

ICE Needs to Address Prolonged Administrative Segregation and Other Violations at the Imperial Regional Detention Facility





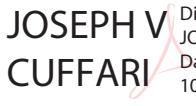
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Department of Homeland Security

Washington, DC 20528 / www.oig.dhs.gov

December 18, 2020

MEMORANDUM FOR: The Honorable Tony H. Pham
Senior Official Performing the Duties of the Director
U.S. Immigration and Customs Enforcement

FROM: Joseph V. Cuffari, Ph.D. 
Inspector General Digitally signed by
JOSEPH V CUFFARI
Date: 2020.12.18
10:57:58 -05'00'
SUBJECT: *ICE Needs to Address Prolonged Administrative Segregation and Other Violations at the Imperial Regional Detention Facility*

Attached for your information is our final report, *ICE Needs to Address Prolonged Administrative Segregation and Other Violations at the Imperial Regional Detention Facility*. We incorporated the formal comments from U.S. Immigration and Customs Enforcement in the final report.

The report contains six recommendations aimed at improving care of detainees at Imperial Regional Detention Center. Your office concurred with all six recommendations. Based on information provided in your response to the draft report, we consider recommendations 1 through 6 open and resolved. Once your office has fully implemented the recommendations, please submit a formal closeout letter to us within 30 days so that we may close the recommendations. The memorandum should be accompanied by evidence of completion of agreed-upon corrective actions and of the disposition of any monetary amounts. Please send your response or closure request to OIGSREFollowup@oig.dhs.gov.

Consistent with our responsibility under the *Inspector General Act*, we will provide copies of our report to congressional committees with oversight and appropriation responsibility over the Department of Homeland Security. We will post the report on our website for public dissemination.

Please call me with any questions, or your staff may contact Tom Kait, Assistant Inspector General for Special Reviews and Evaluations, at (202) 981-6000.

Attachment



DHS OIG HIGHLIGHTS

ICE Needs to Address Prolonged Administrative Segregation and Other Violations at the Imperial Regional Detention Facility

December 18, 2020

Why We Did This Inspection

Treatment and care of detainees at facilities can be challenging and vary greatly. In accordance with the *Consolidated Appropriations Act of 2019*, we conduct annual unannounced inspections of U.S. Immigration and Customs Enforcement (ICE) detention facilities to ensure compliance with detention standards. In February 2020, we inspected the Imperial Regional Detention Facility (IRDF) to evaluate compliance with ICE detention standards.

What We Recommend

We made six recommendations to improve ICE's oversight of detention facility management and operations at IRDF.

For Further Information:

Contact our Office of Public Affairs at (202) 981-6000, or email us at DHS-OIG.OfficePublicAffairs@oig.dhs.gov

What We Found

During our February 2020 unannounced inspection of IRDF in Calexico, CA, we identified violations of ICE detention standards that threatened the health, safety, and rights of detainees. Although IRDF generally complied with the ICE detention standards regarding classification of detainees according to risk, it did not meet the standards for segregation, facility condition, medical grievances, and detainee communication. We determined detainees were held in administrative segregation for prolonged periods of 22 to 23 hours a day, including two detainees who had been held in isolation for more than 300 days. We also determined that parts of the facility were in poor condition, medical checks were insufficient to ensure proper detainee care, medical grievances and responses were not properly documented, and ICE communication with detainees was limited. Until ICE takes corrective action to address these violations of detention standards, the facility will be unable to ensure an environment that protects the health, safety, and rights of detainees.

ICE Response

ICE concurred with all six recommendations and has initiated corrective actions to address the findings outlined in this report.



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Abbreviations

ERO	Enforcement Removal Operations
ICE	U.S. Immigration and Customs Enforcement
IRDF	Imperial Regional Detention Facility
MTC	Management Training Corporation
PBNDs	Performance-Based National Detention Standards



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Introduction

Currently, U.S. Immigration and Customs Enforcement (ICE) houses detainees at roughly 200 facilities nationwide, but the conditions and practices at those facilities can vary greatly. Treatment and care of detainees at the facilities can be challenging. However, complying with detention standards is vital to establishing an environment that protects the health, safety, and rights of detainees. In recent years, our program of unannounced inspections of ICE detention facilities has identified serious violations at several facilities. In February 2020, we conducted an unannounced inspection of Imperial Regional Detention Facility (IRDF) in Calexico, CA, and identified violations of ICE detention standards that threatened the rights, health, and safety of detainees.

Background

ICE apprehends, detains, and removes aliens who are in the United States unlawfully. ICE Enforcement and Removal Operations (ERO) oversees the detention facilities it manages in conjunction with private contractors or state or local governments.

IRDF is a Contract Detention Facility, owned and operated by Management Training Corporation (MTC). ICE ERO in the San Diego region is responsible for IRDF oversight. MTC's contract to house ICE detainees at IRDF requires adherence to the *2011 Performance-Based National Detention Standards*, as revised in 2016 (hereinafter referred to as 2011 PBNDS), which establish consistent conditions of confinement, program operations, and management expectations within ICE's detention system. These standards set requirements for:

- environmental health and safety, including cleanliness, sanitation, security, detainee searches, segregation,¹ and disciplinary systems;

¹ ICE, *Performance-Based National Detention Standards, 2011*, Section 2.12, Special Management Units (Revised Dec. 2016). Segregation is the process of separating certain detainees from the general population for administrative or disciplinary reasons. Detainees in segregation at IRDF are placed in individual cells. Detainees in disciplinary segregation can be held for no more than 30 days per incident, except in extraordinary circumstances. Detainees in disciplinary segregation are allowed out of their cells for 1 hour of recreation time at least 5 days a week. Detainees in administrative segregation are separated from the general population to ensure the safety of all detainees and can be held in segregation until their safety, and the safety of others, is no longer a concern. Detainees in administrative segregation are allowed out of their cells for up to 2 hours of recreation time at least 7 days a week. Detainees in both disciplinary and administrative segregation are also allowed time out of their cells for law library, visitation, and religious services.



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- detainee care, including food service, medical care, and personal hygiene;
- activities, including visitation and recreation; and
- grievance systems.

As mandated by Congress,² we conduct unannounced inspections of ICE detention facilities to ensure compliance with detention standards. In February 2020, we performed an unannounced inspection of IRDF to assess compliance with ICE's 2011 PBNDS. At the time of our visit, IRDF housed 626 ICE detainees with a facility capacity of 704 detainees. The detainee population then comprised 559 males, 63 females, and 4 transgender individuals. IRDF classified detainees according to risk level in order to assign housing with others of similar background and history. Specifically, IRDF holds low custody female detainees and low, medium, and high custody male detainees.³ Low custody detainees resided in open dormitory housing units, while high custody detainees resided in housing units with cells. ICE paid MTC \$155.65 per day for each detainee held at IRDF. During our visit, we inspected IRDF facilities including detainee housing units, food service areas, medical care areas, and recreation and religious areas. We also interviewed ICE personnel, IRDF officials, and detainees.

Results of Inspection

During our February 2020 unannounced inspection of IRDF in Calexico, CA, we identified violations of ICE detention standards that threatened the health, safety, and rights of detainees. Although IRDF generally complied with the ICE detention standards regarding classification of detainees according to risk, it did not meet the standards for segregation, facility condition, medical grievances, and detainee communication. We determined detainees were held in administrative segregation for prolonged periods of 22 to 23 hours a day, including two detainees who had been held in isolation for more than 300 days. We also determined that parts of the facility were in poor condition, medical checks were insufficient to ensure proper detainee care, medical grievances

² Consolidated Appropriations Act, 2019, Pub. L. No. 116-6, Division A, *Department of Homeland Security Appropriations Act, 2019*; Joint Explanatory Statement, 164 CONG. REC. H2045, H2547 (daily ed. Mar. 22, 2018); H.R. Rep. No. 115-948, at 15 (2018); S. Rep. No. 115-283, at 23 (2018).

³ 2011 PBNDS, Section 2.2.V.G, Low custody detainees may have minor criminal histories with non-violent felony charges and convictions. High custody detainees have significant criminal histories, gang affiliation, or history of violence, and must be staff-escorted around the facility. Regardless of custody level, ICE detainees are held in civil, not criminal, custody, which is not supposed to be punitive.



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and responses were not properly documented, and ICE communication with detainees was limited.

IRDF Complied with ICE's Detainee Classification Standard

According to the 2011 PBNDS,⁴ facilities must classify detainees according to risk level in order to assign housing with others of similar background and criminal or civil history, and ensure separation of high custody and low custody detainees. Our review of IRDF policies, guidance, classification records, and observation of detainee intake indicated IRDF complied with the detainee classification standard. Analysis of 45 detainee housing and classification records showed that IRDF classification officers properly classified detainees according to the standard. Further, our facility observations did not reveal comingling of low custody detainees with medium-high or high custody detainees.

IRDF Held Detainees in Administrative Segregation for Prolonged Periods, under Excessively Restricted Conditions, and without Adequate Medical Checks

The 2011 PBNDS state facilities may place a detainee in administrative segregation (including what is commonly known as solitary confinement) when the detainee's continued presence in the general population poses a threat to life, property, self, staff, or other detainees; for the secure and orderly operation of the facility; or for medical reasons.⁵ During our inspection, we identified serious violations regarding the administrative segregation of detainees at IRDF. Specifically, IRDF was using administrative segregation as a long-term solution for detainees in protective custody and overly restricted detainees by not offering privileges similar to those offered to detainees in general housing units. Second, IRDF medical staff were conducting inadequate medical checks — conducting visits when administratively segregated detainees were sleeping — and not physically observing and speaking with each detainee.

At the time of our visit, IRDF held 16 detainees in administrative segregation. Of those 16, we determined that 11 had been held in administrative

⁴ 2011 PBNDS, Section 2.2, Custody Classification System (Revised Dec. 2016).

⁵ 2011 PBNDS, Section 2.12.V.A, Special Management Units (Revised Dec. 2016).

Administrative segregation is meant to be a non-punitive form of separating a detainee from the general population when the continued presence of the detainee in the general population would pose a serious threat to life, property, self, staff, other detainees, or the security or orderly operation of the facility.



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segregation for more than 60 days. Two of the 11, had been held for more than 300 days and the facility had not re-established the need for prolonged segregation placement. Reviewing officials did not document substantive reviews of the validity of continued segregation placement. According to ICE and facility staff, no alternative, less restrictive housing was sought for detainees in administrative segregation, as required by the 2011 PBNDS.⁶ We also discovered that detainees in administrative segregation were not offered recreation for 2 hours per day, 7 days a week, as required by the 2011 PBNDS.⁷ Our examination of segregation records showed the facility inaccurately reported to ICE that detainees were receiving recreation time when, in fact, they were not. Moreover, detainees in administrative segregation were restricted to their individual cells for approximately 22 to 23 hours a day without access to the same group activities or opportunities as those in the general population. According to the 2011 PBNDS, detainees in administrative segregation shall generally receive “the same privileges available to detainees in the general population,” and “may be provided opportunities to spend time outside their cells (in addition to the required recreation periods), for such activities as socializing....”⁸ Detainee mental health may be negatively affected by placement in solitary cells with limited recreation and no access to group activities. In addition, detainees could be held in these overly restrictive housing conditions indefinitely, as facility staff and ICE were not actively seeking less restrictive housing.

IRDF medical staff were conducting inadequate medical visits to segregation units. Facility health care personnel, at a minimum, must conduct daily assessments of segregated detainees.⁹ However, our review of segregation medical logs revealed the medical unit did not sufficiently provide such medical checks. Medical staff regularly conducted medical checks during detainee sleeping hours and spent only 10 to 15 minutes completing the checks and documenting visits to 20 or more detainees. Facility officials cited registered nurse staffing shortages as the reason for the short visits. The facility staffing plan shows there should be nine full-time nurses and one part-time nurse, but

⁶ 2011 PBNDS, Section 2.12.V.A, Special Management Units (Revised Dec. 2016). Use of administrative segregation to protect detainees is “restricted to those instances where reasonable efforts have been made to provide appropriate housing and shall be made for the least amount of time practicable, and when no other viable housing options exist, and as a last resort.”

⁷ 2011 PBNDS, Section 2.12.V.Z, Special Management Units (Revised Dec. 2016). “Detainees in the SMU for administrative reasons shall be offered at least two hours of exercise per day, seven days a week, unless documented security, safety or medical considerations dictate otherwise.”

⁸ 2011 PBNDS, Section 2.12.V.L, Special Management Units (Revised Dec. 2016).

⁹ 2011 PBNDS, Section 2.12.II, Special Management Units (Revised Dec. 2016). “Health care personnel shall at a minimum conduct a daily assessment of detainees in [segregation].”



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there were only six full-time nurses on staff, covering three shifts. By not thoroughly and appropriately conducting medical checks, IRDF staff are not able to adequately identify and address mental health or other medical concerns affecting segregated detainees.

Poor Conditions at IRDF Endangered the Health and Safety of Detainees

We identified concerns with IRDF living conditions, such as dilapidated showers, torn mattresses, stained clothing, insufficient toiletries, expired food, and unreliable detainee communication tablets. These living conditions not only violated ICE detention standards, but in some instances, could pose health and safety risks to detainees.

Dilapidated Showers in Housing Areas

Although the 2011 PBNDS state “facility cleanliness and sanitation shall be maintained at the highest level,”¹⁰ we observed mold, rust, and peeling paint in showers in detainee housing areas, as shown in Figure 1. Also, the showers in the female housing area were operable for 5 to 10 seconds before shutting off, requiring detainees to repeatedly press a button in order to maintain water flow. In contrast, showers in the male housing area flowed for 45 seconds to 1 minute before stopping.



Figure 1. Poor condition of detainee showers as observed by DHS Office of Inspector General (OIG) on February 25, 2020.

Source: OIG

¹⁰ 2011 PBNDS, Section 1.2, Environmental Health and Safety (Revised Dec. 2016).



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Bedding and Clothing at IRDF Was in Disrepair

According to the 2011 PBNDS, detainees shall have suitable, clean bedding.¹¹ However, Figure 2 shows examples of mattresses with sizable tears observed during our inspection. Detainees told us they had complained of torn and deteriorating mattresses, but the facility had not replaced them. IRDF staff showed us examples of new mattresses that were replaced prior to our visit and also provided a mattress acquisition plan to replace all dilapidated mattresses in the facility within a year.



Figure 2. Torn mattresses as observed by DHS OIG on February 25, 2020.

Source: OIG

Although facilities are required to provide detainees with size-appropriate, presentable clothing,¹² we determined IRDF staff issued ill-fitting, stained, and damaged clothing and shoes. IRDF was also issuing ripped and stained sheets to detainees. Our inspection of the laundry area revealed that some clothing in the inventory was in disrepair and was not properly sorted by size for distribution. Within the intake unit storage area, we examined five bags of initial issue clothing and bedding. We found that bags contained wrong clothing sizes in comparison with sizes indicated on the shelves, clothing in poor condition, and torn and stained sheets, as shown in Figure 3. Moreover,

¹¹ 2011 PBNDS, Section 4.5, Personal Hygiene (Revised Dec. 2016).

¹² 2011 PBNDS, Section 4.5.V.B, Personal Hygiene (Revised Dec. 2016). “At no cost to the detainee, all new detainees shall be issued clean, laundered, indoor/outdoor temperature-appropriate, size appropriate, presentable clothing during intake.”



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IRDF staff did not regularly inspect available clothing and bedding, resulting in detainees receiving unsuitable items.



Figure 3. A stained undergarment from an initial issue bag as compared to the white cotton garment issued in new condition. A bedding sheet with stains and holes and a shoe with a crack on the bottom had been provided to detainees, as observed by DHS OIG on February 25, 2020.

Source: OIG

Detainees reported, and facility staff confirmed, that improperly sized uniforms were not replaced, unless requested by the detainee and approved by laundry management staff. IRDF staff stated that detainees could request new clothing on specific days. However, detainees reported and showed us requests for replacement clothing and shoes that had not been fulfilled. One detainee showed us blistered feet from ill-fitting shoes, while another showed us shoes with cracks and holes. Both stated they had requested replacement shoes, but



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did not receive them. We brought this to the attention of IRDF staff who replaced both detainees' shoes during our visit.

IRDF Did Not Issue or Replenish All Required Toiletries

Facilities are required to provide toiletry items including shampoo, soap, lotion, toothbrushes, and toothpaste.¹³ Upon arriving at IRDF, detainees received a bag containing shampoo, deodorant, a toothbrush, a small tube of toothpaste, and a comb. However, detainees recounted not receiving lotion at intake or toiletry replenishments throughout their time at the facility. We inspected the toiletry stock and determined IRDF had no lotion on hand. When asked why detainees' toiletries had not been replenished, facility staff told us detainees could purchase hygiene items through the commissary, which is a violation of ICE standards that require the facility to provide replenishments.

IRDF Had Expired and Moldy Food in the Kitchen

In the food preparation and storage areas we found expired frozen tortillas and turkey bologna, and moldy zucchini. Facility officials said they did not mark frozen food packages and produce boxes with expiration dates. By not labeling food with expiration dates, the kitchen staff has no way of knowing when it expires. Such practices can lead to detainee illness from ingesting spoiled meat or rotten produce. The IRDF kitchen manager disposed of the expired and moldy food we identified while we were on site.

Tablet Devices for Detainee Communications Did Not Always Function Properly

Detainees reported frequently experiencing functionality issues with the tablet devices provided to request medical care, file grievances, contact ICE, and order commissary items. We observed two detainees trying to schedule sick call visits, file grievances, and communicate with ICE. However, in both cases the detainees were unable to complete their requests because the tablets were not functioning properly. We asked facility staff how they fulfilled such requests if tablets were not working and the staff responded that detainees had to wait until their tablets were functioning again. Facility staff put in a work order during our visit to request corrections to address the tablet problem; however, detainees indicated this was an ongoing issue. Further, we found no paper forms in the housing units as backups for when the tablets were not working. Ultimately, unreliable tablet technology may prevent detainees from

¹³ 2011 PBNDS, Section 4.5.V.D, Personal Hygiene (Revised Dec. 2016) requires that staff directly supervise the issuance of personal hygiene items and replenish supplies as needed.



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making timely requests for medical care, filing grievances, contacting ICE, or ordering commissary items.

IRDF Did Not Properly Document Medical Grievances and Its Responses to Them

The 2011 PBNDS require that detainee medical complaints be submitted as formal written grievances. Such complaints are to be directly handled by facility medical personnel who must act on the formal, written grievances within 5 working days of receipt and provide the detainees with written responses.¹⁴ However, IRDF did not properly document medical grievances and its responses to them. At IRDF, a detainee may file a medical grievance by completing and submitting a request form via electronic tablets.¹⁵ Designated medical personnel then review detainee medical files and interview detainees to determine the validity of the grievance. IRDF's health services administrator is responsible for maintaining an official medical grievance log, which should include, among other information, the date and outcome of each grievance decision.¹⁶

Our review of 45 written medical grievances showed the facility improperly classified detainee medical grievances submitted through the electronic tablets as "informal." The 2011 PBNDS describes an informal grievance as an oral complaint or concern received from a detainee.¹⁷ However, detainees at IRDF provided written medical grievances via electronic tablets, not orally and informally. Medical personnel did not provide detainees with written responses as required by the PBNDS. Because the health services administrator did not document and provide written responses to detainees outlining how their concerns would be resolved, medical personnel may not have sufficiently addressed detainee medical grievances and provided care as needed. When we brought this concern to the attention of facility staff, they took immediate remedial action. IRDF's medical personnel began classifying all medical grievances submitted through the electronic tablets as "formal" in accordance with the PBNDS.

¹⁴ 2011 PBNDS, Section 6.2.V.C.4, Grievance System (Revised Dec. 2016).

¹⁵ In September 2019, IRDF started providing electronic tablets to ICE detainees as the new method of filing grievances, sick calls, and other requests.

¹⁶ 2011 PBNDS, Section 6.2.II.7, Grievance System (Revised Dec. 2016).

¹⁷ 2011 PBNDS, Section 6.2.V.C.1, Grievance System (Revised Dec. 2016).



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ICE Provided Limited Communication Opportunities for Detainees and Did Not Always Respond to Requests Timely

According to ICE, its ERO officers visit IRDF two to three times per week to examine certain aspects of its operation and ensure it meets applicable standards. Such visits should include speaking with detainees regarding their complaints, immigration issues, and other pressing matters. ICE posts a schedule in each housing unit showing which days an ERO officer will visit, but the schedule does not include what times each officer will be in each housing unit. During our 3-day visit, we did not observe any ICE ERO officers, apart from those who accompanied us on the facility walkthrough, visiting with detainees even though they were scheduled to be at the facility each day. Detainees similarly reported that ICE ERO staff infrequently visited the housing units. When we asked ICE officials why the schedule did not specify times, they stated that, in the past, operational reasons prevented officers from visiting the facility at their scheduled times.

Furthermore, ICE ERO officers did not always respond timely to detainees' immigration issues and complaints. According to the 2011 PBNDS, in facilities with ICE ERO presence, the person receiving a detainee request should normally respond in person or in writing as soon as practicable, but no later than within 3 business days of receipt.¹⁸ Despite this requirement, between August 2019 and February 2020, ICE ERO officers assigned to IRDF received 3,209 detainee requests, with response times ranging from 1 to 19 business days.¹⁹ We determined that ICE did not provide responses within 3 business days to 674 requests, averaging 6 days to respond to those requests. ICE officials explained that, for approximately 1 year prior to our inspection, they had a staff shortage of seven deportation officers and five enforcement removal assistants responsible for reviewing and responding to detainee requests, which likely contributed to the delays. In April 2020, ICE reported that it filled these vacancies, and should be able to more promptly respond to detainee concerns going forward.

The delays we identified raise concerns regarding ICE's ability to address detainees' immigration questions and concerns in a timely manner. Without knowledge of a consistent and specific visit schedule, detainees may miss opportunities to speak with their assigned ICE ERO officers. Furthermore, detainees not receiving timely responses from ICE ERO officers about

¹⁸ 2011 PBNDS, Section 2.13, Staff-Detainee Communication (Revised Dec. 2016).

¹⁹ To determine the timeliness of ICE's responses to detainees' requests, we counted business days, excluding weekends and holidays.



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immigration concerns has the potential to adversely affect their asylum cases or deportation proceedings.

Conclusion

Complying with ICE's 2011 PBNDS is crucial to establishing an environment that protects the rights, health, and safety of detainees. ICE must ensure IRDF complies with detention standards through increased oversight and engagement with IRDF management and staff.

Recommendations

We recommend the Executive Associate Director of Enforcement and Removal Operations direct the San Diego Enforcement and Removal Field Office responsible for IRDF to:

Recommendation 1: Review IRDF's use of prolonged administrative segregation and seek alternative housing when appropriate.

Recommendation 2: Ensure that, for detainees in administrative segregation, IRDF provides outdoor recreation and access to privileges similar to those offered to detainees in the general population, in compliance with 2011 PBNDS requirements.

Recommendation 3: Require IRDF staff to complete daily face-to-face medical visits with detainees in administrative segregation to ensure detainee welfare.

Recommendation 4: Review the IRDF facility conditions we identified as deficient to ensure corrective action in compliance with 2011 PBNDS requirements.

Recommendation 5: Require IRDF staff to provide written responses to medical grievances and provide copies to the detainees who filed the grievances.

Recommendation 6: More clearly identify time, duration, and location for facility visits to ensure detainees' regular access to assigned ICE ERO deportation officers.



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Management Comments and OIG Analysis

ICE concurred with all six recommendations and described corrective actions to address the issues identified in this report. Appendix B contains ICE management comments in their entirety. We also received technical comments to the draft report and revised it as appropriate. We consider the recommendations resolved and open. A summary of ICE's response and our analysis follows.

ICE Comments to Recommendation 1: Concur. ICE ERO will work with IRDF to continue to maintain compliance with the PBNDS. Typically, detainees who request protective custody have concerns about being in the general population due to gang affiliation, gang drop out, or a criminal conviction involving a minor. A detainee may request protective custody at any time during his/her stay. It is seldom that the facility must initiate a detainee's protective custody to protect them from harm. Detainees at the IRDF do receive segregation reviews at appropriate intervals. ICE ERO will provide completed copies of segregation reviews to demonstrate compliance with the PBNDS. Estimated Completion Date (ECD): March 31, 2021.

OIG Analysis: We consider these actions responsive to the recommendation, which is resolved and open. We will close this recommendation when we receive documentation confirming that ICE ERO has completed segregation reviews demonstrating compliance with PBNDS. ICE must include documentation that it has reviewed alternative housing options for those detainees with prolonged stays in segregation as part of its segregation review.

ICE Comments to Recommendation 2: Concur. ICE ERO will work with IRDF to continue to encourage all detainees to participate in recreation and other out-of-cell activities. Per the PBNDS, all detainees housed within the facility's SMU [Special Management Unit] are offered recreation daily. It is not uncommon, however, for detainees to either refuse to go to recreation, or to return early from recreation, and the option of attending recreation is ultimately the detainee's decision. Moreover, the facility actively continues to search for ways to improve detainee recreation, programming, and socializing. As an example of this effort, the facility recently modified the SMU recreation area, which increased space capacity and consequently allowed the facility to accommodate a larger group of detainees for recreation and other activities. It is also important to note that the detainee population in the facility's SMU and the reasons for their segregation changed frequently, and that the facility made adjustments to these changes, as well, consistent with safety and security considerations. ICE ERO will provide completed detainee recreation requests and refusal forms to demonstrate compliance with the PBNDS. Documentation



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of the expanded recreation area will also be provided for OIG's review. ECD: March 31, 2021.

OIG Analysis: We consider these actions responsive to the recommendation, which is resolved and open. We will close this recommendation when we receive documentation of recreation forms that demonstrate compliance with PBNDS. ICE must include documentation that the facility has offered detainees in administrative segregation the same opportunities as those offered in the general population including group activities, dayroom access, and recreation.

ICE Comments to Recommendation 3: Concur. ICE ERO will work with IRDF to continue to complete daily medical visits with detainees in accordance with the PBNDS. IRDF medical staff previously conducted SMU rounds each day at the start of the facility's Event Schedule. However, most detainees choose to sleep until the morning meal is served. On February 28, 2020, the IRDF Health Service Administrator implemented a new process for daily SMU rounds, in which daily rounds were moved to the evening. Additionally, a new form was generated, titled "Daily Special Management Unit Rounds/Face to Face Assessment," which staff now use to document: 1) the time the visit begins; 2) any signs/symptoms of acute distress; 3) any medical, mental health, and/or dental needs; and 4) the time the visit ends. ICE ERO will provide copies of the completed forms for OIG's review, which will document daily face-to-face SMU rounds being conducted. ECD: March 31, 2021.

OIG Analysis: We consider these actions responsive to the recommendation, which is resolved and open. We will close this recommendation when we receive documentation confirming that IRDF medical staff have implemented the appropriate changes to the daily special management unit rounds. ICE must provide documentation showing that the facility completes medical checks that include daily checks of each detainee in segregation during hours the detainees are awake, including documentation of daily face-to-face interaction with each detainee.

ICE Comments to Recommendation 4: Concur. In March 2020, IRDF quickly corrected the living conditions identified as deficient in response to findings from the inspection, as the facility takes environmental health and safety very seriously. ICE provided pictures of improvements to the shower areas in the facility, as shown in Appendix B. ICE also documented that the facility has moved forward with its mattress acquisition and replacement plan and continues to replace mattresses throughout the facility.



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In order to address clothing and bedding issues, the facility has a process for detainees to request replacement items. As the facility identifies clothing or sheets that are no longer serviceable, the items are taken out of service. The facility does not issue damaged shoes as depicted in the OIG report. There are several detainees within the facility that take full advantage of the facility's two recreation areas, which increases wear and tear of distributed shoes. As with any clothing or shoe, wear and tear is a normal occurrence. The facility's laundry staff are also in the housing units every weekday, providing clothing, exchanges, and replacements. Furthermore, there is a process in place for detainees to submit questions, requests, or concerns regarding health needs, which covers clothing and shoes. This includes the use of tablets to submit forms, and requesting assistance from IRDF staff or housing unit officers in submission of forms.

Facility staff takes the health and safety of all detainees seriously. Staff were unaware of any detainee who reported "blistered feet from ill-fitting shoes" to the OIG. An inquiry with medical staff and medical records revealed no report of a detainee with blistered feet on or around the time of the OIG inspection. Had such a report or request been received by facility staff, immediate and appropriate action would have been taken. The facility has and will continue to maintain compliance with PBNDS 4.5, Personal Hygiene.

In addressing toiletries, ICE reported that the facility not providing lotion as required was an oversight that was immediately corrected, as ample lotion stocks were found in the warehouse on facility grounds. The initial issuance and replenishments of all other personal hygiene items have been, and will continue to be, completed in accordance with PBNDS 4.5 Personal Hygiene.

As indicated in the OIG report, some fresh zucchini was discovered to have spoiled, as well as some expired frozen turkey bologna and frozen tortillas that the facility received from a vendor by mistake. The shelf-life of fresh fruit and vegetables vary, and at times spoil before expected. As reflected in the OIG report, the Food Service Manager immediately discarded all items in question, and under no circumstances would the facility have served the expired food. As required by PBNDS 4.1, Food Service, the facility implemented a first-in, first-out system for stock rotation. All items are date stamped with the date the item was received.

In addressing the issues with electronic tables, ICE reported that ICE ERO HQ manages the Talton Communications Contract for providing telephone services and electronic tablet services. Both the tablets and telephones are inspected by facility staff each shift. If there are any issues that are identified, staff immediately report them to Talton Communications via telephone or email.



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Often, the issues are fixed remotely by Talton and/or by rebooting the tablet. If not, Talton Communications generally has a representative that conducts a weekly visit for services and repairs. Another issue can occur when a detainee submits a request while he/she is using a chat feature on the device, which can cause the system to malfunction by shutting down or timing out. Educating the detainee population on the use of Talton Communications' electronic tablets is an ongoing process that facility staff continue to perform. Furthermore, the facility's procedures and Local Detainee Handbook include guidance for providing assistance and collecting information on questions, requests, and concerns when tablets are not operational.

To document the facility's compliance with the PBNDS, ICE ERO will provide evidence of actions taken to address the facility conditions, including the detainee handbook, as well as evidence of actions addressing the housing unit showers, replacement of mattresses, laundry schedule, detainee linen exchange process, detainee shoe exchange process, availability of lotion, completed food inspection reports, and tablet inspection and service repair reports. ECD: March 31, 2021.

OIG Analysis: We consider these actions responsive to the recommendation, which is resolved and open. We acknowledge IRDF maintenance staff immediately corrected the pressure issue by adjusting the shower valves. OIG inspectors confirmed the remediation by re-inspecting the female showers. We also accept the photos of the showers as proof of remediation and will close this recommendation when we receive additional documentation confirming that IRDF has corrected the remaining deficiencies.

ICE Comments to Recommendation 5: Concur. As indicated in the report, the facility Health Service Administrator took immediate action to correct the clerical mistake of categorizing some of the grievances as "informal." The facility Health Service Administrator corrected the Medical Grievance Log, and now logs electronic grievance submissions as "formal" and detainees receive a written response via the electronic tablet. As also identified in the report, detainees may provide written medical grievances via electronic tablets located in each housing unit. When a grievance is received, designated medical personnel bring the detainee to Medical as part of the process to resolve the detainee's grievance. This process includes both a review of the detainee's medical file and an interview with the detainee. Upon conclusion of the interview, the detainee receives an oral response, followed up by a written response via the electronic tablet. If the detainee is unsatisfied with the resolution at the Grievance Officer Level, he/she may choose to appeal the grievance to the facility's Grievance Appeal Board, Appellate Review, or directly to ICE ERO via the electronic tablet. ICE ERO will provide evidence of



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corrected and completed Medical Grievance Logs depicting the status as a formal resolution process. ECD: March 31, 2021.

OIG Analysis: We consider these actions and the Health Service Administrator's on-the-spot correction responsive to the recommendation, which is resolved and open. We will close this recommendation when we receive documentation IRDF has corrected and completed the medical grievance logs.

ICE Comments to Recommendation 6: Concur. On October 26, 2020 ICE ERO management at the IRDF updated and incorporated a new schedule for Deportation Officers (DOs) who are assigned to detained docket management duties to more routinely visit the dormitories and to ensure detainees' regular access to their assigned DOs. The new schedule identifies the time and duration of the DO's scheduled visits. Due to the current pandemic situation and the office having limited personnel in the office, ICE ERO supervisors may make periodic adjustments to the schedules in order to achieve compliance; however, every effort will be made to ensure that DOs visit the dormitories and detainees on their assigned date/time. The plan/corrective action will lead to greater visibility and accountability under the standard. Coupled with this, the individual supervisors, along with the ICE ERO Contracting Officer Representative, will be required to review the logbooks within each dormitory to ensure that DOs are visiting the dormitories on their assigned date/time. ICE ERO will provide a copy of the newly implemented DO's facility visitation schedule depicting the time of visit, duration, and location of the visits. Evidence of corrective actions implemented on October 26, 2020, will also be provided for OIG's review. ECD: March 31, 2021.

OIG Analysis: We consider these actions responsive to the recommendation, which is resolved and open. We will close this recommendation when we receive documentation of the new ICE ERO schedule and logs showing the visits are occurring.



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Appendix A Objective, Scope, and Methodology

The Department of Homeland Security Office of Inspector General was established by the *Homeland Security Act of 2002* (Public Law 107-296) by amendment to the *Inspector General Act of 1978*.

DHS OIG initiated this inspection consistent with Congress' direction and in response to concerns raised by immigrant rights groups and complaints to the DHS OIG Hotline about conditions for aliens in ICE custody. We generally limited our scope to the 2011 PBNDS for health, safety, medical care, mental health care, grievances, classification and searches, use of segregation, use of force, language access, and staff training. We focused on elements of these standards that could be observed and evaluated without specialized training in medical, mental health, education, or corrections. Our visit to IRDF was unannounced so we could observe normal conditions and operations.

Prior to our inspection, we reviewed relevant background information, including:

- OIG hotline complaints
- ICE 2011 PBNDS
- DHS Office for Civil Rights and Civil Liberties reports
- ICE Office of Detention Oversight reports
- information from nongovernmental organizations

We visited IRDF in Calexico, CA, from February 25 to February 27, 2020. During the visit we:

- inspected areas used by detainees, including intake processing areas; medical facilities; kitchens and dining facilities; residential areas, including sleeping, showering, and toilet facilities; legal services areas, including law libraries and immigration proceedings and rights presentations areas; recreational facilities; and barber shops;
- reviewed the facility's compliance with key health, safety, and welfare requirements of the 2011 PBNDS for classification and searches, segregation, use of force and restraints, medical care, mental health care, medical and nonmedical grievances, and access to translation and interpretation;
- interviewed ICE and detention facility staff members, including key ICE operational and detention facility oversight staff, detention facility



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wardens or individuals in equivalent positions, and detention facility medical, classification, grievance, and compliance officers;

- interviewed detainees held at the detention facilities to evaluate compliance with 2011 PBNDS grievance procedures and grievance resolution; and
- reviewed documentary evidence, including medical files, and grievance and communication logs and files.

We conducted this review under the authority of the *Inspector General Act of 1978, as amended*, and according to the *Quality Standards for Inspection and Evaluation* issued by the Council of the Inspectors General on Integrity and Efficiency.



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Appendix B ICE Comments to the Draft Report

Office of the Chief Financial Officer

U.S. Department of Homeland Security
500 12th Street, SW
Washington, DC 20536



**U.S. Immigration
and Customs
Enforcement**

MEMORANDUM FOR: Joseph V. Cuffari, Ph.D.
Inspector General
Department of Homeland Security

FROM: Stephen A. Roncone **STEPHEN A RONCONE**
Chief Financial Officer and Senior Component Accountable Official
Senior Component Accountable Official
U.S. Immigration and Customs Enforcement

SUBJECT: Management Response to Draft Report: “ICE Needs to Address Prolonged Administrative Segregation and Other Violations at the Imperial Regional Detention Facility”
(Project No. 20-003-SRE-ICE(b))

Thank you for the opportunity to comment on this draft report. U.S. Immigration and Customs Enforcement (ICE) appreciates the work of the Office of Inspector General (OIG) in planning and conducting its review and issuing this report.

ICE is pleased to note OIG’s recognition that the Imperial Regional Detention Facility (IRDF) in Calexico, California, complied with the 2011 Performance-Based National Detention Standards (PBNDS), dated December 2016, regarding classification of detainees. Specifically, the OIG acknowledged that IRDF’s policies, guidance, and records complied with the standards to classify detainees according to risk level.

ICE is committed to continually enhancing civil detention operations to promote a safe and secure environment for both detainees and staff. ICE took immediate action to address many of the OIG’s findings resulting from the inspection and continues to make substantial progress to address the findings and recommendations.

The draft report contained six recommendations, with which ICE concurs. Attached, please find our detailed response to each recommendation. ICE previously submitted technical comments under a separate cover for OIG’s consideration.

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Management Response to Draft Report: “ICE Needs to Address Prolonged Administrative Segregation and Other Violations at the Imperial Regional Detention Facility” (Project No. 20-003-SRE-ICE(b))

Page 2

Again, thank you for the opportunity to review and comment on this draft report. Please feel free to contact me if you have any questions. We look forward to working with you again in the future.

Attachment



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Attachment: Management Response to Recommendation Contained in Project No. 20-003-SRE-ICE(b)

OIG recommended that ICE's Executive Associate Director of Enforcement and Removal Operations (ERO) direct the San Diego Enforcement and Removal Field Office responsible for IRDF to:

Recommendation 1: Review IRDF's use of prolonged administrative segregation and seek alternative housing when appropriate.

Response: Concur. ICE ERO will work with IRDF to continue to maintain compliance with the PBNDS 2.12, Special Management Unit section (V)(A)(1)(c), "A detainee requires protection. Protective custody may be initiated at the detainee's request or by staff as needed to protect the detainee from harm." As previously provided to the OIG in documentation submitted November 6, 2020, 12 detainees who were in the facility's Special Management Unit (SMU) at the time of the February 2020 inspection had initiated/requested their own protective custody. Typically, detainees who request protective custody have a background or history that concerns them in detention, such as gang affiliation, gang drop out, or a criminal conviction involving a minor. A detainee may request protective custody at any time during his/her stay. It is seldom that the facility must initiate a detainee's protective custody to protect them from harm. Detainees at the IRDF do receive segregation reviews at appropriate intervals. ICE ERO will provide completed copies of segregation reviews to demonstrate compliance with the PBNDS. Estimated Completion Date (ECD): March 31, 2021.

Recommendation 2: Ensure that, for detainees in administrative segregation, IRDF provides outdoor recreation and access to privileges similar to those offered to detainees in the general population, in compliance with 2011 PBNDS requirements.

Response: Concur. ICE ERO will work with IRDF to continue to encourage all detainees to participate in recreation and other out-of-cell activities. Per the PBNDS, 2.12 Special Management Unit section (V)(Z):

"Recreation for detainees housed in the SMU shall be separate from the general population. Facilities are encouraged to maximize opportunities for group participation during recreation and other activities, consistent with safety and security considerations. Recreation for certain individuals shall occur separate from all other detainees when necessary or advisable to prevent assaults and to reduce management problems."

Accordingly, all detainees housed within the facility's SMU are offered recreation daily. It is not uncommon, however, for detainees to either refuse to go to recreation, or to



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return early from recreation, and the option of attending recreation is ultimately the detainee's decision. Moreover, the facility actively continues to search for ways to improve detainee recreation, programming, and socializing. As an example of this effort, the facility recently modified the SMU recreation area, which increased space capacity and consequently allowed the facility to accommodate a larger group of detainees for recreation and other activities. It is also important to note that the detainee population in the facility's SMU and the reasons for their segregation changed frequently, and that the facility made adjustments to these changes, as well, consistent with safety and security considerations. ICE ERO will provide completed detainee recreation requests and refusal forms to demonstrate compliance with the PBNDS. Documentation of the expanded recreation area will also be provided for OIG's review. ECD: March 31, 2021.

Recommendation 3: Require IRDF staff to complete daily face-to-face medical visits with detainees in administrative segregation to ensure detainee welfare.

Response: Concur. ICE ERO will work with IRDF to continue to complete daily medical visits with detainees in accordance with the PBNDS. IRDF medical staff previously conducted SMU rounds each day at the start of the facility's Event Schedule. However, most detainees choose to sleep until the morning meal is served. On February 28, 2020, the IRDF Health Service Administrator implemented a new process for daily SMU rounds, in which daily rounds were moved to the evening. Additionally, a new form was generated, titled "Daily Special Management Unit Rounds/Face to Face Assessment," which staff now use to document: 1) the time the visit begins; 2) any signs/symptoms of acute distress; 3) any medical, mental health, and/or dental needs; and 4) the time the visit ends. ICE ERO will provide copies of the completed forms for OIG's review, which will document daily face-to-face SMU rounds being conducted. ECD: March 31, 2021.

Recommendation 4: Review the IRDF facility conditions we identified as deficient to ensure corrective action in compliance with 2011 PBNDS requirements.

Response: Concur. In March 2020, IRDF quickly corrected the living conditions identified as deficient in response to findings from the inspection, as the facility takes environmental health and safety very seriously. It is important to note, however, that the facility has not experienced any detainee ailment that was caused by a health, sanitation, or safety condition within the facility.

Showers in Housing Areas

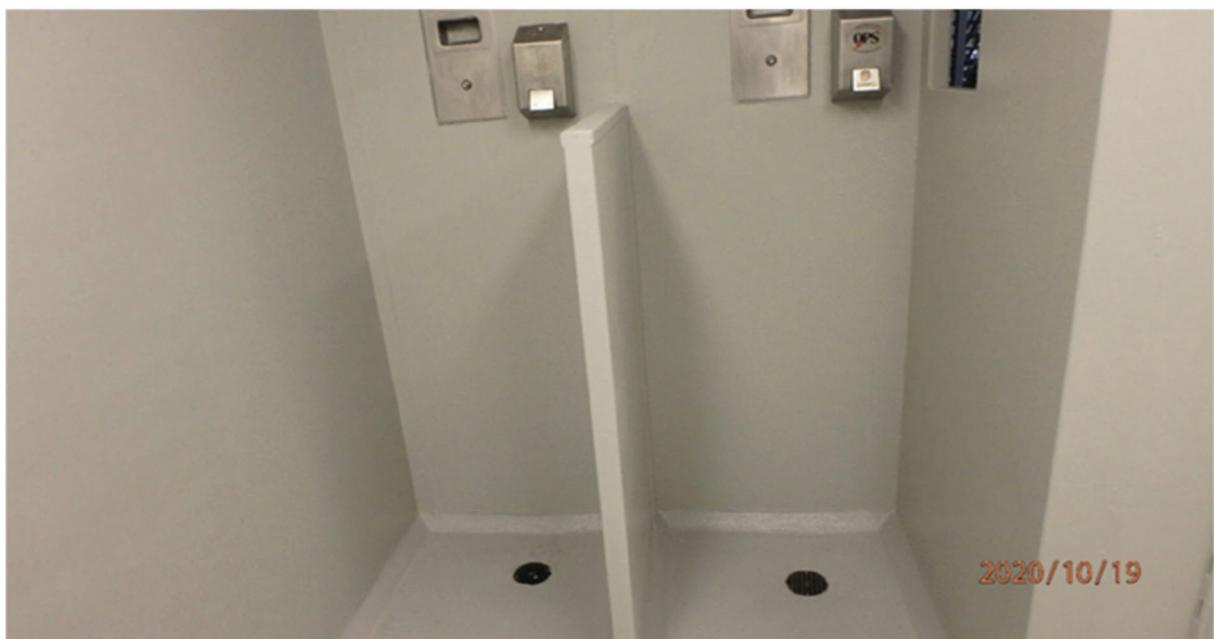
As discussed with the inspectors during the February 2020 inspection, the facility began painting the housing units in October of 2019. Unfortunately, the paint that was used in the showers began to fail, as reflected in the OIG's photos. Prior to and during the inspection, the facility actively sought quotes from contractors, as well as a better paint



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product that could be used in the showers and applied by facility maintenance. As evidence of the facility's efforts, the inspectors were provided with the contractor's quote the facility received on January 24, 2020. In March 2020, shortly after the inspection, the facility used a different paint product within the showers. As reflected in the following photos taken on October 19, 2020, the paint product resolved the cited deficiencies noted in the inspection report.





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The showers are cleaned and sanitized multiple times daily, and the facility disagrees that mold was present.

The facility also immediately corrected the issue of the showers in the female unit not operating beyond the “5 to 10” seconds, which the OIG verified while onsite. As discussed during the inspection, all shower valves in the female unit were recently replaced, and the individual replacing the valves did not realize the valves required adjustment after the valve replacement. All shower valves throughout the facility were checked and, where required, adjusted.

Bedding and Clothing

As identified and confirmed by the OIG, the facility provided the inspectors with a mattress acquisition and replacement plan that was in place before the OIG’s February 2020 inspection occurred. In October 2019, the facility began purchasing mattresses, and in November of 2019, the facility began receiving and replacing the facility mattresses. This was evident by the new mattresses that the OIG inspector confirmed seeing on site. As of August 2020, all mattresses within the facility were replaced with new mattresses.

As required in PBNDS 4.5 Personal Hygiene, upon admission to the facility, all detainees receive “clean, laundered, indoor/outdoor temperature-appropriate, size appropriate, presentable clothing.” Detainees also receive a mesh laundry bag and are instructed on the process to follow in laundering their clothing items. The facility has a laundry



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schedule that is posted in all housing units that identifies the various days in which the different garments and linens are washed. Inevitably, some detainees will wash their colored garments with white garments and linens, which is the reason why the sheet and undergarments depicted in the OIG report were tan rather than white. The tan dying of the white linens and undergarments do not affect the serviceability or cleanliness of the garments or linens, nor does the PBNDS require specific colored undergarments or linens.

Regarding the sheet with the tears on the sides, these are caused by detainees perforating the edges of the sheet in order to tie the sheet around the mattresses. The facility discourages detainees from damaging property and takes the appropriate action when it is identified. Generally, the small perforations do not affect the serviceability of the sheet until they are ripped such as the sheet depicted in the OIG report. Unfortunately, with the volume of laundry, from time to time sheets such as the one depicted in the photo may inadvertently be redistributed. As noted below, the facility has a process for detainees to request replacement linen. As the facility identifies sheets that are no longer serviceable, the sheets are taken out of service.

The facility does not issue damaged shoes as depicted in the OIG report. There are several detainees within the facility that take full advantage of the facility's two recreation areas, which increases wear and tear of distributed shoes. As with any clothing or shoe, wear and tear is a normal occurrence. The facility has a process in place for detainees to request replacement clothing and linen, and instructions are provided during orientation and delineated in the facility's "Local Detainee Handbook." The facility's laundry staff are also in the housing units every weekday, providing clothing, exchanges, and replacements.

Furthermore, as instructed during the orientation process to the facility, and as delineated in the facility's Local Detainee Handbook, there is a process in place for detainees to submit questions, requests, or concerns regarding health needs, which covers clothing and shoes. This includes the use of tablets to submit forms, and requesting assistance from IRDF staff or housing unit officers in submission of forms.

Facility staff takes the health and safety of all detainees seriously. Staff were unaware of any detainee who reported "blistered feet from ill-fitting shoes" to the OIG. An inquiry with medical staff and medical records revealed no report of a detainee with blistered feet on or around the time of the OIG inspection. Had such a report or request been received by facility staff, immediate and appropriate action would have been taken. The facility has and will continue to maintain compliance with PBNDS 4.5, Personal Hygiene.



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Replenish All Required Toiletries

Not providing lotion as required was an oversight that was immediately corrected, as ample lotion stocks were found in the warehouse on facility grounds. The initial issuance and replenishments of all other personal hygiene items have been, and will continue to be, completed in accordance with PBNDS 4.5 Personal Hygiene. Subsequent inspections and inquiries revealed no other deficiencies regarding the issuance and replenishment of lotion to detainees.

Food in the Kitchen

As indicated in the OIG report, some fresh zucchini was discovered to have spoiled, as well as some expired frozen turkey bologna and frozen tortillas that the facility received from a vendor by mistake. The shelf-life of fresh fruit and vegetables vary, and at times spoil before expected. As reflected in the OIG report, the Food Service Manager immediately discarded all items in question, and under no circumstances would the facility have served the expired food. Subsequent inspections of food service have revealed no further issues.

As required by PBNDS 4.1, Food Service, the facility implemented a first-in, first-out system for stock rotation. All items are date stamped with the date the item was received.

Tablet Devices for Detainee Communications:

The Talton Communications Contract for providing telephone services and electronic tablet services is managed by ERO at ICE headquarters. Both the tablets and telephones are inspected by facility staff each shift. If there are any issues that are identified, staff immediately report them to Talton Communications via telephone or email. Often, the issues are fixed remotely by Talton and/or by rebooting the tablet. If not, Talton Communications generally has a representative that conducts a weekly visit for services and repairs. Another issue can occur when a detainee submits a request while he/she is using a chat feature on the device, which can cause the system to malfunction by shutting down or timing out. Educating the detainee population on the use of Talton Communications' electronic tablets is an ongoing process that facility staff continue to perform. Furthermore, the facility's procedures and Local Detainee Handbook include guidance for providing assistance and collecting information on questions, requests, and concerns when tablets are not operational.

To document the facility's compliance with the PBNDS, ICE ERO will provide evidence of actions taken to address the facility conditions, including the detainee handbook, as well as evidence of actions addressing the housing unit showers, replacement of mattresses, laundry schedule, detainee linen exchange process, detainee shoe exchange



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process, availability of lotion, completed food inspection reports, and tablet inspection and service repair reports. ECD: March 31, 2021.

Recommendation 5: Require IRDF staff to provide written responses to medical grievances and provide copies to the detainees who filed the grievances.

Response: Concur. As indicated in the report, the facility Health Service Administrator took immediate action to correct the clerical mistake of categorizing some of the grievances as “informal.” The facility Health Service Administrator corrected the Medical Grievance Log, and now logs electronic grievance submissions as “formal” and detainees receive a written response via the electronic tablet.

As also identified in the report, detainees may provide written medical grievances via electronic tablets located in each housing unit. When a grievance is received, designated medical personnel bring the detainee to Medical as part of the process to resolve the detainee’s grievance. This process includes both a review of the detainee’s medical file and an interview with the detainee. Upon conclusion of the interview, the detainee receives an oral response, followed up by a written response via the electronic tablet. If the detainee is unsatisfied with the resolution at the Grievance Officer Level, he/she may choose to appeal the grievance to the facility’s Grievance Appeal Board, Appellate Review, or directly to ICE ERO via the electronic tablet. ICE ERO will provide evidence of corrected and completed Medical Grievance Logs depicting the status as a formal resolution process. ECD: March 31, 2021.

Recommendation 6: More clearly identify time, duration, and location for facility visits to ensure detainees’ regular access to assigned ICE ERO deportation officers.

Response: Concur. On October 26, 2020 ICE ERO management at the IRDF updated and incorporated a new schedule for Deportation Officers (DOs) who are assigned to detained docket management duties to more routinely visit the dormitories and to ensure detainees’ regular access to their assigned DOs. The new schedule identifies the time and duration of the DO’s scheduled visits. Due to the current pandemic situation and the office having limited personnel in the office, ICE ERO supervisors may make periodic adjustments to the schedules in order to achieve compliance; however, every effort will be made to ensure that DOs visit the dormitories and detainees on their assigned date/time. The plan/corrective action will lead to greater visibility and accountability under the standard. Coupled with this, the individual supervisors, along with the ICE ERO Contracting Officer Representative, will be required to review the logbooks within each dormitory to ensure that DOs are visiting the dormitories on their assigned date/time. ICE ERO will provide a copy of the newly implemented DO’s facility visitation schedule depicting the time of visit, duration, and location of the visits. Evidence of corrective actions implemented on October 26, 2020, will also be provided for OIG’s review. ECD: March 31, 2021.



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