

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 Los Angeles Field Office

Adelanto ICE Processing Center
Adelanto, California

June 14-17, 2021

FOLLOW-UP 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 follow-up compliance inspection of the Adelanto ICE Processing Center (AIPC) in Adelanto, California, from June 14 to 17, 2021.¹ This inspection focused on the standards found deficient during ODO's last inspection of AIPC from February 8 to 12, 2021. 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 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 facility administrator handles daily facility operations and manages [REDACTED] personnel. The GEO Group Inc. provides food services, Wellpath provides medical care, and Keefe Commissary 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.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity ²	1940
Average ICE Detainee Population ³	[REDACTED]
Male Detainee Population (as of June 14, 2021)	[REDACTED]
Female Detainee Population (as of June 14, 2021)	[REDACTED]

During its last inspection, in Fiscal Year (FY) 2021, ODO found nine deficiencies in the following areas: Admission and Release (2); and Facility Security and Control (7).

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 June 14, 2021.

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

PBNDS 2011 (Revised 2016) Standards Inspected⁴	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	0
Facility Security and Control	1
Funds and Personal Property	0
Special Management Units	0
Use of Force and Restraints	0
Sub-Total	2
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
Sub-Total	0
Total Deficiencies	2

⁴ For greater detail on ODO's findings, see the *Follow-Up 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. One detainee exhibited signs of mental health issues during the interview, and ODO immediately referred him to ERO Los Angeles and facility medical staff for evaluation. Most detainees reported satisfaction with facility services except for the concerns listed below. ODO attempted to conduct detainee interviews via video teleconference; however, ERO Los Angeles and the facility were not able to accommodate this request due to technology issues. As such, ODO conducted the detainee interviews via telephone.

Environmental Health and Safety: One detainee stated there was mold on the phones.

- Action Taken: ODO interviewed facility staff, confirmed the facility staff inspected the phones on June 16, 2021, and received additional confirmation from facility staff the phones are clean and in good working order by a photo. Furthermore, the facility staff sanitizes all touch surfaces to include phones no less than six times a day.

Admission and Release: Two detainees stated they did not receive either the facility handbook or the ICE National Detainee Handbook upon intake to the facility.

- Action Taken: ODO reviewed the detainees' detention files and found signed acknowledgements from each detainee, which indicated they received a copy of the facility handbook and the ICE National Detainee Handbook upon intake. During the inspection, ODO requested the facility provide each detainee a copy of both handbooks, and the facility completed that request on June 15, 2021.

Sexual Abuse and Assault Prevention and Intervention: One detainee stated another detainee forced him to participate in a sexual encounter and threatened him with a knife. He stated he submitted a grievance regarding the incident and the facility took no action.

- Action Taken: ODO reviewed the grievance log and confirmed the facility responded by creating an incident report. The facility reported that the incident was unsubstantiated and the facility informed the detainee. ODO requested a copy of the incident report and confirmed the facility notified the appropriate entities of the incident followed by a thorough investigation of the matter. ODO advised the facility to interview the detainee, and the facility followed up by reporting that the detainee had no additional complaints.

Use of Force: Three detainees stated they were either verbally or physically abused by facility staff.

- Action Taken: ODO reviewed the incident reports and interviewed facility staff about the detainee complaints. Facility staff were involved in the incidents and reported the incidents to facility leadership. ODO found the incidents occurred in July 2020, May 2021, and June 2021, and in each incident, the detainee aggressed the staff, used vulgar language, and did not comply with the officer's commands. After several attempts to calm the detainees, the officers had to use restraints on the detainees to gain control. ODO requested videos of the incidents, but the facility did not classify two of the

events as use-of-force incidents; therefore, the facility did not retain the video. The facility provided a video of the third use-of-force incident, and ODO determined the officer's actions were appropriate.

Food Service: One detainee stated the food had no nutritional value and the meat patties had paper in it.

- Action Taken: ODO interviewed facility staff and found a registered dietician created the menus, which the facility reviewed and approved. ODO confirmed the registered dietician's credentials, statement of nutritional analysis, and adequacy. The facility admitted to the possibility of paper in the patties because the patties were frozen with patty paper between each slice. The facility confirmed it eliminated the patty paper issue by presently making the patties by hand from 100% ground beef.

Medical Care: One detainee stated she submitted a medical grievance and did not receive a response.

- Action Taken: ODO interviewed medical staff and found the facility addressed the detainee's complaint. On June 16, 2021, the doctor evaluated the detainee, determined the detainee had no medical issues, and confirmed that a registered nurse had evaluated the detainee at regular intervals for minor aches and pains. On June 16, 2021, the detainee informed ODO that medical staff answered all her questions and she had no additional issues with the medical staff or clinic.

Significant Self-harm and Suicide Prevention and Intervention: One detainee stated he harmed himself in the past and is psychologically unwell.

- Action Taken: ODO immediately notified facility staff and ERO Los Angeles of the detainee's statement and requested facility staff escort the detainee to medical for a mental health evaluation. Medical staff interviewed the detainee and found the detainee looked well but mentioned hearing voices that spoke of such things as eating flesh. Two doctors observed the detainee's mental status over the next few days of the inspection week and informed ODO of the detainee's overall improvement in his mental status. On June 15, 2021, medical staff evaluated the detainee and prescribed Thorazine, an anti-psychotic medication, and found no additional concerns. The facility placed the detainee on suicide watch after the evaluation and will keep him on suicide watch until his follow-up appointment in 14 days.

Telephone Access: One detainee stated she had issues contacting her family with the telephones in the housing units.

- Action Taken: ODO reviewed the detainee's phone call logs and found the detainee had funds to make calls and made several phone calls. Several of her calls resulted in no answer. ODO determined there were no issues with the phones.

Grievance System: Two detainees stated they submitted grievances and did not receive a response.

- Action Taken: ODO reviewed the grievance logs and confirmed the facility responded to each grievance submitted within five days. Facility staff interviewed both detainees and found the detainees did not have additional grievances.

FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

SECURITY

ADMISSION AND RELEASE (AR)

ODO reviewed [REDACTED] detainee-release files and found the facility did not complete fingerprinting during the release process for [REDACTED] detainees (**Deficiency AR-78⁵**).

FACILITY SECURITY AND CONTROL (FSC)

ODO reviewed the facility’s updated security post orders and perimeter log and found all drivers submit to questioning about contraband items; however, drivers do not submit to a personal search (**Deficiency FSC-61⁶**). **This is a repeat deficiency.**

CONCLUSION

During this inspection, ODO assessed the facility’s compliance with 13 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 11 of those standards. ODO found two deficiencies in the remaining two standards. ODO commends the facility staff 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 February 2021.

Compliance Inspection Results Compared	First FY 2021 (PBNDS 2011) (Revised 2016)	Second FY 2021 (PBNDS 2011) (Revised 2016)
Standards Reviewed	21	13
Deficient Standards	2	2
Overall Number of Deficiencies	9	2
Repeat Deficiencies	2	1
Areas of Concern	0	0
Corrective Actions	2	0

⁵ “Necessary steps include but are not limited to: completing out-processing forms; closing files and fingerprinting; returning personal property; reclaiming facility-issued clothing, identification cards, handbooks, and bedding; and checking wants and warrants.” See ICE PBNDS 2011 (Revised 2016), Standard, Admission and Release, Section (V)(H).

⁶ “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).