

Office of Professional Responsibility

Otay Mesa Detention Center Inspection 2025-001-028

November 5-7, 2024



U.S. Immigration
and Customs
Enforcement



U.S. Department of Homeland Security
U.S. Immigration and Customs Enforcement
Office of Professional Responsibility
ICE Inspections
Washington, DC 20536-5501

**Office of Detention Oversight
Compliance Inspection
2025-001-028**

**Enforcement and Removal Operations
ERO San Diego Field Office**

**Otay Mesa Detention Center (San Diego CDF)
San Diego, California**

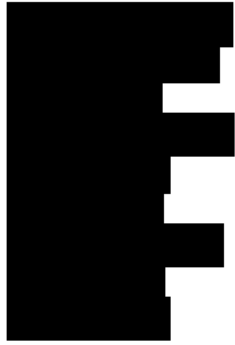
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**COMPLIANCE INSPECTION
of the
OTAY MESA DETENTION CENTER (SAN DIEGO CDF)
San Diego, California**

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COMPLIANCE INSPECTION TEAM MEMBERS



Team Lead	ODO
Senior Inspection and Compliance Specialist	ODO
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Contractor	Creative Corrections
Contractor	Creative Corrections

FACILITY OVERVIEW

The U.S. Immigration and Customs Enforcement (ICE) Office of Professional Responsibility (OPR) Office of Detention Oversight (ODO) conducted a compliance inspection of the Otay Mesa Detention Center (San Diego CDF) (OMDC) in San Diego, California, from November 5 to 7, 2024.¹ The facility opened in 2015 and is owned and operated by CoreCivic. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at OMDC in 2015 under the oversight of ERO’s Field Office Director in San Diego (ERO San Diego). The facility operates under the Performance-Based National Detention Standards (PBNDS) 2011 (Revised 2016).

[REDACTED] A facility administrator handles daily operations and manages support personnel. Trinity Services provides food services, CoreCivic provides medical care, and Keefe Commissary provides commissary services at the facility. The facility was accredited by the National Commission on Correctional Health Care in July 2021 and the American Correctional Association in January 2023. In September 2022, OMDC was audited for the Department of Homeland Security (DHS) Prison Rape Elimination Act (PREA) and was DHS PREA certified.

Capacity and Population Statistics	Quantity
ICE Bed Capacity ²	[REDACTED]
Average ICE Population ³	[REDACTED]
Adult Male Population (as of November 5, 2024)	[REDACTED]
Adult Female Population (as of November 5, 2024)	[REDACTED]

During its last rated inspection, in Fiscal Year (FY) 2024, ODO found 6 deficiencies in the following areas: Hunger Strikes (1); Medical Care (1); Post Orders (3); and Staff-Detainee Communication (1).

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

² Data Source: ERO Custody Management Division Authorized Facility List as of November 4, 2024.

³ *Ibid.*

COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population of 10 or more, and where detainees are housed for over 72 hours, to assess compliance with ICE national detention standards. While these inspections focus on facility compliance with detention standards that directly affect detainee life, health, safety, and/or well-being, in FY 2024 ODO added additional standards to the scope of each full inspection to ensure ODO inspects every standard at each facility at least once every other year.⁴

ODO identifies violations of ICE detention standards, ICE policies, or operational procedures, as “deficiencies.” ODO highlights instances when 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.

⁴ 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 ^{5,6}	Deficiencies
Part 1 - Safety	
Emergency Plans	0
Environmental Health and Safety	0
Transportation (by Land)	0
Sub-Total	0
Part 2 - Security	
Admission and Release	0
Custody Classification System	0
Contraband	0
Funds and Personal Property	0
Hold Rooms in Detention Facilities	0
Key and Lock Control	0
Sexual Abuse and Assault Prevention and Intervention	0
Special Management Units	0
Staff -Detainee Communication	0
Tool Control	0
Use of Force and Restraints	0
Sub-Total	0
Part 4 - Care	
Food Service	1
Medical Care	0
Medical Care (Women)	0
Significant Self-harm and Suicide Prevention and Intervention	1
Terminal Illness, Advance Directives and Death	0
Disability Identification, Assessment, and Accommodation	0
Sub-Total	2
Part 5 - Activities	
Recreation	0
Visitation	0
Sub-Total	0
Part 6 - Justice	
Detainee Handbook	0
Grievance System	0

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

⁶ Beginning in FY 2024, ODO instituted a process of rotating all standards every other year. As a result, some standards may not be present in all inspections.

Sub-Total	0
Part 7 - Administration and Management	
Staff Training	0
Sub-Total	0
Total Deficiencies	2

DETAINEE RELATIONS

ODO interviewed 28 detainees, who each voluntarily agreed to participate. ODO attempted to interview four additional detainees, but all four declined ODO's request for an interview. None of the detainees made allegations of discrimination, mistreatment, or abuse. All detainees reported satisfaction with facility services.

COMPLIANCE INSPECTION FINDINGS

CARE

FOOD SERVICE (FS)

ODO interviewed the food service manager, reviewed the multi-tank conveyor machine temperature records, and found the multi-tank conveyor machine's wash temperature at 130 Fahrenheit (F) degrees and pumped rinse at 120 F degrees (**Deficiency FS-371**⁷).

SIGNIFICANT SELF-HARM AND SUICIDE PREVENTION AND INTERVENTION (SSHSP)

ODO reviewed 10 suicide watch logs for of detainees placed in isolated confinement and found in 2 out of the 10 logs, 1 instance where clinical staff documented continuous 1-to-1 monitoring 12 hours after the previous documented welfare check, and 1 instance where clinical staff documented continuous 1-to-1 monitoring 16 hours after the previous documented welfare check (**Deficiency SSHSPI-35**⁸).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 25 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 23 of those standards. ODO found two deficiencies in the remaining two standards. Since OMDC's last rated inspection in November 2023, the facility's overall compliance has trended upward. OMDC went from 4 deficient

⁷ “(3) The following temperatures must be maintained for hot-water sanitizing: ...

c) Multi-tank, conveyor machine: wash temperature of 150 F degrees; pumped rinse, 160 F degrees; final rinse, 180 F degrees.”

See ICE PBNDS 2011 (Revised 2016), Standard, Food Service, Section (V)(J)(7)(g)(3)(c).

⁸ “All suicidal detainees placed in an isolated confinement setting will receive continuous one-to-one monitoring, welfare checks at least every 8 hours conducted by clinical staff.” See ICE PBNDS 2011 (Revised 2016), Standard, Significant Self-harm and Suicide Prevention and Intervention, Section (V)(F).

standards and 6 deficiencies in November 2023, to 2 deficient standards and 2 deficiencies in this most recent inspection. OMDC completed its uniform corrective action plan for its last inspection in August 2024, which likely resolved the previous deficiencies ODO cited. ODO recommends ERO San Diego continue to work with the facility to ensure compliance with the PBNDS 2011 (Revised 2016).

Compliance Inspection Results Compared	FY 2024 Full Inspection (PBNDS 2011) (Revised 2016)	FY 2025 Full Inspection (PBNDS 2011) (Revised 2016)
Standards Reviewed	29	25
Deficient Standards	4	2
Overall Number of Deficiencies	6	2
Priority Component Deficiencies	0	0
Repeat Deficiencies	0	0
Areas Of Concern	0	0
Corrective Actions	0	0
Facility Rating	Good	Superior



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