

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

Office of Detention Oversight Follow-Up Compliance Inspection

Enforcement and Removal Operations ERO New Orleans Field Office

Adams County Detention Center Natchez, Mississippi

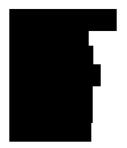
July 12-14, 2022

FOLLOW-UP COMPLIANCE INSPECTION of the ADAMS COUNTY DETENTION CENTER Natchez, Mississippi

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FOLLOW-UP COMPLIANCE INSPECTION TEAM MEMBERS



Acting Team Lead Inspections and Compliance Specialist Inspections and Compliance Specialist Contractor Contractor Contractor Contractor ODO ODO ODO 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 Adams County Detention Center (ACDC) in Natchez, Mississippi, from July 12 to 14, 2022.¹ This inspection focused on the standards found deficient during ODO's last inspection of ACDC from March 1 to 3, 2022. The facility opened in 2009 and is owned by Adams County and operated by CoreCivic. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at ACDC in 2019 under the oversight of ERO's Field Office Director (FOD) in New Orleans (ERO New Orleans). The facility operates under the Performance-Based National Detention Standards (PBNDS) 2011 (Revised 2016).

ERO has assigned deportation officers to the facility. A warden handles daily facility 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 American Correctional Association in August 2019 and the National Commission on Correctional Health Care in January 2020. In August 2019, ACDC 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	
Average ICE Population ³	
Adult Male Population (as of July 12, 2022)	
Adult Female Population (as of July 12, 2022)	

During its last inspection, in Fiscal Year (FY) 2022, ODO found 18 deficiencies in the following areas: Custody Classification System (3); Detainee Transfers (5); Detention Files (1); Environmental Health and Safety (3); Post Orders (5); and Sexual Abuse and Assault Prevention and Intervention (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 Facility List as of July 11, 2022.

³ 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 uniform corrective action plan (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.

FINDINGS BY PERFORMANCE-BASED NATIONAL DETENTION STANDARDS 2011 (REVISED 2016) MAJOR CATEGORIES

PBNDS 2011 (Revised 2016) Standards Inspected ^{4,5}	Deficiencies
Part 1 - Safety	
Emergency Plans	0
Environmental Health and Safety	0
Sub-Total	0
Part 2 - Security	
Admission and Release	0
Custody Classification System	0
Funds and Personal Property	0
Post Orders	0
Sexual Abuse and Assault Prevention and Intervention	0
Special Management Units	0
Staff-Detainee Communication	1
Use of Force and Restraints	0
Sub-Total	1
Part 4 - Care	•
Food Service	1
Hunger Strikes	0
Medical Care	0
Medical Care (Women)	0
Significant Self-harm and Suicide Prevention and Intervention	0
Sub-Total	1
Part 6 - Justice	
Grievance System	0
Sub-Total	0
Part 7 - Administration and Management	
Detention Files	0
Detainee Transfers	0
Sub-Total	0
Total Deficiencies	2

⁴ For greater detail on ODO's findings, see the *Follow-up Inspection Findings* section of this report.

⁵ Beginning in FY 2022, ODO instituted a process of rotating all standards on a 3-year basis. As a result, some standard components may not be present in all standards.

Office of Detention Oversight July 2022

DETAINEE RELATIONS

ODO interviewed 20 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.

Admission and Release: Eight detainees stated they did not receive an ICE National Detainee Handbook. Six detainees requested an ICE National Detainee Handbook in Spanish, one detainee requested a Turkish translation, and one detainee requested a Portuguese translation.

• <u>Action Taken</u>: ODO interviewed the facility intake officer on July 13, 2022, and confirmed the detainees signed the acknowledgment forms for receipt of the handbooks during the admission process. ODO requested the facility to issue new handbooks. On July 13, 2022, the facility provided the requested handbooks to the detainees and forwarded copies of all the new acknowledgment forms to ODO.

Law Libraries and Legal Materials: One detainee stated the facility staff informed him the law library had no reading material printed in Turkish.

• <u>Action Taken</u>: ODO interviewed the chief unit manager and found the facility allowed all detainees to submit a request to the law librarian for reading materials in their native language and to access translation services. On July 14, 2022, ODO asked the manager to instruct the detainee on how to request reading material in Turkish and to access translation services at the law library, and the manger reviewed the procedures with the detainee on the same day.

Medical Care: One detainee stated he has not received a response from medical services for electronic requests he sent on June 22 and July 7, 2022, for numbress in his left arm. He also requested to see a psychiatrist to treat his depression.

• <u>Action Taken</u>: On July 13, 2022, ODO reviewed the sick call requests submitted by the detainee. On June 11, 2022, the detainee submitted a sick call request for hemorrhoids, and a facility medical provider treated and prescribed a laxative for the detainee on June 14, 2022. On June 23, 2022, the detainee submitted a sick call request for numbness in his left arm, and a health care provider examined him and scheduled lab tests for June 28, 2022. The next day, the facility medical staff ordered an electrocardiogram to be administered to the detainee. Facility staff transported him to a local hospital for evaluation, and he returned to the facility with no abnormal results. After the detainee returned to the facility, the staff placed him on overnight medical observation as a precautionary measure. On June 30, 2022, a facility medical provider examined and discharged him to his housing area. A psychiatrist examined the detainee for depression on June 30, 2022. The facility mental health provider met with the detainee from June 5 to 7, 2022, and the detainee stated, "feeling good and blessed."

Medical Care: Five detainees stated they waited up to 2 weeks after submitting requests to receive medical services.

• <u>Action Taken</u>: ODO interviewed the facility clinical supervisor, reviewed five detainee sick call requests, and found a health care professional met with them within 72 hours to complete an initial medical assessment, administer over-the-counter medications, and manage all other health evaluations. As per facility protocol, the staff schedules detainees after their initial appointments for X-rays, lab tests, and other related assessments, based on the urgency of their conditions.

Medical Care: One detainee stated the facility gave him only a cream to apply for his back pain instead of physical therapy.

• <u>Action Taken</u>: ODO reviewed the detainee's medical file and found the detainee did not report his back pain during his health intake screening nor on the appraisal forms on May 18, 2022. On June 3, 2022, the detainee submitted a sick call request for a bruised foot and the medical staff examined him on the same day. On June 7, 2022, the detainee reported his chronic back pain from a previous injury, and the health care provider prescribed Naproxen (500 mg) and a muscle rub ream after diagnosing the condition as sciatica. On July 14, 2022, the medical staff told the detainee to submit a new sick call request for his chronic back pain. The detainee submitted no further sick call requests during the inspection.

Medical Care: One detainee stated his frustration with the medical forms due to their complexity and no available Spanish translation option.

• <u>Action Taken</u>: On July 13, 2022, ODO interviewed the facility clinical supervisor and confirmed the availability of electronic and paper copies of medical requests in Spanish. The clinical supervisor further stated that the nursing staff visit each housing pod at least twice daily and assist detainees in submitting sick call requests. ODO requested the facility staff to inform the detainee on the Spanish translations of the medical forms online and on paper. On July 13, 2022, the medical staff informed the detainee of the different options to complete medical forms.

Searches of Detainees: One detainee stated the facility strip searched him upon his arrival on or about May 19, 2022.

• <u>Action Taken</u>: ODO interviewed the associate warden and confirmed the facility does not conduct strip searches of detainees, nor had the facility conducted strip searches previously. Any strip search of a detainee must receive approval from the Assistant FOD and FOD. ODO observed facility staff providing privacy when detainees changed from facility uniforms to street clothing.

Staff-Detainee Communication: One detainee stated the facility did not release him in time to make his flight for removal on July 11, 2022.

• <u>Action Taken</u>: ODO interviewed an ERO New Orleans supervisory detention and deportation officer (SDDO) on July 13, 2022, and confirmed July 13, 2022, as the detainee's departure date. The ENFORCE Alien Removal Module system confirmed the detainee's release and his transportation to the airport on July 13, 2022.

FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

SECURITY

STAFF-DETAINEE COMMUNICATION (SDC)

ODO reviewed the ERO New Orleans electronic request logbook and found ERO New Orleans staff did not answer detainee requests within 3 business days of receipt. Specifically, 10 out of 134 detainee requests between June 28, 2022, through July 11, 2022, received late responses. The responses took from 4-to-5 days, making them 1-to-3 days late (Deficiency SDC-16⁶).

<u>CARE</u>

FOOD SERVICE (FS)

ODO interviewed the FS director and associate warden, reviewed inspection records for the vent hood fire suppression system in the kitchen, and found no 6-month inspection by a qualified contractor. Specifically, ODO found a contractor last inspected the FS fire suppression system on December 28, 2021 (Deficiency FS-407⁷). On July 14, 2022, facility staff had a qualified contractor inspect the fire suppression system, and ODO reviewed the inspection report on the same day.

⁶ "In Facilities with ICE/ERO Onsite Presence the ICE/ERO staff member receiving the request shall normally respond in person or in writing as soon as possible and practicable, but no later than within three (3) business days of receipt." *See* ICE PBNDS 2011, Standard, Staff-Detainee Communication, Section (V)(B)(1)(a).

⁷ "A qualified contractor shall inspect the system every six months." *See* ICE PBNDS 2011, Standard, Food Service, Section (V)(J)(12)(f).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 18 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 16 of those standards. ODO found two deficiencies in the remaining two standards. ODO commends facility staff for their responsiveness during this inspection. ODO recommends ERO New Orleans work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations. ODO has not received a UCAP for ODO's last inspection of ACDC in March 2022.

Compliance Inspection Results Compared	First FY 2022 (PBNDS 2011) (Revised 2016)	Second FY 2022 (PBNDS 2011) (Revised 2016)
Standards Reviewed	24	18
Deficient Standards	6	2
Overall Number of Deficiencies	18	2
Repeat Deficiencies	0	0
Areas Of Concern	0	0
Corrective Actions	1	0
Facility Rating	Superior	N/A