



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

**Office of Detention Oversight
Compliance Inspection**

**Enforcement and Removal Operations
ERO Los Angeles Field Office**

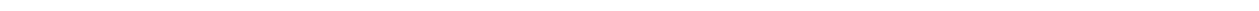
**Adelanto ICE Processing Center
Adelanto, California**

February 8-12, 2021

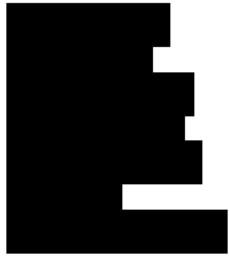
COMPLIANCE INSPECTION
of the
ADELANTO ICE PROCESSING CENTER
Adelanto, California

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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 Adelanto ICE Processing Center (AIPC) in Adelanto, California, from February 8 to 12, 2021.¹ The facility opened in 2011 and is owned and operated by The GEO Group Inc. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at AIPC in 2011 under the oversight of ERO’s Field Office Director (FOD) in Los Angeles (ERO Los Angeles). The facility operates under the Performance-Based National Detention Standards (PBNDS) 2011 (Revised 2016).

ERO has assigned deportation officers and a detention services manager to the facility. An AIPC warden handles daily facility operations and is supported by [REDACTED] personnel. The GEO Inc. provides food services, Wellpath provides medical care, and Keefe provides commissary services at the facility. The facility was accredited by the American Correctional Association in January 2020 and the National Commission on Correctional Health Care in August 2019. In March 2017, AIPC 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 Detainee Bed Capacity ²	1940
Average ICE Detainee Population ³	[REDACTED]
Male Detainee Population (as of 2/8/2021)	[REDACTED]
Female Detainee Population (as of 2/8/2021)	[REDACTED]

During its last inspection, in Fiscal Year (FY) 2020, ODO found five deficiencies in the following areas: Admission and Release (2); Custody Classification System (1); Use of Force and Restraints (1); and Visitation (1).

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

² Data Source: ERO Facility List Report as of February 8, 2021.

³ *Ibid.*

COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population greater than ten, and where detainees are housed for longer than 72 hours, to assess compliance with ICE national detention standards. These inspections focus solely on facility compliance with detention standards that directly affect detainee life, health, safety, and/or well-being.⁴

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

ODO was unable to conduct an on-site inspection of this facility, as a result of the COVID-19 pandemic, and instead, conducted a remote inspection of the facility. During this remote inspection, ODO interviewed facility staff, ERO field office staff, and detainees, reviewed files and detention records, and was able to assess compliance for at least 90 percent or more of the ICE national detention standards reviewed during the inspection.

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**

PBNDS 2011 (Revised 2016) Standards Inspected⁵	Deficiencies
Part 1 – Safety	
Emergency Plans	0
Environmental Health and Safety	0
Sub-Total	0
Part 2 – Security	
Admission and Release	2
Custody Classification System	0
Facility Security and Control	7
Funds and Personal Property	0
Population Counts	0
Sexual Abuse and Assault Prevention and Intervention	0
Special Management Units	0
Staff-Detainee Communication	0
Use of Force and Restraints	0
Sub-Total	9
Part 4 – Care	
Food Service	0
Hunger Strikes	0
Medical Care	0
Medical Care (Women)	0
Significant Self-harm and Suicide Prevention and Intervention	0
Disability Identification, Assessment, and Accommodation	0
Sub-Total	0
Part 5 – Activities	
Religious Practices	0
Telephone Access	0
Sub-Total	0
Part 6 – Justice	
Grievance System	0
Law Libraries and Legal Material	0
Sub-Total	0
Total Deficiencies	9

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

DETAINEE RELATIONS

ODO interviewed 12 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. Most detainees reported satisfaction with facility services except for the concerns listed below. ODO attempted to conduct detainee interviews via video teleconference; however, the ERO field office and facility were not able to accommodate this request due to technology issues. As such, the detainee interviews were conducted via telephone.

Medical Care: One detainee stated the facility's medical staff have provided below standard medical care since they first evaluated him for a stomach infection in November 2020. Additionally, he stated a facility nutritionist told him he was lying, which resulted in an argument, and he needed to go to an outside hospital to get the right medication for his infection.

- Action Taken: ODO reviewed the detainee's complaint with the facility's health services administrator. ODO found the facility's medical staff first evaluated the detainee for "stomach issues" on November 19, 2020. The medical staff ordered labs, followed-up with the detainee on December 8, 2020, and diagnosed the detainee with a bacterial (*H. Pylori*) infection. During that appointment, a nurse practitioner prescribed Amoxicillin, Clarithromycin, and Omeprazole to the detainee. On December 10, 2020, the detainee submitted a sick call request, which stated his medication had caused him to become constipated. The facility scheduled him for an appointment for the next day, December 11, 2020; however, when the facility called him for his appointment, he refused the appointment. The detainee wrote on the refusal form that his problem had resolved on its own and he signed the refusal form. The detainee went to sick call on December 17, 2020, where he informed the facility's medical staff he had been vomiting, was unable to keep his medications down, he was still constipated, and he requested to see one specific physician from the facility's medical staff. On December 24, 2020, the physician he requested to see evaluated his condition and prescribed Docusate and Ensure. The facility sent him to a local hospital on December 28, 2020, after he reported severe lower left quadrant abdominal pain with associated nausea and vomiting. The local hospital's staff prescribed him Toradol for the abdominal pain, conducted lab work, took an x-ray, and obtained a computerized tomography scan of his body. The detainee's test results indicated he had constipation, and the local hospital's staff prescribed him Zofran and Colace. The local hospital's staff noted there was no infection and therefore, did not prescribe medication for an infection. On February 11, 2021, the facility's medical staff explained the detainee's medical history to him, and he acknowledged that he understood what the facility's medical staff explained to him.

COMPLIANCE INSPECTION FINDINGS

SECURITY

ADMISSION AND RELEASE (A&R)

ODO reviewed orientation documentation, interviewed the intake supervisor, and found ERO Los Angeles had not approved the facility's orientation procedures, which was a repeat deficiency (**Deficiency A&R-61⁶**).

Corrective Action: Prior to completion of the inspection, the assistant field office director (AFOD) reviewed and issued a memorandum dated February 10, 2021, which approved the facility's orientation procedures (**C-1**).

ODO reviewed release documentation, interviewed the intake supervisor, and found ERO Los Angeles had not approved the facility's release procedures, which was a repeat deficiency (**Deficiency A&R-79⁷**).

Corrective Action: Prior to completion of the inspection, the AFOD reviewed and issued a memorandum dated February 10, 2021, which approved the facility's release procedures (**C-2**).

FACILITY SECURITY AND CONTROL (FS&C)

ODO reviewed the facility's [REDACTED] and found it did not prominently feature a notice to safeguard the information nor to restrict access to those who needed access in the performance of their official duties (**Deficiency FS&C-14⁸**).

ODO interviewed the chief of security (COS) and found the facility's front entrance officer did not maintain a separate file of Contract Employee Forms (Form G-74), or equivalent (**Deficiency FS&C-31⁹**).

⁶ "Orientation procedures in CDFs must be approved in advance by the local ICE/ERO Field Office." See ICE PBNDS 2011 (Revised 2016), Standard, Admission & Release, Section (V)(F). **This is a Repeat Deficiency.**

⁷ "ICE/ERO shall approve all facility release procedures." See ICE PBNDS 2011 (Revised 2016), Standard, Admission and Release, Section (V)(H). **This is a Repeat Deficiency.**

⁸ "The facility administrator shall establish procedures to implement the following control center requirements:

5. [REDACTED]

e. prominently feature the following notice:

"This information must be safeguarded. Use is restricted to those who need the information in the performance of their official duties. Misuse shall subject the user to criminal liability. This agency shall view any misuse of this information as a serious violation of the Employee Code of Conduct, which may result in disciplinary action, including removal."

See ICE PBNDS 2011 (Revised 2016), Standard, Facility Security and Control, Section (V)(B)(5)(e).

⁹ "The facility administrator shall establish procedures for tracking the arrivals and departures of contract employees.

ODO interviewed the facility's COS and found ERO Los Angeles employees with frequent business at the facility, but stationed elsewhere, do not have a completed Form G-74, nor equivalent form, filed with the facility's front-entrance personal data card file (**Deficiency FS&C-40¹⁰**).

ODO reviewed the facility's FS&C policies and procedures and interviewed the facility's COS. ODO found the main-gate officer did not hold onto the driver's license for drivers who enter the facility's secure perimeter (**Deficiency FS&C-58¹¹**).

ODO reviewed the facility's vehicle entrance log and found the facility did not log the driver's name, purpose of the visit, nor vehicle contents of every vehicle entering the facility (**Deficiency FS&C-59¹²**).

ODO reviewed the facility's FS&C policies and procedures and interviewed the facility's COS. ODO found the facility did not have delivery drivers submit to a personal search nor were they questioned about contraband (**Deficiency FS&C-61¹³**).

ODO reviewed the facility's FS&C policies and procedures and interviewed the facility's COS. ODO found in instances where the facility determined a thorough search of a vehicle was impossible to conduct, the facility did not [REDACTED] (**Deficiency FS&C-68¹⁴**).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 21 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 19 of those standards. ODO found nine deficiencies in the remaining two standards. ODO commends facility staff for their responsiveness during this inspection and notes there were two instances where the facility's staff initiated immediate corrective action during the inspection. ODO recommends ERO work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual

However, the main gate/front entrance officer shall maintain a separate file of contract employee Forms G-74, or equivalent, laminated, with photograph, issue date, expiration date (if applicable), and the facility administrator's signature." See ICE PBNDS 2011 (Revised 2016), Standard, Facility Security and Control, Section (V)(C)(1)(b)(5).

¹⁰ "To save time, all ICE/ERO employees with frequent business at the facility but stationed elsewhere shall complete a G-74 form, or equivalent, for the front-entrance personal data card file." See ICE PBNDS 2011 (Revised 2016), Standard, Facility Security and Control, Section (V)(C)(1)(d).

¹¹ "While the driver is within the facility's secure perimeter, the officer shall hold the driver's license or identification of every person entering the facility, as specified under the "Visitor Passes" section in this standard." See ICE PBNDS 2011 (Revised 2016), Standard, Facility Security and Control, Section (V)(C)(2)(a).

¹² "The post officer shall log the following information regarding every vehicle: tag number, driver's name, firm represented, purpose of the visit, (e.g., repairs, delivery, etc.), vehicle contents, date, time in, time out and facility employee responsible for the vehicle on-site." See ICE PBNDS 2011 (Revised 2016), Standard, Facility Security and Control, Section (V)(C)(2)(b).

¹³ "All drivers making deliveries must submit to a personal search and questioning about firearms, munitions, knives, ropes, jacks, narcotics and other items considered contraband." See ICE PBNDS 2011 (Revised 2016), Standard, Facility Security and Control, Section (V)(C)(2)(c)(1).

¹⁴ [REDACTED] See ICE PBNDS 2011 (Revised 2016), Standard, Facility Security and Control, Section (V)(C)(2)(c)(4).

obligations.

Compliance Inspection Results Compared	FY 2020 (PBNS 2011) (Revised 2016)	FY 2021 (PBNS 2011) (Revised 2016)
Standards Reviewed	19	21
Deficient Standards	4	2
Overall Number of Deficiencies	5	9
Repeat Deficiencies	3	2
Areas of Concern	0	0
Corrective Actions	0	2