



U.S. Department of Homeland Security
Immigration and Customs Enforcement
Office of Professional Responsibility
Inspections and Detention Oversight Division
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Office of Detention Oversight
Compliance Inspection

Enforcement and Removal Operations
ERO Los Angeles Field Office

Adelanto ICE Processing Center
Adelanto, California

December 7-10, 2021

COMPLIANCE INSPECTION
of the
ADELANTO ICE PROCESSING CENTER
Adelanto, California

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COMPLIANCE INSPECTION TEAM MEMBERS



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

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 December 7 to 10, 2021.¹ The facility opened in 2011 and is owned and operated by The GEO Group (GEO). 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 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 (DOs) and a detention services manager to the facility. A warden handles daily facility operations and manages █████ support personnel. GEO provides food services and medical care, and the Keefe Group provides commissary services at the facility. The facility received accreditation by the American Correctional Association in August 2019 and the National Commission on Correctional Health Care in January 2020. In March 2020, 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 Bed Capacity ²	█████
Average ICE Population ³	█████
Adult Male Population (as of December 7, 2021)	█████
Adult Female Population (as of December 7, 2021)	█████

During its last inspection, in Fiscal Year (FY) 2021, ODO found two deficiencies in the following areas: Admission and Release (1) and Facility Security and Control (1).

¹ This facility holds both 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 December 6, 2021.

³ *Ibid.*

COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population greater than 10, and where detainees are housed for over 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 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.

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 its 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 continuing resolution, which was set to expire just prior to the inspection, 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 (PBNDS) 2011 (REVISED 2016) MAJOR CATEGORIES

PBNDS 2011 (Revised 2016) Standards Inspected ^{5,6}	Deficiencies
Part 1 - Safety	
Emergency Plans	0
Environmental Health and Safety	1
Sub-Total	1
Part 2 - Security	
Admission and Release	1
Custody Classification System	0
Funds and Personal Property	1
Post Orders	2
Searches of Detainees	0
Sexual Abuse and Assault Prevention and Intervention	0
Special Management Units	1
Staff-Detainee Communication ⁷	1
Use of Force and Restraints	2
Sub-Total	8
Part 4 - Care	
Food Service	2
Hunger Strikes	0
Medical Care	0
Medical Care (Women)	0
Personal Hygiene	0
Significant Self-harm and Suicide Prevention and Intervention	0
Sub-Total	2
Part 5 - Activities	
Correspondence and Other Mail	0
Trips for Non-Medical Emergencies	0
Marriage Requests	0
Voluntary Work Program	0
Sub-Total	0
Part 6 - Justice	

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

⁶ 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 inspections.

⁷ The deficiency cited under the Staff-Detainee Communication standard was identified as a result of detainee interviews, the Staff-Detainee Communication standard was not reviewed in its entirety.

Legal Rights Group Presentations	0
Sub-Total	0
Part 7 - Administration and Management	
Detention Files	0
Interviews and Tours	0
Detainee Transfers	0
Sub-Total	0
Total Deficiencies	11

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 concern listed below. ODO conducted detainee interviews via video teleconference.

Staff-Detainee Communication: One detainee stated DOs do not respond to detainee requests in a timely manner.

- Action Taken: ODO reviewed the detainee’s ICE requests from the previous 12 months and found the detainee submitted requests on March 16, 2021; June 4, 2021; and December 2, 2021. ODO found DOs did not respond to the request from December 2, 2021, until December 8, 2021, 2 days after the required response time. ODO cited this as a deficiency in the *Staff-Detainee Communication* section of the report.

COMPLIANCE INSPECTION FINDINGS

SAFETY

ENVIRONMENTAL HEALTH AND SAFETY (EHS)

ODO interviewed the health services administrator and found the facility could not provide documentation recording weekly inventories for security risk items, such as sharp instruments, syringes, needles, and scissors from the AIPC-East medical unit, from June 2021 to October 2021 (**Deficiency EHS-141**⁸). ODO notes this discrepancy was a result of a change in the facility’s medical care provider in October 2021; the previous medical provider retained this documentation.

⁸ “Items that pose a security risk, such as sharp instruments, syringes, needles and scissors, shall be inventoried and checked weekly by an individual designated by the medical facility’s Health Service Administrator or equivalent.” See ICE PBNDS 2011 (Revised 2016), Standard, Environmental Health and Safety, Section (V)(D)(4).

SECURITY

ADMISSION AND RELEASE (AR)

ODO reviewed the facility's orientation video and found it does not include procedures for detainees to file formal complaints with the DHS Office of the Inspector General (**Deficiency AR-66⁹**).

ODO reviewed five detainee detention files of released detainees and found three out of five files did not contain fingerprinting or check for wants/warrants during the release process. ODO interviewed the facility intake lieutenant and a DO and found the facility does not have the capabilities to complete fingerprinting and checks for wants and warrants. However, the DO stated ERO Los Angeles conducts fingerprinting and checks for wants/warrants and provides the facility with a copy of the results. ODO notes the facility's inconsistency for placing the fingerprints and checks for wants/warrants in the detainee detention files as an **Area of Concern**.

FUNDS AND PERSONAL PROPERTY (FPP)

ODO reviewed the facility's supplemental handbook and found it does not notify detainees of the rules for storing or mailing property not allowed in their possession (**Deficiency FPP-17¹⁰**).

POST ORDERS (PO)

ODO reviewed five signed PO acknowledgement forms, interviewed the warden, and found there is no requirement for officers to review and acknowledge the PO before assuming their post each shift (**Deficiency PO-7¹¹**). As a result, supervisors do not ensure officers review and acknowledge their PO each shift (**Deficiency PO-8¹²**).

ODO reviewed the Armed Mobile Patrol Officer and Control Center PO and found the Armed Mobile Patrol Officer PO did not include the officer's responsibilities during a hostage situation, despite the officer's responsibilities of inclusion in the Control Center PO. As a result, ODO noted this as an **Area of Concern**.

⁹ "The orientation shall include the following information: ...

12. how the detainee can file formal complaints with the DHS Office of the Inspector General (OIG)." See ICE PBNDS 2011 (Revised 2016), Standard, Admission and Release, Section (V)(F)(12).

¹⁰ "The detainee handbook or equivalent shall notify the detainees of facility policies and procedures related to personal property, including: ...

3. the rules for storing or mailing property not allowed in their possession." See ICE PBNDS 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(C)(3).

¹¹ "Even in the event that an officer has worked a post in the past, he/she shall assume the post orders have changed and shall be required to read and comprehend all Post Order documents upon assuming their posts." See ICE PBNDS 2011 (Revised 2016), Standard, Post Orders, Section (V)(B).

¹² "Supervisors shall ensure that officers understand the post orders, regardless of whether the assignment is temporary, permanent, or due to an emergency." See ICE PBNDS 2011 (Revised 2016), Standard, Post Orders, Section (V)(B).

SPECIAL MANAGEMENT UNITS (SMU)

ODO reviewed the disciplinary segregation (DS) file of one detainee the facility placed in DS and found the releasing officer did not indicate the date and time of release on the DS order (**Deficiency SMU-71**¹³).

STAFF-DETAINEE COMMUNICATION (SDC)

ODO reviewed one detainee detention file and found ERO Los Angeles did not respond within 3 business days to one out of three ICE requests the detainee submitted. Specifically, ERO Los Angeles responded to the detainee's request 5 business days after receipt (**Deficiency SDC-16**¹⁴).

USE OF FORCE AND RESTRAINTS (UOFR)

ODO reviewed two calculated use of force (UOF) audiovisual recordings and found in one out of two audiovisual recordings, the recording stopped when the camera lost power prior to the completion of the UOF incident. The facility, therefore, did not audio visually record the entire UOF incident (**Deficiency-69**¹⁵).

ODO reviewed two calculated UOF audiovisual recordings and found in one out of two audiovisual recordings, team members did not remove their helmets and uncover their heads during the team introduction. The facility did not audio visually record the entire UOF operation because the camera lost power. Additionally, the camera operator did not take close-ups of the detainee's body during the medical exam nor record the debrief of the incident with full discussion, analysis, and assessment (**Deficiency-73**¹⁶).

¹³ "When the detainee is released from the SMU, the releasing officer shall indicate the date and time of release on the disciplinary segregation order." See ICE PBNDS 2011 (Revised 2016), Standard, Special Management Units, Section (V)(B)(2)(c).

¹⁴ "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 (Revised 2016), Standard, Staff-Detainee Communication, Section (V)(B)(1)(a).

¹⁵ "While ICE/ERO requires that all use-of-force incidents be documented and forwarded to ICE/ERO for review, for calculated use of force, it is required that the entire incident be audio visually recorded." See ICE PBNDS 2011 (Revised 2016), Standard, Use of Force and Restraints, Section (V)(I)(2).

¹⁶ "Calculated use-of-force incidents shall be audio visually recorded in the following order: ...

- b. Faces of all team members shall briefly appear (with helmets removed and heads uncovered), one at a time, identified by name and title.
- d. Record entire use-of-force team operation, unedited, until the detainee is in restraints.
- e. Take close-ups of the detainee's body during a medical exam, focusing on the presence/absence of injuries. Staff injuries, if any, are to be described but not shown.
- f. Debrief the incident with a full discussion/analysis/assessment of the incident." See ICE PBNDS 2011 (Revised 2016), Standard, Use of Force and Restraints, Section (V)(I)(2)(b)(d)(e)(f).

CARE

FOOD SERVICE (FS)

ODO reviewed two purchase orders and found in both orders, there were no special-handling requirements for the delivery of sugar (**Deficiency FS-39**¹⁷).

ODO interviewed the food service manager, reviewed photos of all items used for the preparation of kosher meals, and found the bread was not labeled “pareve” or “parve” (**Deficiency FS-199**¹⁸).

CONCLUSION

During this inspection, ODO assessed the facility’s compliance with 26 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 17 of those standards. ODO found 11 deficiencies in the remaining 8 standards. ODO commends facility staff members for their responsiveness during this inspection. ODO recommends ERO Los Angeles work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations. ODO has not received the uniform corrective action plan for ODO’s last inspection of AIPC in June 2021.

Compliance Inspection Results Compared	FY 2021 PBNDS 2011 (Revised 2016)	FY 2022 PBNDS 2011 (Revised 2016)
Standards Reviewed	13	26
Deficient Standards	2	8
Overall Number of Deficiencies	2	11
Repeat Deficiencies	1	0
Areas of Concern	0	2
Corrective Actions	0	0
Facility Rating	N/A	Superior

¹⁷ “Mace, nutmeg, cloves, sugar and alcohol-based flavorings also require special handling and storage.

1) The purchase order for any of these items shall specify the special-handling requirements for delivery.” See ICE PBNDS 2011 (Revised 2016), Standard, Food Service, Section (V)(B)(4)(b)(1).

¹⁸ “Only bread and margarine labeled “pareve” or “parve” shall be purchased for the kosher tray.” See ICE PBNDS 2011 (Revised 2016), Standard, Food Service, Section (V)(G)(5).