disciplinary special housing units consist of two-person cells. The medical department has a six-bed infirmary ward and three medical isolation cells. Staffing is adequate. Staff were professional in appearance and demeanor while interacting with the inspection team. Many staff displayed an understanding of the concepts of civil detention and were familiar with the standards. A large majority of the staff is bilingual.

Dayrooms are large and open, and offer numerous activities. Outdoor recreation areas are adjacent to every living unit, and detainees are offered outdoor recreation for no less than two hours per day, seven days per week. Every detainee has a securable personal storage locker in the housing unit. The facility operates at optimal levels in terms of telephone access and law library access. The atmosphere in the housing units was relaxed and detainees freely approached the inspection team members to ask questions or discuss their issues.

No less than 92 detainees were interviewed during the course of the inspection, twenty of which were formal interviews. Confidential interviews indicated that detainees feel safe at the facility, with the exception of three detainees: Two of them had lodged formal complaints prior to the inspection, and the third detainee's complaint was elevated to the Assistant OIC by the inspection team during the inspection. Interviews with LEP detainees indicated that they have no problem accessing services. Several detainees complained that the facility does not have good mir-



rors. They were advised that the Standards do not require mirrors. One detained complained that there is no commissary at the facility. He was advised that the Standards do not require commissaries. One detainee inquired about the availability of notary services, and he was directed to the appropriate source. One detainee stated that he filed a number of grievances and they were not responded to. The Safety SME checked the grievance log and determined that the detainee had filed one grievance, which was responded to. It was denied based on two staff witness statements. Two female detainees stated that they filed grievances about unfair treatment from corrections officers. The Safety SME determined that there was a grievance from these detainees, with their names, and several other detainee names, listed on the grievance as complainants. The grievance officers indicated that the allegations are under investigation. One detainee complained that she was misdiagnosed for stomach issues. The Medical SME checked the medical record and determined that the detainee had an ultrasound, which did not show anything. The medical staff then ordered an abdominal CT scan, and a gall stone was found. Surgery was performed successfully. One male detained complained that two officers were treating him badly. The detainee claimed that he was too afraid to complain through any of the systems in place. The Assistant OIC was informed and he indicated that he would initiate a proper investigation. One detainee stated that he wanted larger food portions. The Safety SME determined that the food portions are within the requirements of the Standard and are in compliance with the nutritional analysis. Two detainees complained of minor medical problems. The Medical SME checked the medical records and determined that both detainees had received appropriate medical attention. Three detainees complained that they had only seen their ICE Officer one time during their detention. However, they then stated that an ICE Officer comes into their housing unit to return request forms and interview detainees frequently. The housing unit logs confirmed that the ICE Officer visits the housing units every Tuesday and Thursday to interview detainees and provide responses to request forms.

The facility issues electronic anklets to every detainee to monitor their location in the facility, as a tool to enhance safety and security. Detainees are required to keep the anklet on at all times. The anklets have the capacity to locate detainees at any time, and also record all detainee movement during their entire stay at the facility. Detainees are permitted to keep no more than \$100 cash on their persons. The detainees have access to vending machines, and no commissary is provided. There is no medical co-payment.

IHSC manages and partially staffs the medical services department, with the contractor InGenesis providing supplemental medical staff. GPS/Asset Security provides detention, transportation, quality assurance, and food services for the facility; Mavagi performs the janitorial services; Jesuit Refugees Services provides contract chaplaincy services; and K-CORP provides maintenance service for the facility.

## **Areas of Concern/Significant Observations**

The inspection team observed small amounts of mold beginning to form in some of the showers. The team recommended to the staff that all mold be eradicated prior to it becoming a health issue.

Priority Component #10 in the Food Service Standard was rated as Does Not Meets.



PRIORITY: Before and during the display, service, and transportation of food, sanitary guidelines are observed, with hot foods maintained at a temperature of at least 140 F degrees and foods that require refrigeration maintained at 41 F degrees or below.

Finding: The temperature of the jello being served during the lunch meal of the first day of the inspection was recorded as being between 42 F degrees and 52 F degrees.

Recommendation: Procedures should be put in place that ensure that all foods that require refrigeration are maintained at or below 41 F degrees during display, service, and transportation of meals

### **Recommended Rating and Justification**

The Lead Compliance Inspector recommends that the facility receive a rating of Meets Standards. The facility complies with the ICE Performance Based National Detention Standards (PBNDS) 2011. One (1) standard was rated as Not Applicable. The remaining forty-one (41) standards were found to Meet Standards.

#### **LCI Assurance Statement**

The findings of Meets Standards and Does Not Meet Standards are accurately and completely documented on the G-324 Inspection Form and are supported by documentation in the inspection file. An out brief was conducted at the facility and in addition to the entire Nakamoto Group, Inc. Inspection Team, the following were present:

ICE Officials –			
F 111 G 66			
Facility Staff –			
	and va	arious other contract employees	
	, Lead Compliance Inspecto	December 13, 2018	
Printed Name of	LCI	Date	