January 28, 2021

MEMORANDUM TO: Enrique M. Lucero
Acting Executive Associate Director
Enforcement and Removal Operations
U.S. Immigration and Customs Enforcement

FROM: Peter E. Minar
Deputy Officer for Programs and Compliance
Office for Civil Rights and Civil Liberties

Dana Salovo-Dunn
Director, Compliance Branch
Office for Civil Rights and Civil Liberties

SUBJECT: Richwood Correctional Center
Complaint No. 20-10-ICE-0839

The U.S. Department of Homeland Security (DHS), Office for Civil Rights and Civil Liberties (CRCL), conducted a targeted investigation1 into conditions of detention for U.S. Immigration and Customs Enforcement (ICE) detainees at the Richwood Correctional Center (Richwood) in Richwood, Louisiana. CRCL’s review focused on Richwood’s COVID-19 response, specifically regarding concerns raised by anonymous whistleblowers alleging that deficient institutional practices and mismanagement resulted in the spread of COVID-19.

CRCL became aware of significant allegations related to COVID-19 attributed to whistleblower in an article titled, “Whistleblowers from Richwood Correctional Center in Louisiana Report Unsafe Practices that Promote the Spread of COVID-19 in ICE detention,”2 which stated that anonymous current and/or former detention officers at Richwood reported concerns regarding:

- Conducting intake on arriving ICE detainees who were reportedly diagnosed as COVID-19 positive without putting in place required Center for Disease Control (CDC) health and safety equipment or protocols.

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1 In FY20 CRCL piloted “targeted investigations.” These investigations are expedited and consist of a full review focused on a specific issue or allegation and may result in an Expert Recommendation Memorandum based on the findings. In order to expedite the findings and recommendations, full underlying expert reports are not prepared, rather the expert recommendations are consolidated into the summary “Expert Recommendation Memorandum” document.

• Transporting COVID-19-exposed detainees alongside detainees and staff who had not been exposed to the virus.
• Removing “COVID-19 [positive] detainees to Central America.”
• “Quarantining tuberculosis patients [in the same housing unit as] COVID-19 patients.
• Failing to report “information on COVID-19 infections at Richwood, including the refusal to acknowledge the death of two employees.”
• “Requiring employees potentially infected with COVID-19 to work while waiting for test results.”
• “Requiring employees who were sick, elderly, had pre-existing conditions, or unwilling to risk COVID-19 exposure, to use their personal leave or go without pay.”
• Failing to implement adequate safety training and testing, “including not testing detainees after releasing them from quarantine.”
• “Banning the use of [Personal] [P]rotective [E]quipment [(PPE)] at Richwood for several weeks after the release of CDC guidelines and after knowingly accepting COVID-19 patients.”
• “Failing to sanitize dorms or common areas with [CDC]-mandated frequency.”

Upon review of the allegations, CRCL reviewed the findings of a recently conducted comprehensive onsite investigation of Richwood with four independent experts from February 20-21, 2020. CRCL issued a formal Expert Recommendation Memorandum to ICE on September 24, 2020.

Given these findings, coupled with onset of COVID-19, CRCL began to monitor positivity rates at Richwood.

CRCL conducted the Richwood investigation at Richwood on

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3 See CRCL Expert Recommendation Memorandum to Enrique M. Lucero, Executive Associate Director Enforcement and Removal Operations, Immigration and Customs Enforcement from Peter E. Mina, Deputy Officer Office for Civil Rights and Civil Liberties (Sept. 24, 2020).
4 Id. There were other recommendations made that were not directly relevant to the COVID-19 allegations. A full copy of the report has been attached to this document.
5 CRCL conducted a remote onsite investigation of Richwood utilizing WebEx, arranged by ICE, as the means of communication with detainees and facility staff.
September 30 – October 2, 2020. As part of September’s targeted investigation, CRCL used three subject-matter experts: a medical consultant, environmental health and safety consultant, and a penologist.

At the close of the investigation, CRCL held an exit-briefing where we discussed our preliminary findings with ICE leadership and Richwood management.

The recommendations prepared by our subject matter experts are listed in the body of this memorandum. As this was a targeted onsite, rather than a typical CRCL facility onsite, CRCL will not provide ICE the underlying expert reports in order to send this information to ICE more quickly. To that end, CRCL asked our experts to expedite their work and limit their work product to statements of the problems and the accompanying recommendations. CRCL, however, has issued its usual summary cover memorandum following onsite investigations providing the main findings and recommendations in condensed form. Should ICE require more information, CRCL is happy to schedule a discussion with the experts.


Per the typical process, CRCL requests that ICE formally concur or non-concur with these recommendations and provide CRCL with an implementation plan for all accepted recommendations within 60 days, consistent with our standard practice.

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6 This directive, developed in response to the U.S. District Court for the Central District of California’s April 20, 2020 preliminary injunction requirement that ICE “issue a performance standard or a supplement to their Pandemic Response Requirements ... defining the minimum acceptable detention conditions for detainees with risk factors,” “sets forth expectations and assists ICE detention facility operators in sustaining detention operations while mitigating risk to the safety and wellbeing of detainees, staff, contractors, visitors, and stakeholders due to COVID-19.” Id. at 4, citing Fralihat v. ICE, --- F.Supp.3d ---, 2020 WL 1932570, *29 (C.D. Cal. Apr. 20, 2020). ICE/ERO’s Pandemic Response Requirements have been updated periodically “to define the ‘minimum acceptable detention conditions for detainees with risk factors’ [and] builds upon previously issued guidance” setting “forth specific mandatory requirements to be adopted by all detention facilities, as well as recommended best practices, to ensure that detainees are appropriately housed and that available mitigation measures are implemented during this unprecedented public health crisis.” Id. The ICE/ERO Pandemic Response Requirement was “developed in consultation with the Centers for Disease Control and Prevention (CDC) and is a dynamic document that will be updated as additional/revised information and best practices become available.” Id.
Accordingly, CRCL’s experts recommend that:

1. LaSalle management and Richwood leadership should immediately familiarize themselves with, and become knowledgeable of, ICE/ERO COVID-19 PRR and any subsequent versions issued by ICE. ICE ERO should provide the necessary information and guidance to ensure this awareness. ICE/ERO COVID-19 PRR: Objectives Pages 5-6, CDC Interim Guidance on Management of Coronavirus Disease 2019 (COVID-19) in Correctional and Detention Facilities, Section: Operational Preparedness, and PBNDS 2011/16, 1.1 Emergency Plans.

2. [Redacted]

3. Richwood should develop and implement a training program that provides staff the necessary, ongoing, and formal training on COVID-19 prevention and response. This staff training program should address all applicable operational policies and cross-disciplinary guidance, including ICE/ERO COVID-19 PRR and any policies, SOPs, and guidance developed as a result of this memorandum, and should ensure that all staff demonstrate competency as it relates to COVID-19 and their ability to perform their duties adequately. ICE/ERO COVID-19 PRR: Objectives Pages 5-6, CDC Interim Guidance on Management of Coronavirus Disease 2019 (COVID-19) in Correctional and Detention Facilities, Section: Operational Preparedness, and PBNDS 2011/16, 1.1 Emergency Plans, 4.3 Medical Care, V.

\(^6\) Id. at 6.
4. Richwood should develop and implement an education program that provides detainees the necessary, continuous, and formal education on COVID-19 prevention and response. This detainee education should address all relevant and appropriate operational policies and cross-disciplinary guidance related to COVID-19, including ICE/ERO COVID-19 PRR and any policies, SOPs, and guidance developed as a result of this Recommendation Memorandum that impact the detainee population, including where to obtain a mask and how to maintain or replace it. The education program should include group detainee meetings with Richwood administrative and healthcare officials to provide ongoing information to detainees. (See infra discussion on Masks/Face Coverings, at page 13). ICE/ERO COVID-19 PRR: Objectives Pages 5-6, CDC Interim Guidance on Management of Coronavirus Disease 2019 (COVID-19) in Correctional and Detention Facilities, Section: Operational Preparedness, and PBNDS 2011/16, 1.1 Emergency Plans, 4.3 Medical Care, V.

**Detainee Transfers:**


7. ICE/ERO should strictly adhere to CDC guidelines on the transfer, removal, and release of detainees and should not transfer or remove any detainees that are in medical isolation, experiencing symptoms commonly associated with COVID-19, awaiting COVID-19 tests results and/or quarantined due to COVID-19 exposure. For detainee releases meeting any of the above criteria, a discussion should be held with relevant state, local, tribal, and/or territorial health departments to coordinate continuation of care. ERO COVID-19 Transfer, Removal, and Release Checklist, and CDC Interim Guidance on Management of Coronavirus Disease 2019 (COVID-19) in Correctional and Detention Facilities.


ICE/ERO Oversight of Richwood:

The ICE/ERO COVID-19 PRR mandates significant oversight by ICE “[t]o ensure that detention facilities comply with the detention requirements set forth in the ERO PRR.” Specifically, “ICE will conduct bi-weekly spot checks at over 72-hour ICE detention facilities during the COVID-19 pandemic. Upon identification of a deficiency, ICE will provide written notice to the facility and allow seven business days for submission of a corrective action plan to ICE for approval. Life/safety issues identified by ICE will be corrected during the COVID-19 spot checks, if possible, or the facility will be required to submit a corrective action plan within three business days.”

ICE/ERO does not have a permanent ICE/ERO Supervising Detention and Deportation Officer (SDDO) or Detention Officers (DOs) assigned to Richwood. The Richwood SDDO position is filled by 60-day rotational SDDOs and 45-day rotational DOs. While the SDDOs assigned to Richwood have a SharePoint Link to ensure historical and current information regarding immigration related concerns to provide access to historical knowledge; Accordingly, CRCL’s experts recommend:

9. ICE/ERO should ensure that the bi-weekly spot-checks required by the ICE/ERO COVID-19 PRR are conducted at Richwood. CRCL recommends that ICE do this by identifying an individual to serve as a COVID-19 POC or liaison between the agency and

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12 Id. at 6.
13 Id.
Richwood, and any other facilities in this AOR with temporary ICE/ERO oversight. This individual should be up to date with all information and guidance offered to facility leadership and briefs newly assigned SDDOs and DOs of the same. ICE/ERO COVID-19 PRR.

**Staffing:** Richwood has a 25% custody staff vacancy rate. As a result, staff report working 10-20 hours of overtime per week. For example, the Richwood Training Supervisor reported that staffing shortages make delivering needed training to staff much more difficult. Additionally, interviews with Richwood leadership, including the director of human resources, revealed that Richwood does not have a procedure in place to accommodate staff with underlying medical conditions that increase their risk for severe illness from COVID-19 and would like to request a revised duty assignment. Accordingly, CRCL’s experts recommend:

10. Richwood should conduct a staffing analysis to determine the minimum levels of staff in all categories required for the facility to function safely. This analysis should account for the likelihood that staff might need to quarantine at home during COVID-19. PBNDS 2011/16, Facility and Control, 2.4 Section II and Section IV[^14], CDC Interim Guidance on Management of Coronavirus Disease 2019 (COVID-19) in Correctional and Detention Facilities, and ICE/ERO COVID-19 PRR.

11. Richwood should develop and implement a written procedure for employees to request revised duty assignments due to underlying medical conditions that increase their risk for severe illness from COVID-19. CDC Interim Guidance on Management of Coronavirus Disease 2019 (COVID-19) in Correctional and Detention Facilities and ICE/ERO COVID-19 PRR.

**Transportation of detainees:**

Catahoula Correctional Facility (Catahoula) Transportation Department is responsible for Richwood transportation. The LaSalle

[^14]: PBNDS 2011/16 Facility and Control, 2.4 Section II. Expectations (“The facility administrator shall develop and document comprehensive detainee supervision guidelines, as well as a comprehensive staffing analysis and staffing plan, to determine and meet the facility’s detainee supervision needs; these shall be reviewed and updated at least annually.”); Section IV. References (“The facility administrator shall develop and document comprehensive detainee supervision guidelines, as well as a comprehensive staffing analysis and staffing plan, to determine and meet the facility’s detainee supervision needs; these shall be reviewed and updated at least annually.”)
Transportation vehicles are enclosed spaces and have surfaces that can unnecessarily expose staff or detainees to COVID-19 if not properly sanitized. The ICE/ERO COVID-19 PRR requires that “surfaces and objects that are frequently touched” be disinfected several times per day and that “transport vehicles are thoroughly cleaned after carrying a confirmed or suspected COVID-19 case.”


13. Richwood, in coordination with ICE/ERO and Catahoula, should develop and implement COVID-19 training for supervisory and line transportation staff and require them to demonstrate competency prior to performing their duties. CDC Interim Guidance on Management of Coronavirus Disease 2019 (COVID-19) in Correctional and Detention Facilities, ICE/ERO COVID-19 PRR, ERO COVID-19 Transfer, Removal, and Release Checklist and PBNDS 2011/16, 7.3 Staff Training.

Intake and orientation of detainees related to COVID-19:


15. Richwood should ensure LEP detainees have access to the new COVID-19 Education Program. CDC Interim Guidance on Management of Coronavirus Disease 2019 (COVID-19) in Correctional and Detention Facilities, ICE/ERO PRR, and PBNDS 2011/16, 2.1

13 ICE/ERO COVID-19 PRR at 15.
16 Id.
Admission and Release and DHS Language Access Plan (LAP), issued on February 28, 2012; and ICE LAP, issued on June 14, 2015.


17. Classification of detainees on quarantine and/or medical isolation:

18. Richwood should revise its classification policies and procedures to ensure detainees in medical isolation and quarantine receive classification reviews. PBNDS 2011/16, 2.2 Custody Classification System, II.D. Initial Classification, and H. Reclassification.

19. Richwood should ensure that newly arriving detainees are not added to existing cohort groups on quarantine, even when bed space is not available. CDC Interim Guidance on Management of Coronavirus Disease 2019 (COVID-19) in Correctional and Detention Facilities and ICE/ERO PRR.
20. Richwood, should “adopt the most effective cohorting methods practicable based on” Richwood’s individual “characteristics, taking into account the number of new admissions anticipated per day” and, in coordination with ICE/ERO, develop contingency plans to prevent adding newly arriving detainees to existing cohort groups on quarantine, including reporting to ICE/ERO housing limitations due to cohorting. ICE/ERO COVID-19 PRR.\(^\text{17}\)

Use of Segregation and Special Management Unit Cells for Quarantine and Medical Isolation:

21.  

Grievance System Access for Detainees in Quarantine and/or Medical Isolation:

22. Richwood should revise applicable policies, procedures, practices, the detainee handbook and detainee orientation to ensure grievance system access is addressed for detainees who are in medical isolation and quarantine. ICE/ERO COVID-19 PRR and PBNDS 2011/16, 6.2 Grievance.

\(^{17}\) Id. at 20 (“To do this, facilities should consider cohorting daily admissions; two days of new admissions, or multiple days of new admissions, in designated areas prior to placement into the general population. Given significant variations among facilities, cohorting options and capabilities will differ across ICE’s detention network. ICE encourages all facilities to adopt the most effective cohorting methods practicable based on the individual facility characteristics, taking into account the number of new admissions anticipated per day.”)
23. Richwood should revise its Grievance Log to ensure it provides a brief description of each detainee complaint and an explanation for each complaint disposition. ICE/ERO COVID-19 PRR and PBNDS 2011/16, 6.2 Grievance.

Access to the Law Library and Legal Materials for Detainees in Quarantine and/or Medical Isolation: (b)(5)

24. Richwood should ensure legal access for detainees in medical isolation and quarantine is included in applicable policies, procedures, and the detainee handbook. Richwood should ensure that these detainees are provided adequate legal access. ICE/ERO COVID-19 PRR and PBNDS 2011/16, 6.3 Law Libraries and Legal Materials.

Language Access to COVID-19 Information: (b)(5)


Department of Corrections Inmates on Occasion enter Detainee Housing Units for Maintenance and Cleaning: (b)(5)

26. Richwood should not allow DOC inmates to enter detainee housing units for any reason during the COVID-19 pandemic. CDC Interim Guidance on Management of Coronavirus Disease 2019 (COVID-19) in Correctional and Detention Facilities and ICE/ERO COVID-19 PRR.

27. Richwood should establish procedures and practices to prohibit any co-mingling of housing units or detainees/inmates from different housing units during the COVID-19 pandemic. CDC Interim Guidance on Management of Coronavirus Disease 2019 (COVID-19) in Correctional and Detention Facilities and ICE/ERO COVID-19 PRR.
28. Richwood should ensure that detainees and staff are adequately trained and educated on CDC guidelines for wearing PPE and cleaning and sanitizing areas after each use. CDC Interim Guidance on Management of Coronavirus Disease 2019 (COVID-19) in Correctional and Detention Facilities and ICE/ERO COVID-19 PRR.

Environmental Health and Safety

29. Richwood should develop and implement a policy, standard operating procedure, and/or guidance on the facility’s process for issuing facial masks to detainees and replacing facial masks, as needed, that details the number and type of facial mask they should have in their possession, when a facial mask needs replacement, and how to obtain a

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15 CRCL conducted a remote investigation of Richwood using WebEx. Interviews were conducted visually, on camera and there was also a physical walkthrough of the facility that was captured on a staff member’s iPhone. Due to the visual contact, CRCL was able to observe the layout of the facility and whether the individuals we were communicating with were wearing a mask.

16 ICE/ERO COVID-19 PRR at 19.
30. Richwood should manage its inventory of cloth facial masks for distribution to detainees as part of their PPE inventory to ensure sufficient coverage, as applicable. PBNDS 2011/16, Environmental Health and Safety, ICE/ERO COVID-19 PRR.

31. Richwood should provide clear instructions to detainees about how to properly handle, store and care for facial masks, when and how to have cloth facial masks laundered, when and how to dispose of disposable facial masks, and how to properly put on and take off facial masks. PBNDS 2011/16; Environmental Health and Safety and CDC Guidance; Use of Masks.

32. Detainees should be assigned more than one cloth facial mask so that they have an opportunity to have one laundered without being left with no facial mask available. PBNDS 2011/16; Environmental Health and Safety and CDC Guidance; Use of Masks.

33. Richwood should establish clear requirements in accordance with the CDC guidelines about when staff and detainees must wear masks. These requirements should be disseminated to all staff and detainees, and adherence to the requirements should be checked regularly by management or an assigned staff member in charge of compliance. CDC Interim Guidance on Management of Coronavirus Disease 2019 (COVID-19) in Correctional Detention Facilities Guidance for Correctional & Detention Facilities, Updated July 22, 2020, ICE/ERO COVID-19 PRR.

34. Richwood should provide clear instructions in accordance with CDC guidelines about how to properly wear a facial mask, including putting on and taking off facial masks, wearing the mask over the nose and mouth, refraining from touching the mask and face while the mask in being worn, and proper disposal. CDC Interim Guidance on Management of Coronavirus Disease 2019 (COVID-19) in Correctional Detention Facilities Guidance for Correctional & Detention Facilities, Updated July 22, 2020, and CDC Using Personal Protective Equipment, Updated August 19, 2020, ICE/ERO COVID-19 PRR.

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Training - Housekeeping and Chemical Usage:

[b](5)

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Protected by the Deliberative Process Privilege — 14
35. Richwood should provide effective information and training on the use of hazardous chemicals in accordance with Occupational Health and Safety Administration (OSHA) Standard 1910.1200. This training should be available to all that utilize and/or come in contact with chemicals. PBNDS 2011/16; Environmental Health and Safety and OSHA Standard 1910.1200, Hazard Communication.24


37. All housekeeping staff, including those performing housekeeping functions and those supervising housekeeping functions, should receive training on cleaning and disinfecting protocols, the difference between cleaning and disinfecting, how to clean, how to disinfect, why each is important, how often to clean/disinfect, what chemical(s) should be used, how to properly use chemicals for each function, how long the chemical should be in contact with a surface, what PPE is required, how to read and understand chemical labels and follow instructions, location of Safety Data Sheets (SDS) within the facility, and how to obtain and use information contained on the SDS. PBNDS 2011/16; Environmental Health and Safety, CDC Guidance: Cleaning and Disinfection for Community Facilities,28 EPA Guidance: Guidance for Cleaning and Disinfecting,29 and EPA List N: Disinfectants for Coronavirus (COVID-19).30

38. Richwood should ensure that the facility is properly cleaned and disinfected at all times. Adherence to cleaning and disinfecting guidelines is of the utmost importance during the COVID-19 pandemic. PBNDS 2011/16; Environmental Health and Safety, CDC Guidance: Cleaning and Disinfection for Community Facilities,31 EPA Guidance: Guidance for Cleaning and Disinfecting,32 and EPA List N: Disinfectants for Coronavirus (COVID-19).33

27 https://www.epa.gov/pesticide-registration/list-n-disinfectants-coronavirus-covid-19
30 https://www.epa.gov/pesticide-registration/list-n-disinfectants-coronavirus-covid-19
33 https://www.epa.gov/pesticide-registration/list-n-disinfectants-coronavirus-covid-19
39. Richwood should implement disinfecting practices for shared spaces. An EPA-registered chemical for usage against COVID-19 (EPA List N) should be used properly between each use of a shared area, such as desks, computers, etc. PBNDS 2011/16; Environmental Health and Safety and EPA List N: Disinfectants for Coronavirus (COVID-19), ICE/ERO COVID-19 PRR.

40. Richwood should develop and implement appropriate protocols for properly holding detainees during the intake process without exposing them to areas inside of the facility, such as the kitchen or dining area. Areas inside of the facility must be protected from contamination and/or possible exposure to COVID-19 by detainees awaiting intake processing. PBNDS 2011; Environmental Health and Safety.

41. Richwood should provide handwashing facilities for detainees to wash their hands in the sallyport area, if possible, so that handwashing can occur before the detainee enters the facility. Alternatively, if handwashing in the sallyport area is not feasible, then there should be handwashing facilities available to detainees immediately upon entry. If handwashing with soap and water is not feasible in these areas, then Richwood should provide hand sanitizer for detainee use in the sallyport area. PBNDS 2011/16; Environmental Health and Safety.
43. Richwood should complete documentation outlining all issues, incidents, and happenings of any major event, including hurricanes, and all actions that were taken. A comprehensive report detailing the event(s) (what happened), an analysis of the event(s), recommendations for improvement, action plan, and a summary of the report should be completed. PBNDS 2011/16; Emergency Plans.

Medical Care

44. All sick call requests should be dated, and time stamped, when they are received from the detainee. PBNDS 2011/16, 4.3 Medical Care, V.S.

45. All sick call requests should be triaged by a registered nurse or trained medical personnel to determine the level of acuity (emergent, urgent, routine). PBNDS 2011/16; 4.3 Medical Care, V.S.

46. All sick call requests should be addressed in the order of priority. PBNDS 2011/16; 4.3 Medical Care, V.S.

An After-Action Report is a tool that can be used to summarize, analyze and evaluate events, and provide feedback for improvements. In the case of Hurricane Laura, a properly completed After-Action Report would contain all the pertinent information from the event, including issues such as power outages, movement of detainees, etc., and detail opportunities for improvement for the future, effectively dispelling confusion and misinformation about what actually occurred at the facility.
47. The medical leadership should establish a process to measure the timeliness of service and the quality of assessments. PBNDS 2011/16; 4.3 Medical Care, V.S.

48. The medical charts of all COVID-19 positive detainees should have detailed management plans that include all relevant information, including information regarding the housing recommendations, quarantine plan, date of diagnosis, date of discharge from quarantine, and PPE needed when interacting with the detainee. PBNDS 2011/16; 4.3 Medical Care.

49. Richwood medical staff should check the temperature of detainees in quarantine per the provider’s order. If the detainee refuses the temperature check, the information should be documented in the medical record and the appropriate medical staff should be notified.

50. Richwood should review all of the COVID-19 positive cases to identify trends, outbreaks, and related health care services. ICE/ERO COVID-19 PRR; PBNDS 2011/16, 4.3 Medical Care, EE.

51. Richwood should implement a plan to identify, track, monitor, and care for detainees with increased risk for severe illness from COVID-19. ICE/ERO COVID-19 PRR; CDC.

35 ICE/ERO COVID-19 PRR at 20.
52. Richwood should develop and implement a standard questionnaire to screen detainees for COVID-19 symptoms and exposure upon arrival to the facility and ensure that all medical staff are trained on its use and implementation. ICE/ERO COVID-19 PRR.

53. Richwood should screen detainees in quarantine for symptoms of COVID-19 daily.

**Medical Staff Education and Information Related to COVID-19:**

54. Richwood’s medical leadership should periodically update medical staff regarding any changes to the facility’s management of COVID-19, ICE/ERO COVID-19 PRR and CDC guidance related to COVID-19 and conduct monthly meetings to assess the facility’s preparedness, prevention, management and testing of COVID-19 from a medical perspective. PBNDS 2011/16, 4.3 Medical Care, V; ICE/ERO COVID-19 PRR, CDC.
55. Medical staff should ensure that health related confidential information is not shared with individuals who are not directly involved in the care of the detainee. Only pertinent information should be shared with specifically authorized individuals and only when necessary. PBNDS 2011/16, 4.3 Medical Care, II Expected Outcomes, item 23; V. BB.

It is CRCL’s statutory role to advise department leadership and personnel about civil rights and civil liberties issues, ensuring respect for civil rights and civil liberties in policy decisions and implementation of those decisions. We look forward to working with ICE to determine the best way to resolve these complaints. We request that ICE provide a response to CRCL within 60 days, whether it concurs or non-concurs with these recommendations. If ICE concurs, please include an action plan. The response can be sent by email. If there are any questions, please contact Senior Policy Advisor, by telephone at or by email at

Copy to:

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38 CRCL Expert Recommendation Memorandum to Enrique M. Lucero, Executive Associate Director Enforcement and Removal Operations, Immigration and Customs Enforcement from Peter E. Mina, Deputy Officer Office for Civil Rights and Civil Liberties (Sept. 24, 2020) Recommendation 38.
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Deputy Assistant Director, Custody Programs  
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(b)(6); (b)(7)(C)

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