



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

**Office of Detention Oversight
Follow-Up Compliance Inspection
2024-002-354**

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

**Mesa Verde ICE Processing Center
Bakersfield, California**

June 11-13, 2024

**FOLLOW-UP COMPLIANCE INSPECTION
of the
MESA VERDE ICE PROCESSING CENTER
Bakersfield, California**

TABLE OF CONTENTS

FACILITY OVERVIEW	4
FOLLOW-UP COMPLIANCE INSPECTION PROCESS.....	5
FINDINGS BY PERFORMANCE-BASED NATIONAL DETENTION STANDARDS 2011 (REVISED 2016) MAJOR CATEGORIES.....	6
DETAINEE RELATIONS	7
FOLLOW-UP COMPLIANCE INSPECTION FINDINGS.....	7
SECURITY	7
ADMISSION AND RELEASE	7
CUSTODY CLASSIFICATION SYSTEM	7
CARE	7
FOOD SERVICE	7
CONCLUSION	8

FOLLOW-UP COMPLIANCE INSPECTION TEAM MEMBERS

[REDACTED]	Team Lead	ODO
[REDACTED]	Inspections and Compliance Specialist	ODO
[REDACTED]	Inspections and Compliance Specialist	ODO
[REDACTED]	Section Chief	ODO
[REDACTED]	Contractor	Creative Corrections

FOLLOW-UP COMPLIANCE INSPECTION PROCESS

ODO conducts biannual oversight inspections of ICE detention facilities with an average daily population (ADP) of 10 or more detainees, and where detainees are housed for longer than 72-hours, to assess compliance with ICE National Detention Standards. In FY 2021, to meet congressional requirements, ODO began conducting follow-up inspections at all over 72-hour ICE detention facilities with an ADP of 10 or more detainees that ODO conducted a full inspection of earlier in the FY. Follow-up inspections focus on facility compliance with detention standards that directly affect detainee life, health, safety, and/or well-being, and other standards ODO found deficient during the previous rated inspection to assess the facility's corrective actions taken to address those previously cited deficiencies.⁴

ODO identifies violations of ICE detention standards, ICE policies, or operational procedures, as "deficiencies." ODO highlights instances when 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.

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 the full and follow-up inspection are annotated as "Repeat Deficiencies" in this report.

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 Inspected ^{5,6}	Deficiencies
Part 1 - Safety	
Emergency Plans	0
Environmental Health and Safety	0
Sub-Total	0
Part 2 - Security	
Admission and Release	1
Custody Classification System	2
Facility Security and Control	0
Funds and Personal Property	0
Special Management Units	0
Staff-Detainee Communication	0
Use of Force and Restraints	0
Sub-Total	3
Part 4 - Care	
Food Service	1
Hunger Strikes	0
Medical Care	0
Medical Care (Women)	0
Personal Hygiene	0
Significant Self-harm and Suicide Prevention and Intervention	0
Sub-Total	1
Part 5 - Activities	
Recreation	0
Telephone Access	0
Sub-Total	0
Part 6 - Justice	
Grievance System	0
Sub-Total	0
Total Deficiencies	4

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

⁶ Beginning in FY 2024, ODO instituted a process of rotating all standards every other year. As a result, some standards may not be present in all inspections.

DETAINEE RELATIONS

ODO interviewed 10 detainees who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. All 10 detainees reported satisfaction with facility services.

FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

SECURITY

ADMISSION AND RELEASE (AR)

ODO reviewed ■ staff training records for staff with admissions responsibilities and found ■ out of ■ staff members had no documented training on the facility's admissions process (**Deficiency AR-10**⁷).

CUSTODY CLASSIFICATION SYSTEM (CCS)

ODO reviewed ■ staff training records for staff with classification responsibilities and found ■ out of ■ staff members had no documented training on the facility's classification process (**Deficiency CCS-5**⁸).

ODO reviewed ■ staff training records for staff with classification responsibilities and found ■ out of ■ staff members had not received on-site training (**Deficiency CCS-6**⁹).

CARE

FOOD SERVICE (FS)

ODO reviewed inspection documentation for the FS department's fixed fire-suppression system and found a qualified contractor last inspected the system on November 17, 2023 (**Deficiency FS-407**¹⁰).

⁷ "Staff members shall be provided with adequate training on the admissions process at the facility." *See* ICE PBNDS 2011 (Revised 2016), Standard, Admission and Release, Section (V)(B)(1).

⁸ "Each facility administrator shall require that the facility's classification system ensures the following: ...
2. All facility staff assigned to classification duties shall be adequately trained in the facility's classification process."

See ICE PBNDS 2011 (Revised 2016), Standard, Custody Classification System, Section (V)(A)(2).

⁹ "Each facility administrator shall require that the facility's classification system ensures the following: ...
2. All facility staff assigned to classification duties shall be adequately trained in the facility's classification process. Each staff member with detainee in-processing responsibilities shall receive on-site training."

See ICE PBNDS 2011 (Revised 2016), Standard, Custody Classification System, Section (V)(A)(2).

¹⁰ "An approved, fixed fire-suppression system shall be installed in ventilation hoods over all grills, deep fryers and open flame devices. A qualified contractor shall inspect the system every six months. The fire-suppression system shall be equipped with a locally audible alarm and connected to the control room's annunciator panel." *See* ICE PBNDS 2011 (Revised 2016), 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 15 of those standards. ODO found four deficiencies in the remaining three standards. Since MVIPC’s last full compliance inspection in January 2024, the facility’s compliance with the ICE PBNDS 2011 (Revised 2016) trended downward. MVIPC went from 2 deficient standards and 2 deficiencies in January 2024 to 3 deficient standards and 4 deficiencies during this follow-up compliance inspection. ERO provided ODO with a completed UCAP for ODO’s last full inspection of MVIPC in April 2024, which likely resolved the previously cited deficiencies. ODO recommends ERO San Francisco continue to work with the facility to resolve the deficiencies that remain outstanding in accordance with contractual obligations.

Compliance Inspection Results Compared	FY 2024 Full Inspection (PBNDS 2011) (Revised 2016)	FY 2024 Follow-Up Inspection (PBNDS 2011) (Revised 2016)
Standards Reviewed	29	18
Deficient Standards	2	3
Overall Number of Deficiencies	2	4
Priority Component Deficiencies	0	0
Repeat Deficiencies	0	0
Areas Of Concern	0	0
Corrective Actions	0	0
Facility Rating	Superior	N/A