

Office of Detention Oversight Compliance Inspection

Enforcement and Removal Operations ERO Los Angeles Field Office James A. Musick Facility Irvine, CA

July 19–21, 2016

COMPLIANCE INSPECTION for the JAMES A. MUSICK FACILITY Irvine, California

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INSPECTION TEAM MEMBERS



Lead Inspections and Compliance Specialist	ODO
Inspections and Compliance Specialist	ODO
Inspections and Compliance Specialist	ODO
Inspections and Compliance Specialist	ODO
Contractor	Creative Corrections
Contractor	Creative Corrections
Contractor	Creative Corrections

EXECUTIVE SUMMARY

The Office of Detention Oversight (ODO) conducted a compliance inspection of the James A. Musick Facility (JAMF) in Irvine, California, from July 19 to 21, 2016. JAMF opened in 1963 and is owned by Orange County and operated by the Orange County Sheriff's Department (OCSD). The Office of Enforcement and Removal Operations (ERO) began housing detainees at JAMF in 2010 pursuant to an Intergovernmental Service Agreement (IGSA), under the oversight of ERO's Field Office Director (FOD) in Los Angeles, CA.

ERO staff members are assigned to the facility. A Detention Services Manager is not assigned to the facility. A Captain is responsible for oversight of daily facility operations and is supported by personnel. Orange County Health Care Agency

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity ²	566
Average ICE Detainee Population ³	289
Male Detainee Population (as of 07/19/2016)	248
Female Detainee Population (as of 07/19/2016)	32

provides medical service and OCSD provides food service. The facility holds no accreditations.

OVERALL FINDINGS

In January 2013, ODO conducted an inspection of the JAMF under the Performance-Based National Detention Standards (PBNDS) 2008. ODO reviewed the facility's compliance with 16 standards and found the facility compliant with nine standards. ODO found 14 deficiencies in the remaining seven standards.

Inspection Results Compared	FY 2013 (PBNDS 2008)	FY2016 (PBNDS 2008)
Standards Reviewed	16	16
Deficient Standards	7	8
Overall Number of		
Deficiencies	14	8
Deficient Priority		
Components	1	1
Corrective Actions Initiated	1	3

In FY2016, ODO conducted an inspection of the JAMF under the PBNDS 2008. ODO reviewed the facility's compliance with 16 standards and found the facility compliant with eight standards. ODO found eight deficiencies in the remaining eight standards, one of which was a priority component, and one which was a repeat deficiency from the 2013 and 2011 inspections. Finally, ODO identified three instances in which the facility initiated corrective action during the course of the inspection.⁴

¹ Male and female detainees with low, medium low, medium high, and high security classification levels are detained at the facility for longer than 72 hours.

² Data Source: ERO Facility List Report as of June 20, 2016.

⁴ Corrective actions, where immediately implemented, best practices and ODO recommendations, as applicable, have been identified in the Inspection Findings section and annotated with a "C," "BP," or "R," respectively.

FINDINGS BY PBNDS 2008 MAJOR CATEGORIES

PBNDS 2008 STANDARDS INSPECTED ⁵	DEFICIENCIES		
Part 1 – Safety			
Environmental Health and Safety	0		
Part 2 – Security			
Classification System	1		
Funds and Personal Property	1		
Sexual Abuse and Assault Prevention and Intervention	0		
Staff-Detainee Communication	1		
Use of Force and Restraints	1		
Sub-Total	4		
Part 4 – Care			
Food Service	0		
Medical Care	0		
Suicide Prevention and Intervention	0		
Sub-Total	0		
Part 5 – Activities			
Recreation	0		
Religious Practices	0		
Telephone Access	1		
Visitation	1		
Sub-Total	2		
Part 6 – Justice			
Detainee Handbook	0		
Grievance System	1		
Law Libraries and Legal Material	1		
Sub-Total	2		
Total Deficiencies	8		

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

COMPLIANCE INSPECTION PROCESS

Every fiscal year, ODO, a unit within U.S. Immigration and Customs Enforcement's (ICE) Office of Professional Responsibility (OPR), conducts compliance inspections at detention facilities in which detainees are accommodated for periods in excess of 72 hours and with an average daily population greater than ten to determine compliance with the ICE National Detention Standards (NDS) 2000, or the Performance-Based National Detention Standards (PBNDS) 2008 or 2011, as applicable.

During the compliance inspection, ODO reviews each facility's compliance with those detention standards that directly affect detainee health, safety, and/or well-being. Any violation of written policy specifically linked to ICE detention standards, ICE policies, or operational procedures that ODO identifies is noted as a deficiency. ODO also highlights any deficiencies found involving those standards that ICE has designated under either the PBNDS 2008 or 2011, to be "priority components." Priority components have been selected from across a range of detention standards based on their critical importance to facility security and/or the health and safety, legal rights, and quality of life of detainees in ICE custody.

Immediately following an inspection, ODO hosts a closeout briefing in person with both facility and ERO field office management to discuss their preliminary findings, which are summarized and provided to ERO in a preliminary findings report. Thereafter, ODO provides ERO with a final compliance inspection report to: (i) assist ERO in working with the facility to develop a corrective action plan to resolve identified deficiencies; and (ii) provide senior ICE and ERO leadership with an independent assessment of the overall state of ICE detention facilities. The reports enable senior agency leadership to make decisions on the most appropriate actions for individual detention facilities nationwide.

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⁶ ODO reviews the facility's compliance with selected standards in their entirety.

⁷ Priority components have not been identified for the NDS.

DETAINEE RELATIONS

ODO interviewed 32 detainees, each of whom volunteered to participate. None of the detainees made allegations of mistreatment, abuse, or discrimination. The majority of detainees reported being satisfied with facility services, with the exception of the complaints below:

Detainee Handbook: Six detainees complained they did not receive the ICE National Detainee Handbook and/or the facility handbook.

• <u>Action Taken:</u> ODO reviewed the detainees' detention files and found they all signed for the ICE National Detainee Handbook and facility handbook during admission to the facility. Additionally, ODO observed that copies of both handbooks are located in each housing unit for detainees to review, as needed.

Medical Care: One detainee complained he put in a medical request to be treated for nail fungus on July 8, 2016 and that he was not given medication.

• Action Taken: ODO reviewed the detainee's medical file which documented the detainee was seen, as requested, on July 8, 2016 by medical staff at the facility during sick call. Medical staff examined the detainee's medical concern that same day and determined that the requested treatment would require extensive medical treatment. Though the treatment for this type of fungus is given by way of oral medication, it is very toxic to the liver and would not be appropriate for his minor condition. The potential risks of the medication would outweigh any benefit.

Medical Care: One detainee complained he put in a medical request on July 15, 2016 to be seen by an ophthalmologist concerning a 2013 injury which resulted in lost eyesight in his left eye, but no medical appointment had been scheduled.

• Action Taken: ODO reviewed the detainee's medical file, which documented the detainee was seen by medical staff on July 15, 2016. Medical staff observed stitches remaining in the left eye socket, which needed to be removed. The medical staff scheduled him for a July 27, 2016 appointment with an ophthalmologist; however, in the interest of security, he was not told about the appointment.

INSPECTION FINDINGS

SECURITY

CLASSIFICATION SYSTEM (CS)

Detainees are classified by ERO at the Intake Release Center (IRC) using the ICE Risk Classification Assessment system and then transported to the JAMF. The Risk Classification Assessment is a manual system, which determines classification levels of low, medium-low, medium-high, or high custody based on objective, detainee-specific data, including criminal history. ODO reviewed 30 detainee detention files and found that in 17 cases detainees were not reassessed 60 to 90 days after the date of their initial assessment (**Deficiency CS-1**8).

FUNDS AND PERSONAL PROPERTY (F&PP)

ODO reviewed the facility handbook and found it outlines what property a detainee can and cannot have in their possession, how their property is stored, how it can be claimed, and the procedures and instructions for whom to contact in the event of lost or damaged property. However, the facility handbook does not notify detainees that, upon request, they shall be provided an ICE-certified copy of any identity document placed in their A-files (**Deficiency F&PP-1**⁹).

STAFF-DETAINEE COMMUNICATION (SDC)

ODO reviewed ICE detainee requests submitted between July 2015 and July 2016 and found all requests submitted during that timeframe received a response within 72 hours of receipt. ODO reviewed the detainee request log and found the log recorded the date of receipt, detainee's name, detainee's A-number, detainee's nationality, and date the request was returned to the detainee. However, the log did not provide a location to record the name of the staff member who logged the request (**Deficiency SDC-1**¹⁰).

Corrective Action: The facility initiated corrective action by modifying the detainee request log to record the name of the staff member who logs the detainee request (C-1).

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⁸ "First Reassessment. A Classification Reassessment shall be completed 60 to 90 days after the date of the initial assessment." *See* ICE PBNDS 2008, Standard, Classification System, Section (V)(B).

⁹ "The detainee handbook or equivalent shall notify the detainees of facility policies and procedures concerning personal property, including: That, upon request, they shall be provided an ICE/DRO-certified copy of any identity document (passport, birth certificate, etc.) placed in their A-files...." See ICE PBNDS 2008, Standard, Funds and Personal Property, Section (V)(C).

¹⁰ "At a minimum, the log shall record: Name of the staff member who logged the request...." See ICE PBNDS 2008, Standard, Staff-Detainee Communication, Section (V)(B)(2).

USE OF FORCE AND RESTRAINTS (UOF&R)

ODO reviewed 30 staff training files and found that staff was current in training on the use of force. ODO reviewed the facility's use of force training program and found it included the required elements outlined in the standard. During the review of the training materials, ODO noted staff is trained in the use of carotid control holds. The Compliance Deputy confirmed the training is conducted and carotid control holds are authorized for use on detainees (**Deficiency UoF&R**¹¹).

ACTIVITIES

TELEPHONE ACCESS (TA)

ODO conducted operational checks of the telephones in each of the three detainee housing units by calling randomly selected preprogrammed numbers. ODO found all phones were in good working order and learned that the facility's phone system has an automated message notifying detainee callers that all calls are subject to monitoring. ODO also observed notices are posted at each phone informing detainee callers that all calls are subject to monitoring. However, notice of the procedures for obtaining an unmonitored call to a court, legal representative, or for the purposes of obtaining legal representation is not posted at each telephone subject to monitoring (**Deficiency TA-1**¹²).

Corrective Action: The facility initiated corrective action by placing the procedures for obtaining an unmonitored call to a court, legal representative, or for the purposes of obtaining legal representation at each telephone subject to monitoring (C-2).

VISITATION (V)

ODO reviewed the facility policy on visitation and confirmed it addresses regular visits, legal/special visits, visitation rules, dress requirements, items permitted and not permitted for visitors, searches of visitors and vehicles, and termination of visits. In addition, the visitation rules and hours are provided to detainees by way of the facility handbook, the facility's orientation video and they are also posted in the detainee housing units. ODO reviewed the visitation schedule and found general visitation hours are available Friday, Saturday, Sunday, and Monday from 8 a.m. through 5:30 p.m. However, based on an interview with facility staff, ODO was informed the facility does not conduct visitation on holidays that do not fall on a scheduled day of visitation (**Deficiency V-1**¹³).

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¹¹ "The following acts and techniques are specifically prohibited: Choke holds, carotid control holds, and other neck restraints..." See ICE PBNDS 2008, Standard, Use of Force and Restraints, Section (V)(E)(1).

¹² "If telephone calls are monitored, the facility shall: At each monitored telephone, place a notice that states: The procedure for obtaining an unmonitored call to a court, a legal representative, or for the purposes of obtaining legal representation." *See* ICE PBNDS 2008, Standard, Telephone Access, Section (V)(B).

¹³ "Visits shall be permitted during set hours on Saturdays, Sundays, and holidays, and, to the extent practicable, the facility shall accommodate the scheduling needs of visitors for whom weekends and holidays pose a hardship." *See* ICE PBNDS 2008, Standard, Visitation, Section (V)(I)(1). **This is a priority Component.**

JUSTICE

GRIEVANCE SYSTEM

ODO reviewed the grievances submitted by detainees from July 2015 to July 2016 and learned two grievances were submitted during this timeframe. ODO found that both grievances received a response within five working days of receipt and that copies of the grievance dispositions were provided to the two submitting detainees; however, copies were not placed in the detainee's detention files (**Deficiency GS-1**¹⁴). ODO found that the detainee's detention files are located off-site and that the facility maintains a copy of all grievance dispositions on-site using a filing system that separates grievance dispositions by the name of the detainee and month of disposition.

LAW LIBRARIES AND LEGAL MATERIAL (LL&LM)

ODO reviewed the facility handbook and found it provides detainees with the policy and procedures that govern access to the law library. However, ODO found the policy and procedures were not posted in the law library along with a list of the law library's holdings (**Deficiency LL&LM -1**¹⁵).

Corrective Action: The facility initiated corrective action by posting the policy and procedures along with the law library's holdings in the law library (C-3).

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 $^{^{14}}$ "A copy of the grievance disposition shall be placed in the detainee's detention file...." See ICE PBNDS 2008, Standard, Grievance System, Section (V)(E). **This is a repeat deficiency.**

These policies and procedures shall also be posted in the law library along with a list of the law library's holdings." See ICE PBNDS 2008, Standard, Law Libraries and Legal Material, Section (V)(O).