



**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**  
**Follow-Up Compliance Inspection**

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

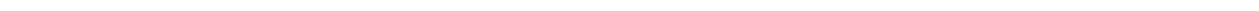
**Yuba County Jail**  
**Marysville, California**

**August 30 - September 2, 2021**

**FOLLOW-UP COMPLIANCE INSPECTION**  
**of the**  
**YUBA COUNTY JAIL**  
Marysville, California

**TABLE OF CONTENTS**

<b>FACILITY OVERVIEW .....</b>	<b>4</b>
<b>FOLLOW-UP COMPLIANCE INSPECTION PROCESS.....</b>	<b>5</b>
<b>FINDINGS BY NATIONAL DETENTION STANDARDS 2019 MAJOR CATEGORIES.....</b>	<b>6</b>
<b>DETAINEE RELATIONS .....</b>	<b>7</b>
<b>FOLLOW-UP COMPLIANCE INSPECTION FINDINGS.....</b>	<b>7</b>
<b>SECURITY .....</b>	<b>7</b>
Funds And Personal Property .....	7
<b>CONCLUSION .....</b>	<b>8</b>



## FOLLOW-UP COMPLIANCE INSPECTION TEAM MEMBERS



Team Lead  
Assistant Team Lead  
Contractor  
Contractor  
Contractor  
Contractor  
Contractor

ODO  
ODO  
Creative Corrections  
Creative Corrections  
Creative Corrections  
Creative Corrections  
Creative Corrections

## FACILITY OVERVIEW

The U.S. Immigration and Customs Enforcement (ICE) Office of Professional Responsibility (OPR) Office of Detention Oversight (ODO) conducted a follow-up compliance inspection of the Yuba County Jail (YCJ) in Marysville, California, from August 30 to September 2, 2021.<sup>1</sup> This inspection focused on the standards found deficient during ODO’s last inspection of YCJ from April 5 to 9, 2021. The facility opened in 1962 and is owned and operated by Yuba County. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at YCJ in 1994 under the oversight of ERO’s Field Office Director in San Francisco (ERO San Francisco). The facility operates under the National Detention Standards (NDS) 2019.

ERO has a detention services manager and no deportation officers assigned to the facility. A YCJ captain handles daily facility operations and manages support personnel. YCJ provides food and commissary services, and Wellpath provides medical care at the facility. The facility does not hold any national accreditations from any outside entities.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity <sup>2</sup>	
Average ICE Detainee Population <sup>3</sup>	
Male Detainee Population (as of August 30, 2021)	
Female Detainee Population (as of August 30, 2021)	

During its last inspection, in April 2021, ODO found 31 deficiencies in the following areas: Admission and Release (4); Custody Classification System (1); Environmental Health and Safety (4); Facility Security and Control (1); Funds and Personal Property (4); Hunger Strikes (4); Medical Care (7); Significant Self-Harm and Suicide Prevention and Intervention (3); and Use of Force and Restraints (3).

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

<sup>2</sup> Data Source: ERO Facility List Report as of August 30, 2021.

<sup>3</sup> *Ibid.*

## **FOLLOW-UP COMPLIANCE INSPECTION PROCESS**

ODO conducts oversight inspections of ICE detention facilities with an average daily population of 10 or more detainees, 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. In FY 2021, to meet congressional requirements, ODO began conducting follow-up inspections at all ICE ERO detention facilities, which ODO inspected earlier in the FY.

While follow-up inspections are intended to focus on previously identified deficiencies, ODO will conduct a complete review of several core standards, which include but are not limited to Medical Care, Hunger Strikes, Suicide Prevention, Food Service, Environmental Health and Safety, Emergency Plans, Use of Force and Restraints/Use of Physical Control Measures and Restraints, Admission and Release, Classification, and Funds and Personal Property. ODO may decide to conduct a second full inspection of a facility in the same FY based on additional information obtained prior to ODO's arrival on-site. Factors ODO will consider when deciding to conduct a second full inspection will include the total number of deficiencies cited during the first inspection, the number of deficient standards found during the first inspection, the completion status of the first inspection's UCAP, and other information ODO obtains from internal and external sources ahead of the follow-up compliance inspection. Conditions found during the inspection may also lead ODO to assess new areas and identify new deficiencies or areas of concern should facility practices run contrary to ICE standards. Any areas found non-compliant during both inspections are annotated as "Repeat Deficiencies" in this report.

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.

## FINDINGS BY NATIONAL DETENTION STANDARDS 2019 MAJOR CATEGORIES

NDS 2019 Standards Inspected <sup>4&amp;5</sup>	Deficiencies
<b>Part 1 – Safety</b>	
Environmental Health and Safety	0
<b>Sub-Total</b>	<b>0</b>
<b>Part 2 – Security</b>	
Admission and Release	0
Custody Classification System	0
Facility Security and Control	0
Funds and Personal Property	1
Use of Force and Restraints	0
Special Management Units	0
<b>Sub-Total</b>	<b>1</b>
<b>Part 4 – Care</b>	
Food Service	0
Hunger Strikes	0
Medical Care	0
Significant Self-Harm and Suicide Prevention and Intervention	0
<b>Sub-Total</b>	<b>0</b>
<b>Total Deficiencies</b>	<b>1</b>

<sup>4</sup> For greater detail on ODO’s findings, see the *Follow-Up Compliance Inspection Findings* section of this report.

<sup>5</sup> Beginning in FY 2021, ODO added Emergency Plans, Facility Security and Control, Population Counts, Hunger Strikes, and Staff Training as core standards. NDS 2019 does not include Emergency Plans, Population Counts, nor Staff Training as individual standards; however, those specific requirements are resident in other core standards.

## DETAINEE RELATIONS

ODO interviewed three detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, nor abuse. Detainees reported satisfaction with facility services except for the concerns listed below. ODO attempted to conduct detainee interviews via video teleconference; however, ERO San Francisco and the 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 he did not feel well and had swelling in his right leg.

- Action Taken: ODO interviewed the health services administrator (HSA) and reviewed the detainee's medical record and found the detainee had not submitted sick call requests regarding an illness nor swelling in the lower leg. On September 1, 2021, ODO notified the facility's medical staff of the detainee's concern, and a registered nurse evaluated the detainee that day and scheduled him for a physician's appointment. On September 2, 2021, ODO confirmed with the HSA that the medical provider evaluated the detainee and addressed his medical concerns.

*Food Service:* One detainee stated he was on a medical diet but received the same food as the other detainees.

- Action Taken: ODO interviewed the food service manager (FSM), reviewed the detainee's medical record, and found the food service department had been following the detainee's diabetic diet plan since March 2019. The FSM confirmed the facility kitchen staff's awareness of the detainee's diabetic diet plan and assurance that he will continue to receive his diabetic meals.

## FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

### SECURITY

#### FUNDS AND PERSONAL PROPERTY (FPP)

ODO interviewed the intake supervisor, reviewed the inmate property manual, and found YCJ does not promptly reimburse detainees for all validated property losses caused by facility negligence. Specifically, YCJ procedures require the detainee to file a claim for reimbursement to the clerk of the board of the supervisor's office should the detainee choose to pursue reimbursement after making a claim (**Deficiency FPP-31<sup>6</sup>**). **This is a repeat deficiency.**

---

<sup>6</sup> "Each facility shall have a written policy and procedure for detainee property reported missing or damaged.

3. The facility will promptly reimburse detainees for all validated property losses caused by facility negligence." See ICE NDS 2019, Standard, Funds and Personal Property, Section (II)(F)(3)."

## CONCLUSION

During this inspection, ODO assessed the facility's compliance with 11 standards under NDS 2019 and found the facility in compliance with 10 of those standards. ODO found one deficiency in the remaining one standard. ODO commends facility staff members for their responsiveness during this inspection. ODO recommends ERO San Francisco work with the facility to resolve the one deficiency that remains outstanding in accordance with contractual obligations. ERO provided ODO with the uniform corrective action plan for ODO's last inspection of YCJ on April 5, 2021.

<b>Compliance Inspection Results Compared</b>	<b>First FY 2021 (NDS 2019)</b>	<b>Second FY 2021 (NDS 2019)</b>
Standards Reviewed	18	11
Deficient Standards	9	1
Overall Number of Deficiencies	31	1
Repeat Deficiencies	9	1
Areas of Concern	0	0
Corrective Actions	0	0