

**Violations of ICE
Detention Standards
at Adams County
Correctional Center**





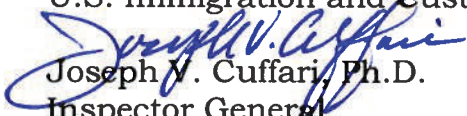
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Department of Homeland Security

Washington, DC 20528 / www.oig.dhs.gov

July 14, 2021

MEMORANDUM FOR: Tae D. Johnson
Acting Director
U.S. Immigration and Customs Enforcement

FROM: 
Joseph V. Cuffari, Ph.D.
Inspector General

SUBJECT: *Violations of ICE Detention Standards at Adams County Correctional Center*

Attached for your information is our final report, *Violations of ICE Detention Standards at Adams County Correctional Center*. We incorporated the formal comments from U.S. Immigration and Customs Enforcement in the final report.

The report contains seven recommendations aimed at improving care of detainees at Adams County Correctional Center. Your office concurred with all seven recommendations. Based on information provided in your response to the draft report, we consider recommendations 1 through 5 resolved and closed, and recommendations 6 and 7 resolved and open. Once your office has fully implemented the recommendations, please submit a formal closeout letter to us within 30 days so that we may close the recommendations. The memorandum should be accompanied by evidence of completion of agreed-upon corrective actions and of the disposition of any monetary amounts. Please send your response or closure request to OIGSREFollowup@oig.dhs.gov.

Consistent with our responsibility under the *Inspector General Act*, we will provide copies of our report to congressional committees with oversight and appropriation responsibility over the Department of Homeland Security. We will post the report on our website for public dissemination.

Please call me with any questions, or your staff may contact Thomas Kait, Deputy Inspector General for Inspections and Evaluations, at (202) 981-6000.

Attachment



DHS OIG HIGHLIGHTS

Violations of ICE Detention Standards at Adams County Correctional Center

July 14, 2021

Why We Did This Inspection

In accordance with the *Consolidated Appropriations Act, 2021*, we conduct unannounced inspections of U.S. Immigration and Customs Enforcement (ICE) detention facilities to ensure compliance with detention standards. Between January and February 2021, we conducted a remote inspection of the Adams County Correctional Center (Adams) to evaluate compliance with ICE detention standards and COVID-19 requirements.

What We Recommend

We made seven recommendations to improve ICE's oversight of detention facility management and operations at Adams.

For Further Information:

Contact our Office of Public Affairs at (202) 981-6000, or email us at DHS-OIG.OfficePublicAffairs@oig.dhs.gov

What We Found

During our unannounced inspection of Adams in Natchez, Mississippi, we identified violations of ICE detention standards that threatened the health, safety, and rights of detainees. Although Adams generally provided sufficient medical care, we identified one case in which the medical unit examined a sick detainee but did not send the detainee to the hospital for urgent medical treatment, and the detainee died. We also found the medical unit did not document outcomes of detainee sick calls or ensure proper review and follow-up of detainee test results. In addressing COVID-19, Adams took some measures to prevent the spread of COVID-19, but detainees did not consistently follow some guidelines, including use of facial coverings and social distancing, which may have contributed to repeated COVID-19 transmissions. Adams did not meet standards for classification, grievances, segregation, or staff-detainee communications. Specifically, we discovered a low custody detainee comingled with higher custody detainees, and found the facility did not always identify detainees with special vulnerabilities or those requiring translation services. Adams also did not respond timely to detainee grievances and was not consistently providing required care for detainees in segregation including access to recreation, legal calls, laundry, linen exchange, mail, legal materials, commissary, law library, and to ICE forms and drop-boxes for detainees to make requests. In addition, ICE did not consistently respond to detainee requests timely. Finally, we determined the declining detainee population at Adams resulted in ICE paying more than \$17 million for unused bed space under a guaranteed minimum contract.

ICE Response

ICE concurred with all seven recommendations. We included a copy of ICE's response in Appendix B.



OFFICE OF INSPECTOR GENERAL
Department of Homeland Security

Table of Contents

Introduction.....	2
Background	2
Results of Inspection.....	3
Detainee Died after Adams Medical Unit Did Not Send Detainee to the Hospital for Urgent Medical Treatment.....	4
Adams Medical Unit Needs to Improve Sick Call and Test Result Follow-up	5
Adams Took Some Measures to Prevent the Spread of COVID-19, but Detainees Did Not Consistently Follow Some Guidelines	6
Adams Did Not Meet Classification Standards.....	8
Adams Did Not Always Provide Timely Responses to Grievances.....	10
Segregation Records Raise Concerns about Detainee Care	11
ICE Did Not Consistently Respond to Detainee Requests Timely.....	12
Declining Detainee Population and ‘Guaranteed Minimum’ Contract with Adams Caused ICE to Pay for Unused Bed Space	13
Recommendations.....	14

Appendixes

Appendix A: Objective, Scope, and Methodology	21
Appendix B: ICE Comments to the Draft Report.....	23
Appendix C: Office of Special Reviews and Evaluations Major Contributors to This Report	30
Appendix D: Report Distribution.....	31

Abbreviations

Adams	Adams County Correctional Center
COVID-19	Coronavirus Disease 2019
ECG	Electrocardiogram
ERO	Enforcement Removal Operations
ICE	U.S. Immigration and Customs Enforcement
PBNDS	Performance-Based National Detention Standards



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Department of Homeland Security

Introduction

U.S. Immigration and Customs Enforcement (ICE) houses detainees at roughly 200 facilities nationwide, and the conditions and practices at those facilities can vary greatly. ICE is required to comply with detention standards and establish an environment that protects the health, safety, and rights of detainees. Our program of unannounced inspections of ICE detention facilities has identified and helped correct *2011 Performance-Based National Detention Standards* (2011 PBNDS) violations at facilities across the country. From January to February 2021, we conducted an unannounced remote inspection of the Adams County Correctional Center (Adams) in Natchez, Mississippi, and identified concerns regarding detainee care and treatment.

Background

ICE apprehends, detains, and removes non-citizens who are in the United States unlawfully. ICE Enforcement and Removal Operations (ERO) oversees the detention facilities that it manages in conjunction with private contractors or state or local governments. Owned and operated by CoreCivic, in 2020 Adams had an average daily population of 710 detainees with a maximum capacity of 2,348.

ICE's intergovernmental service agreement with Adams requires the facility to comply with 2011 PBNDS, as revised in December 2016. According to ICE, the 2011 PBNDS establish consistent conditions of confinement, program operations, and management expectations within ICE's detention system. These standards set requirements for areas such as:

- environmental health and safety, including cleanliness, sanitation, security, detainee searches, segregation,¹ and disciplinary systems;
- detainee care, e.g., food service, medical care, and personal hygiene;

¹ ICE, *Performance-Based National Detention Standards, 2011*, Section 2.12 *Special Management Units* (Revised Dec. 2016). Segregation is the process of separating certain detainees from the general population for administrative or disciplinary reasons. Detainees in segregation at Adams are placed in individual cells. Detainees in disciplinary segregation can be held for no more than 30 days per incident, except in extraordinary circumstances. Detainees in disciplinary segregation are allowed out of their cells for 1 hour of recreation time at least 5 days a week. Detainees in administrative segregation are separated from the general population to ensure the safety of all detainees and can be held in segregation until their safety, and the safety of others, is no longer a concern. Detainees in administrative segregation are allowed out of their cells for up to 2 hours of recreation time at least 7 days a week. Detainees in both disciplinary and administrative segregation are also allowed time out of their cells for showers, phone calls, law library, visitation, and religious services.



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Department of Homeland Security

- activities, including visitation and recreation; and
- grievance systems.

As mandated by Congress,² we conduct unannounced inspections of ICE detention facilities to ensure compliance with detention standards. From January to February 2021, we made an unannounced, remote inspection of Adams to determine whether it complied with ICE's 2011 PBNDS. We also conducted a limited review of the facility's coronavirus disease 2019 (COVID-19) pandemic preparedness measures and its response to outbreaks of COVID-19 across the detainee population.³ We incorporated information provided by the Office of Inspector General's (OIG) contracted medical experts into our findings. At the start of the inspection, Adams housed 222 ICE detainees in different housing units within the facility. During our virtual inspection, we directed a livestream video walkthrough of the facility where we inspected Adams facilities including detainee housing units, kitchen, dining hall, medical units, and indoor and outdoor recreation areas. We viewed surveillance video from areas within the facility including housing units and of specific use of force incidents involving detainees. We also interviewed ICE personnel, Adams officials, and detainees by telephone and video conferencing.

Results of Inspection

During our unannounced inspection of Adams, we identified violations of ICE detention standards that threatened the health, safety, and rights of detainees. Although the facility generally provided sufficient medical care, we identified one case in which the medical unit examined a sick detainee but did not send the detainee to the hospital for urgent medical treatment, and the detainee died. We also found the medical unit did not document outcomes of detainee sick calls or ensure proper review and follow-up of detainee test results. In addressing COVID-19, Adams took some measures to prevent the spread of COVID-19, but detainees did not consistently follow some guidelines, including use of facial coverings and social distancing, which may have contributed to repeated COVID-19 transmissions. Adams did not meet standards for classification, grievances, segregation, or staff-detainee communications. Specifically, we discovered a detainee received the wrong uniform for his classification level, resulting in his comingling with detainees who had criminal histories, and found the facility did not always identify detainees with special vulnerabilities or those requiring translation services. Adams also did not

² *Consolidated Appropriations Act, 2021*, Pub. L. No. 116-260, Division F, *Department of Homeland Security Appropriations Act, 2021*; H.R. Rep. No. 116-458, (2021).

³ OIG is also conducting a separate, in-depth evaluation of ICE's handling of COVID-19 in its detention facilities.



OFFICE OF INSPECTOR GENERAL
Department of Homeland Security

respond timely to detainee grievances and was not consistently providing required care for detainees in segregation, including access to recreation, legal calls, laundry, linen exchange, mail, legal materials, commissary, law library, and to ICE forms and drop-boxes for detainees to make requests. In addition, ICE did not consistently respond timely to detainee requests. Finally, we determined the declining detainee population at Adams resulted in ICE paying more than \$17 million for unused bed space under a guaranteed minimum contract.

Detainee Died after Adams Medical Unit Did Not Send Detainee to the Hospital for Urgent Medical Treatment

ICE 2011 PBNDS specifies that detainees have access to appropriate and necessary medical, dental, and mental health care, including emergency services.⁴ Detainees rely on health care professionals at ICE facilities to provide medical services. OIG-contracted medical professionals reviewed patient medical files and determined the Adams medical unit did not send a detainee with an urgent medical need to the hospital. The detainee died in the facility. Specifically, on December 17, 2020, a detainee with a history of hypertension requested medical attention due to chest pains and pain in his arms. The detainee was taken to the Adams medical unit where he was given medication and oxygen. An electrocardiogram (ECG) was performed and reported to show “no acute changes” and the detainee was released. While the detainee was waiting to return to his housing area, the detainee collapsed and Adams medical staff initiated cardiopulmonary resuscitation and administered epinephrine. Although paramedics arrived and performed resuscitation efforts, the detainee was pronounced dead. An autopsy conducted by the Mississippi Office of the State Medical Examiner ruled the cause of death was Atherosclerotic Cardiovascular Disease.⁵ The detainee had a prior ECG on file from October 2019 and there was a clear change from that ECG to the one performed on December 17, 2020, the day he died. Based on a review of medical records and the autopsy report, our medical contractor concluded that had the Adams medical staff compared the 2019 ECG with the one conducted on December 17, 2020, it should have prompted the medical staff to call 911 and send the detainee to the hospital where life support care would have been readily available.

⁴ 2011 PBNDS, Section 4.3, *Medical Care* (Revised Dec. 2016).

⁵ Arteriosclerosis is hardening and thickening of the walls of the arteries. When arteriosclerosis affects the coronary arteries that supply blood to the heart muscle, a shortage of oxygen delivered to the heart itself may lead to a heart attack.



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Adams Medical Unit Needs to Improve Sick Call and Test Result Follow-up

We found that, except for the case just described, access to and quality of medical care at Adams generally met the 2011 PBNDS standards of medical care⁶ for those areas that we evaluated. The facility has 24-hour nursing coverage, on-call physician coverage, and an on-call mental health provider. Sick call is provided daily, and patients receive medical appointments in a timely manner. We reviewed 10 detainee health records and found that facility health services personnel addressed patient medical needs, typically within 24 hours. In cases where Adams could not handle the patient's medical needs, the facility made appropriate referrals to specialty care providers. A qualified mental health professional addressed mental health needs on site, and a psychiatrist was available for telehealth visits 3 days a week.

However, we found that the facility could improve its care for patients by documenting outcomes of detainee sick call visits and ensuring proper review and follow-up of detainee test results. Our review of the sick call log revealed that, when the registered nurse has a sick call visit with a detainee on the evening shift while triaging the sick call requests, the registered nurse is not noting the disposition of the detainee sick call visit. Detailing the disposition of the sick call visit allows other medical staff to ensure that each request has been addressed and to understand exactly what services were provided. When the disposition is not provided on the sick call log, it is not possible to determine what steps were taken to address the detainee medical issue. Second, we found that the medical unit was not documenting follow-up on detainee laboratory test results. In many of the medical records reviewed, it was difficult to determine the medical provider's interpretation of lab results, actions taken regarding the results, and the sharing of the results with the detainee. Documentation of decisions made based on laboratory results helps guide continuity of care across all provider staff who may treat a detainee. In addition, sharing lab results with detainees allows them to be well informed and involved in their care and how their actions affect their health.

⁶ 2011 PBNDS, Section 4.3, *Medical Care* (Revised Dec. 2016).



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Adams Took Some Measures to Prevent the Spread of COVID-19, but Detainees Did Not Consistently Follow Some Guidelines

We conducted a limited review of Adams' response to COVID-19 and identified areas for improvement. Since March 2020, 128 detainees⁷ at Adams have tested positive for COVID-19. Adams took some measures to prevent its spread, such as serving meals to some detainees in detainee housing areas, restricting visitation and services (while offering non-contact alternatives, such as video conferencing), and providing detainees masks. However, detainees did not always follow guidelines for mask wearing or social distancing in detainee housing areas.

Adams Restricted Services and Social Activities in Response to COVID-19

In March 2020, ICE directed all detention facilities, including Adams, to restrict several activities in response to the COVID-19 pandemic.⁸ This included halting in-person social visitation, but still allowing visits from legal representatives. ICE indicated that personal protective equipment precautions were mandated for both attorney and detainee during legal visits. In response, Adams provided each detainee with 520 free telephone minutes per month to compensate for the lost visitation. Adams suspended library services, instead delivering reading materials to detainees in the housing units. The facility also limited detainee usage of the dining hall, opting to deliver meals to medium-high, high, and quarantined detainees in their housing units. In September and October 2020, ICE released additional pandemic response requirements⁹ for detention facilities and, as of March 2021, the restrictions on detainee activities due to the pandemic remained in place.

Adams Did Not Consistently Ensure Detainees Wore Facial Coverings or Practiced Social Distancing

Adams reported it issues each detainee two reusable cloth type masks upon arrival and replacements upon request. ICE guidance from September 2020 specifies, "cloth face coverings should be worn by detainees and staff to help slow the spread of COVID-19."¹⁰ We reviewed facility surveillance video footage from December 2020 and January 2021, observing detainees gathered in groups not wearing masks or practicing social distancing (see Figure 1), as well

⁷ ICE number of reported COVID-19 cases as of March 18, 2021.

⁸ ICE Memorandum on Coronavirus Disease 2019 (COVID-19) Action Plan, Revision 1, March 27, 2020.

⁹ ICE ERO COVID-19 Pandemic Response Requirements (Version 4.0), September 4, 2020. ICE ERO COVID-19 Pandemic Response Requirements (Version 5.0), October 27, 2020.

¹⁰ ICE ERO COVID-19 Pandemic Response Requirements (Version 4.0), September 4, 2020.



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as detainees and staff in close proximity not wearing or improperly wearing masks (see Figure 2).

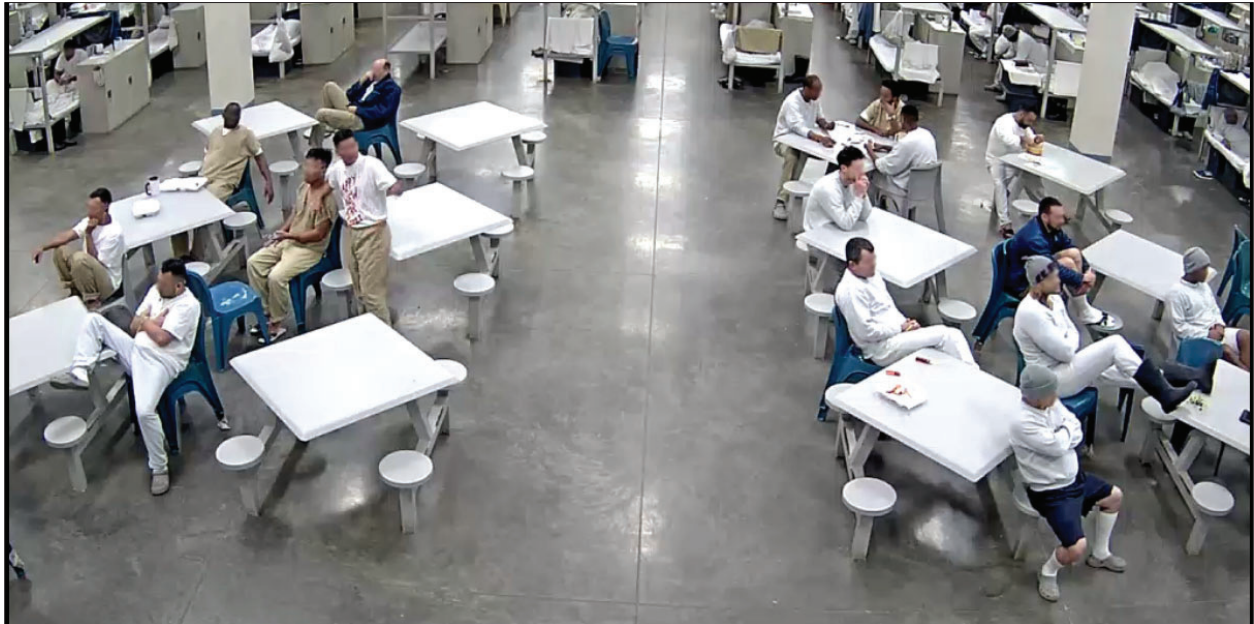


Figure 1. Adams detainees not wearing masks and not practicing social distancing on January 2, 2021.

Source: Video surveillance footage provided by Adams staff



Figure 2. Adams detainees not wearing masks near an Adams staff member (in pink shirt) improperly wearing a mask on December 30, 2020.

Source: Video surveillance footage provided by Adams staff



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During our January 2021 livestream walkthrough across multiple housing units, we observed numerous detainees in close proximity throughout the facility not wearing masks. Staff told us detainees are required to wear masks outside housing areas, and although they encourage detainees to wear their masks and practice social distancing within housing areas, there are often times when detainees choose not to wear their masks or practice social distancing. The September 2020 ICE guidance makes no distinction between the need for mask-wearing inside or outside housing areas. The facility risks additional COVID-19 spread by not ensuring detainees wear their masks and practice social distancing within the housing area.

Adams Did Not Meet Classification Standards

According to the 2011 PBNDS,¹¹ facilities must classify detainees according to risk level to assign housing with others of similar background and criminal or civil history, and ensure separation of high custody and low custody detainees. The standards require that detainees be given color-coded uniforms, wristbands, or other means to easily identify their classification level. Although the facility instituted color-coded uniforms to separate different levels of detainees, we found one case in which Adams did not properly assign uniforms to match the detainee's classification. In addition, they did not always document whether detainees had special vulnerabilities or document the language used to conduct detainee interviews.

Adams Misclassified a Detainee, Resulting in Comingling

ICE guidance mandates low custody detainees be housed separately from high custody detainees because "grouping detainees with comparable histories together ... reduces non-criminal and non-violent detainees' exposure to physical and psychological danger."¹² While interviewing a low level ICE detainee, we noticed he wore an orange uniform, indicating he was classified as a medium-high level detainee. When questioned about the uniform, the detainee stated when he first arrived at the facility he was classified as low level and received a tan uniform. In preparation for deportation, he was transported to the airport, but was returned to the facility when he was unable to be deported to his home country. Upon returning to Adams from the airport, the detainee received an orange uniform from staff. The detainee said he accepted the shirt because he did not want to be housed alone during the quarantine

¹¹ 2011 PBNDS, Section 2.2, *Custody Classification System* (Revised Dec. 2016).

¹² 2011 PBNDS, Section 2.2, *Custody Classification System* (Revised Dec. 2016).



OFFICE OF INSPECTOR GENERAL
Department of Homeland Security

period,¹³ separate from the high and medium-high level detainees who had accompanied him to the airport.

We notified Adams personnel of the misclassification and they reported that they had corrected the problem and moved the detainee to a housing unit matching his classification level. Facility personnel also stated they implemented a corrective action so a similar mistake is not made again. Prior to our inspection, facility staff reviewed the housing roster on a weekly basis to ensure detainee housing assignments matched their custody level. Facility staff stated they will now conduct these checks daily.

Adams Did Not Always Document Whether Detainees Had Special Vulnerabilities

ICE 2011 PBNDS requires facilities to identify detainees with special vulnerabilities to provide appropriate housing. The Adams County Classification Policy¹⁴ and ICE 2011 PBNDS¹⁵ define detainees with special vulnerabilities as those:

- who are elderly,
- who are pregnant or nursing,
- with serious physical or mental illness or other disability,
- who would be susceptible to harm in general population due in part to their sexual orientation or gender identity; and
- who have been victims of sexual assault, torture, trafficking, or abuse.

In 12 of 45 (26 percent) initial classification records we reviewed, the interviewing officer did not document asking detainees if they had any special vulnerabilities. Staff could not answer why they did not consistently document an answer when asking detainees about special vulnerabilities. Staff told us they ask all detainees and rely on information found in ICE documents. Moreover, staff told us they ask detainees if they have been the victim of sexual abuse or sexual assault, but made no mention of the other types of special vulnerabilities they must identify in accordance with ICE standards. By not identifying detainees with special vulnerabilities, Adams is putting detainees at risk of victimization or assault.

¹³ Detainees who returned to the facility after their deportation was held up needed to be quarantined due to COVID-19 precautions.

¹⁴ Policy 18-100, Chapter 18, *Classification, Housing, Work, and Program Plan* (Sept. 3, 2019).

¹⁵ 2011 PBNDS, Section 2.2, *Custody Classification System* (Revised Dec. 2016).



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Department of Homeland Security

Adams Does Not Document the Language Used to Conduct Initial Classification Interviews

ICE standards mandate facilities provide communication assistance to detainees who have limited English proficiency through the use of interpreters, as needed.¹⁶ In all 45 initial classification records we reviewed, the staff member completing the forms did not document the language used to conduct the interview or whether the language line was used. When asked why they did not document this information, staff told us it was “understood” they use the language line to conduct the interviews. The absence of documentation of languages used during initial classification interviews left us unable to determine whether the interviews took place or were conducted in a language detainees could understand.

Adams Did Not Always Provide Timely Responses to Grievances

The 2011 PBNDS establishes procedures for detainees to file grievances with the facility regarding any aspect of their detention and requires the facility to respond within 5 days.¹⁷ At Adams, detainees can file grievances using electronic tablets or paper forms available in their housing units. Between July 1, 2020 and January 11, 2021, detainees filed 51 electronic grievances on tablets and 19 grievances on paper. Of those 70 grievances, Adams was between 1 and 5 days late in responding to 14 grievances (20 percent), of which 13 were filed via tablets and 1 was filed on paper. We spoke to the Grievance Coordinator who explained she receives and responds to electronic grievances via tablet, but does not use or have access to the log that tracks these grievances. This leaves the Grievance Coordinator without an important tool for tracking the timeliness of her responses to electronic grievances. Moreover, Adams’ policy impermissibly allows for the Grievance Coordinator to unilaterally issue an extension of up to 15 days past the required 5-day response time to a detainee’s grievance.¹⁸ The Grievance Coordinator issued this improper extension in the case of the late response to the grievance filed on paper, responding 7 days after receipt. Detainees depend on timely responses to grievances as affirmation that the facility is taking their complaints seriously and working to remedy detainee concerns.

¹⁶ 2011 PBNDS, Section 2.2, *Custody Classification System* (Revised Dec. 2016).

¹⁷ 2011 PBNDS, Section 6.2, *Grievance System* (Revised Dec. 2016).

¹⁸ CoreCivic – Adams County Correctional Center, 14-5: Inmate/Resident Grievance Procedures.



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Department of Homeland Security

Segregation Records Raise Concerns about Detainee Care

During our inspection, we reviewed Adams' documentation related to detainee care, including records and logs for detainees held in segregation. We reviewed housing records for the eight detainees in segregation as of January 11, 2021, including four detainees in administrative segregation and four detainees in disciplinary segregation. We found the facility was not consistently providing required care,¹⁹ including access to recreation, legal calls, laundry, linen exchange, mail, legal materials, commissary, and law library. We also discovered that the Special Management Unit, where segregated detainees are held, did not have drop-boxes and forms for detainees to submit requests to ICE.

Adams Did Not Provide Required Services and Privileges to Detainees in Segregation

ICE's 2011 PBNDS requires all detainees in segregation receive access to recreation, legal calls, laundry services for soiled bedding and clothing, mail, legal materials, and law library.²⁰ Administratively segregated detainees should receive access to the same privileges as those in the general population, including access to the commissary. We found segregated detainees were not consistently being provided this required care. For example, records showed:

- The eight detainees (100 percent) in segregation were not always provided with required recreation time outside their cells.
- The eight detainees (100 percent) in segregation were not always provided with required access to legal calls, laundry services for soiled bedding and clothing, mail, legal materials, and law library.
- The four detainees (100 percent) in administrative segregation did not have required access to the commissary.

Facilities must demonstrate they are following standards and providing proper care to detainees in segregation by recording all required activity in segregation logs.

Segregated Detainees Did Not Have Direct Access to an ICE Drop-Box and Paper Forms

The 2011 PBNDS requires that detention facilities provide a secure drop-box for ICE detainees to correspond directly with ICE management, to which only

¹⁹ 2011 PBNDS, Section 4.5, *Personal Hygiene*, and Section 2.12, *Special Management Units* (Revised Dec. 2016).

²⁰ 2011 PBNDS, Section 2.12, *Special Management Units* (Revised Dec. 2016).



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Department of Homeland Security

ICE personnel have access.²¹ At the time of our inspection, Adams had not installed an ICE drop-box that was directly accessible to segregated detainees and the paper request forms bin was out of stock. Facility staff explained that detainees could hand ICE requests to facility staff, who would drop the requests in the ICE drop-box in an adjacent room. However, without direct access to a secure ICE drop-box, detainees may be hesitant to submit requests or grievances to ICE for fear that facility staff may tamper with the message or punish detainees for submitting requests or grievances.

ICE Did Not Consistently Respond to Detainee Requests Timely

The 2011 PBNDS establishes procedures for detainees to submit written requests to ICE staff and requires ICE to respond within 3 business days of receipt.²² According to the ICE detainee request logs, Adams detainees submitted 1,949 requests to ICE between July 1, 2020 and January 7, 2021. ICE provided no response to 340 of these requests (17 percent) and responded to another 536 of the requests (28 percent) beyond the 3-day timeframe. Thus, the logs revealed that ICE did not meet PBNDS requirements for timely response to nearly half (876 of 1,949) of all detainee requests submitted between July 1, 2020 and January 7, 2021. Detainees may suffer harm by not receiving timely answers from ICE to important questions or concerns, such as those related to their immigration cases or detention conditions.

ICE officials told us that the missing and tardy responses occurred due to changes in how ICE processed detainee requests at Adams. From July 2020 to November 2020, ICE assigned responsibility for processing detainee requests to deportation officers temporarily stationed at Adams for 45 days, who were inexperienced with detainee populations. The frequent turnover of the officers temporarily stationed at Adams, along with their inexperience, led to a backlog of detainee requests. This backlog was exacerbated by technical issues that occurred when Adams began allowing detainees to submit electronic requests in addition to the paper requests. In November 2020, ICE reassigned processing of detainee requests to deportation officers permanently stationed in Oakdale, Louisiana, and familiar with detained populations. ICE management reported no remaining technical issues with electronic submission of detainee requests at the time of our inspection.

²¹ 2011 PBNDS, Section 2.13, *Staff-Detainee Communication* (Revised Dec. 2016).

²² 2011 PBNDS, Section 2.13, *Staff-Detainee Communication* (Revised Dec. 2016).

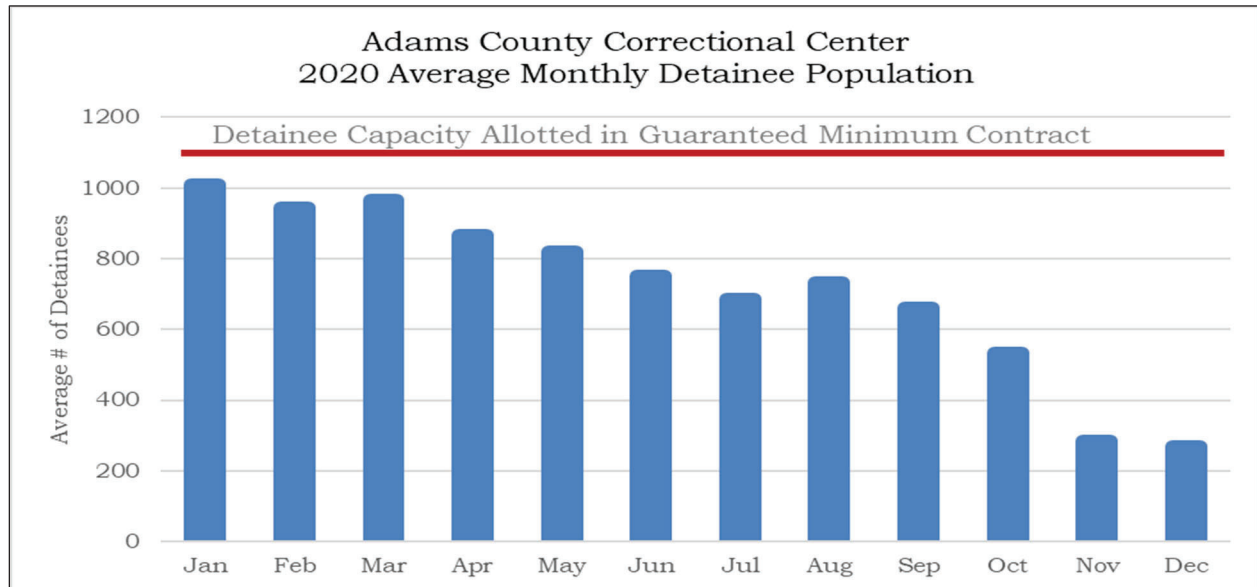


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Declining Detainee Population and ‘Guaranteed Minimum’ Contract with Adams Resulted in ICE Paying for Unused Bed Space

ICE’s contract with Adams guarantees a minimum payment of \$3,950,885.89 per month for housing up to 1,100 ICE detainees²³ and an additional \$53.98 per day, per detainee when the detainee population exceeds 1,100. As shown in Figure 3, Adams’ average daily detainee population declined throughout most of 2020 and remained below the 1,100 detainees ICE pays for at a minimum threshold allowed by the guaranteed minimum contract.

Figure 3. Declining Detainee Population at Adams in 2020



Source: OIG analysis of data provided by Adams

In 2020, 35 percent of the guaranteed bed space at Adams went unused, and the detainee population only surpassed 1,100 for 6 days.²⁴ We determined ICE paid more than \$17 million for unused bed space under the guaranteed minimum contract. As detainee populations continue to stay well below 1,100 per day, the monthly and daily costs for ICE to house each detainee increases as shown in Table 1, which details the average costs ICE paid to house each detainee.

²³ This guaranteed minimum monthly payment breaks down to a monthly cost of approximately \$3,592 per detainee or daily cost of approximately \$120 per detainee, when payment calculation is based on a 30-day month.

²⁴ From January 11 to 16, 2020, the daily detainee population exceeded 1,100, incurring \$12,253.46 in additional cost to ICE, although the detainee population did not meet capacity for the other 25 days in January.



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Table 1. Average 2020 Cost to ICE per Detainee at Adams

	Average Daily Population	Monthly Cost per Detainee	Daily Cost per Detainee
January	1,009	\$3,928.29	\$126.72
February	946	\$4,178.39	\$144.08
March	965	\$4,093.36	\$132.04
April	868	\$4,550.84	\$151.69
May	819	\$4,821.38	\$155.53
June	752	\$5,251.98	\$175.07
July	687	\$5,752.01	\$185.55
August	733	\$5,392.39	\$173.95
September	662	\$5,968.41	\$198.95
October	534	\$7,401.35	\$238.75
November	284	\$13,915.47	\$463.88
December	269	\$14,699.65	\$474.18

Source: OIG analysis of data provided by Adams

During our inspection in January and February 2021, the average detainee population at Adams continued to decline, maintaining the trend of paying the same amount for fewer beds. The January 2021 average daily detainee population was 236, while in February, it decreased to 174. Although ICE must acquire and maintain enough bed space to satisfy demand for detainee population surges, it must also strive for balance to avoid wasting funds on empty beds. As long as the detainee population remains well below the 1,100 detainee threshold provided in the guaranteed minimum contract, Adams will continue to receive full payment from ICE for housing fewer detainees.

Recommendations

We recommend the Executive Associate Director of Enforcement and Removal Operations direct the New Orleans Enforcement and Removal Field Office responsible for Adams to:

Recommendation 1: Ensure the Adams Medical Unit develops emergency care guidelines, documents patient treatment during sick call encounters, and documents interpretation and medical care provided based on laboratory testing results.

Recommendation 2: Ensure Adams meets ICE's COVID-19 requirements for wearing masks and social distancing.



OFFICE OF INSPECTOR GENERAL
Department of Homeland Security

Recommendation 3: Ensure Adams reviews classification determinations, documents detainee special vulnerabilities, and documents language used to conduct detainee interviews.

Recommendation 4: Ensure Adams establishes a grievance tracking system to ensure timely responses to grievances.

Recommendation 5: Ensure Adams provides detainees in segregation access to laundry, legal materials, mail, required recreation time outside their cells, the commissary (for those in administrative segregation), ICE request forms, and secure drop-boxes.

Recommendation 6: Establish a system to ensure timely ICE responses to requests.

Recommendation 7: Update ICE's contract with Adams to better identify requirements for detainee housing.

Management Comments and OIG Analysis

ICE concurred with all seven recommendations. ICE described corrective actions to address the issues identified in this report. Appendix B contains ICE management comments in their entirety. We also received technical comments to the draft report and revised the report as appropriate. We consider five recommendations resolved and closed, and two recommendations resolved and open. A summary of ICE's response and our analysis follows.

Recommendation 1: Ensure the Adams Medical Unit develops emergency care guidelines, documents patient treatment during sick call encounters, and documents interpretation and medical care provided based on laboratory testing results.

Response: Concur. Adams Medical Unit will continue to comply with 2011 PBNDS, and has completed actions to enhance its medical care in emergency care guidelines and documenting interpretation and medical care based on laboratory testing results.

Adams has an existing nursing chest pain protocol. On December 31, 2020, the Adams County Health Services Administrator and the Clinical Medical Authority developed an enhanced cardiac diagnostic protocol and guideline for medical providers and on January 31, 2021, completed training on this protocol and guideline. In May 2021, ICE Health Service Corps conducted a full site visit and assessed compliance with detainee medical charts. Adams scored 100 percent compliance, and ICE Health Service Corps reviewed and



OFFICE OF INSPECTOR GENERAL
Department of Homeland Security

assessed 10 charts of detainees sent to the emergency room to determine if earlier intervention would have prevented morbidity.

The Commission on Correctional Health Care and 2011 PBNDS do not require documentation of treatment rendered on the sick call request form. Sick Call Clinic is held daily by nursing staff who perform face-to-face triage, they clearly document the date, time, and disposition of sick call encounters on the sick call request form. All sick call requests with an emergent disposition are immediately evaluated by nursing staff at the time of triage and per nursing protocol, the treatment rendered is documented in the chart progress note. Urgent and routine sick call triage dispositions are referred to the Licensed Independent Provider and evaluated within 2 to 14 days based on acuity. All documentation, including the treatment rendered and the disposition of sick call encounter, is in the detainee's medical record as a clinical progress note. A Field Medical Coordinator's review of seven detainee records from the alien numbers provided by OIG, shows that Adams had 100 percent compliance with the 2011 PBNDS Medical Care 4.3.S. Sick Call standards, including progress notes documenting treatment rendered. In a May 2021, ICE Health Service Corps full site visit, Adams scored 100 percent compliance when a review of 10 charts of detainees submitting sick call requests showed that nursing staff conducted timely and appropriate evaluations.

Adams has taken steps regarding the documentation of interpretation and medical care provided based on laboratory testing results. On January 15, 2021, the Health Services Administrator provided education to providers regarding standards and expectations and emphasized that providers are required to document their interpretation of all laboratory results, the plan of care related to the results, and the immediate implementation and use of the Notification of Diagnostic Results form available through the electronic medical record.

OIG Analysis: We consider these actions responsive to the recommendation, which is resolved and closed. ICE provided documentation showing that the facility implemented documenting sick call requests and medical care provided based on testing results. ICE also provided supporting documentation of training facility management provided to medical staff to ensure proper documentation of medical care provided for detainees.

Recommendation 2: Ensure Adams meets ICE's COVID-19 requirements for wearing masks and social distancing.

Response: Concur. As of May 13, 2021, the Adams Warden implemented protocols and reinforced to all staff the proper wearing of masks and social distancing and the importance of ensuring detainees also wear masks properly



OFFICE OF INSPECTOR GENERAL

Department of Homeland Security

and are practicing social distancing. This information was communicated to staff through “recall” meetings and email and to the detainee population through town halls and with postings located within the dorms. The town halls are given to detainees shortly upon arrival once intake is completed and they are settled into their housing unit.

OIG Analysis: We consider these actions responsive to the recommendation, which is resolved and closed. ICE provided documentation showing that the facility staff initiated education plans to address mask wearing and social distancing to reduce COVID-19 transmission within the Adams facility. This corrective action addresses the intent of the recommendation to reduce transmission of COVID-19. In addition, Adams has offered, and continues to offer detainees the opportunity to obtain vaccines to reduce detainees transmitting and contracting COVID-19.

Recommendation 3: Ensure Adams reviews classification determinations, documents detainee special vulnerabilities, and documents language used to conduct detainee interviews.

Response: Concur. On January 27, 2021, Adams’s Chief of Unit Management issued a written memorandum requiring all detainee moves from isolation to general population be reviewed by the Classification Coordinator and approved by the Chief of Unit Management or designated Unit Manager in her absence. The Record Manager will run classification housing rosters daily to verify and ensure all housing classifications are accurate. In the event a discrepancy is identified, the Chief of Unit Management will be notified and will take immediate corrective action.

In addition, Adams classification staff ask detainees questions during intake using an independent screening questionnaire about special vulnerabilities. Once any special vulnerabilities are identified, the vulnerability is documented, and the classification staff sends an e-mail to notify all required staff of the classification. Also, the detainees form I-213, Record of Deportable/Inadmissible Alien, is reviewed upon intake to obtain any information about special vulnerabilities. Adams’s practice has always been the use of the language line as the primary means of communication during intake and classification interviews, as the majority of all detainees received have limited or no English proficiency. In April 2021, Adams purchased translation stamps and trained all intake staff on properly documenting the translation services used.

OIG Analysis: We consider these actions responsive to the recommendation, which is resolved and closed. ICE provided documentation showing that the facility initiated corrective actions to review classifications for all detainees



OFFICE OF INSPECTOR GENERAL
Department of Homeland Security

when moved from isolation. The facility also initiated notifications of special vulnerabilities identified for detainees and purchasing of translation stamps to document translation services used for detainee intake.

Recommendation 4: Ensure Adams establishes a grievance tracking system to ensure timely responses to grievances.

Response: Concur. Adams uses the Talton system, which enables detainees to use tablets in each dorm to log into the system with a personal identification number and send requests, questions, or grievances to ICE ERO or the facility. When a request is answered, detainees receive a notification on the tablet that they can access once they log into the system. The system automatically logs all requests and responses so that they can be retrieved at any time by a detainee. While the majority of staff and detainee communication is conducted with this system, a few request forms are still submitted using the secure drop-box in each designated housing unit.

On January 25, 2021, the Adams Warden assigned a backup grievance officer to assist with monitoring the existing grievance tracking system and secure drop-box. The grievance officers, primary and alternate, have the required access to log and track grievances submitted to the detention facility and ERO. The Warden also mandated Adams to begin following the 2011 PBNDS regarding grievances since Adams had been operating under CoreCivic's grievance policy, which allowed extensions when responding to grievances. Adams has been following the timeframe set forth by the 2011 PBNDS concerning grievances.

OIG Analysis: We consider these actions responsive to the recommendation, which is resolved and closed. ICE provided documentation showing that the facility initiated corrective actions to ensure timely responses to grievances by establishing a backup coordinator and updating grievance procedures to follow 2011 PBNDS grievance requirements.

Recommendation 5: Ensure Adams provides detainees in segregation access to laundry, legal materials, mail, required recreation time outside their cells, the commissary (for those in administrative segregation), ICE request forms, and secure drop-boxes.

Response: Concur. On April 27, 2021, Adams's Chief of Unit Management issued guidance for properly documenting the actions in the segregation unit to ensure a complete record of a detainee's activities. Adams consistently offers and makes available services such as laundry services, legal materials, mail, required recreation time outside their cells, and the commissary for those in administrative segregation. Adams also informs detainees of their ability to



OFFICE OF INSPECTOR GENERAL
Department of Homeland Security

access these services. Adams has installed a secure drop-box located in the segregation unit for the detainees to submit various request forms. In accordance with 2011 PBNDS, Section 2.12 *Special Management Unit*, Adams immediately prepares a Special Management Housing Unit Record or comparable CoreCivic Form 10-1D, Confinement Activity Report upon a detainee's placement in the Special Management Unit.

Consistent with the standard, the Confinement Activity Report records whether the detainee ate, showered, participated in recreation, and took any medication or accessed approved activities (i.e., law library, phone calls, legal calls, commissary) on a particular day. Detainees have the right to refuse these services and their refusal is noted on the segregation record. For example, if a detainee chose not to order commissary while in segregation, there would be no commissary to deliver, and the segregation records would reflect no commissary services provided for that particular day though commissary services are offered and accessible to detainees. This applies to other such activities (i.e., laundry and visitation). ICE will ensure that any services and activities are documented and whether the detainee elected to receive services.

OIG Analysis: We consider these actions responsive to the recommendation, which is resolved and closed. ICE provided documentation showing that the facility initiated corrective actions to ensure guidance outlining how facility staff should properly document the actions in the segregation unit. The facility is now ensuring detainees have the opportunity to access the required laundry services, legal materials, mail, required recreation time outside their cells, and the commissary for those in administrative segregation. The facility has also provided documentation showing that it installed a secure drop-box located in the segregation unit for detainees to submit various request forms.

Recommendation 6: Establish a system to ensure timely ICE responses to requests.

Response: Concur. Adams uses the Talton system, which enables detainees to use tablets in each dorm to log into the system with a personal identification number and send requests, questions, or grievances to ICE ERO or Adams. When a request is answered, the detainee receives a notification on the tablet, which they can access once they log into the system. The system automatically logs all requests and responses so that they can be retrieved at any time by a detainee. While the majority of staff and detainee communication is conducted using this system, a few request forms are still submitted using the secure drop-box in each designated housing unit. ICE ERO officers visit the dorms twice a week to collect all paper request forms and provide written response back to the detainees. ICE ERO will ensure all electronic and written requests and questions are responded to within the timeframe specified by the 2011



OFFICE OF INSPECTOR GENERAL
Department of Homeland Security

PBNDS. On November 20, 2020, these actions were re-enforced to detention facility staff.

OIG Analysis: We consider these actions responsive to the recommendation, which is resolved and open. We will close this recommendation when we receive documentation showing that ICE has addressed the timely response of both electronic and paper detainee requests.

Recommendation 7: Update ICE's contract with Adams to better identify requirements for detainee housing.

Response: Concur. ICE ERO Custody Management will work with the ICE Office of Acquisition Management and/or the Contracting Officer's Representative to direct the contractor to maximize social distancing opportunities when assigning detainees to unit housing and common areas under the guaranteed minimum, in order to be consistent with ICE's intent to reduce health risks related to exposure to and transmission of COVID-19. The contractor will provide a revised housing plan to be approved by ICE.

Estimated Completion Date: September 30, 2021.

OIG Analysis: We consider these actions responsive to the recommendation, which is resolved and open. We will close this recommendation when we receive documentation showing that ICE has developed and implemented a revised housing plan to better address social distancing to reduce health risks related to exposure to and transmission of COVID-19. ICE should also review contracting options if populations continue to remain less than the guaranteed minimums outlined in the contract.



OFFICE OF INSPECTOR GENERAL

Department of Homeland Security

Appendix A

Objective, Scope, and Methodology

The Department of Homeland Security Office of Inspector General (OIG) was established by the *Homeland Security Act of 2002* (Public Law 107-296) by amendment to the *Inspector General Act of 1978*.

DHS OIG initiated this inspection at Congress' direction. Prior to conducting an unannounced inspection, we review and analyze concerns raised by immigrant rights groups and complaints to the DHS OIG Hotline about conditions for aliens in ICE custody. We generally limited our scope to the 2011 PBNDS for health, safety, medical care, mental health care, grievances, classification and searches, use of segregation, use of force, language access, and staff training. We also conducted a limited review of facility compliance with COVID-19 requirements.

We conducted the inspection remotely, given the inherent risks associated with on-site inspections during the COVID-19 pandemic. We focused on elements of these standards that could be observed and evaluated remotely.

Prior to our inspection, we reviewed relevant background information, including:

- OIG Hotline complaints
- ICE 2011 PBNDS
- ICE Office of Detention Oversight reports
- Information from nongovernmental organizations
- Information provided in congressional requests

We conducted our unannounced remote inspection of Adams from January 11, 2021 to February 26, 2021. During the visit we:

- Directed the locations within the facility we would observe during a live video walkthrough. We viewed areas used by detainees including intake processing areas; medical facilities; kitchens and dining facilities; residential areas, including sleeping, showering, and toilet facilities; legal services areas, including law libraries; and recreational facilities.
- Reviewed select video surveillance footage of detainee housing areas from January 2021 and use of force incidents from July 1, 2020 to January 11, 2021.
- Reviewed facility's compliance with key health, safety, and welfare requirements of the 2011 PBNDS for classification and searches, segregation, access to medical care and mental health care, and medical



OFFICE OF INSPECTOR GENERAL

Department of Homeland Security

and nonmedical grievances, and access to translation and interpretation services.

- Reviewed the facility's pandemic response to COVID-19, including standards modified and whether ICE was notified about and approved any changes that affected facility compliance with applicable standards.
- Interviewed ICE and detention facility staff members, including key ICE operational and detention facility oversight staff, detention facility medical, segregation, classification, grievance, and compliance officers.
- Interviewed detainees held at the detention facility to evaluate compliance with 2011 PBNDS grievance procedures and grievance resolution.
- Reviewed documentary evidence, including medical files, and grievance and communication logs and files.

We contracted with a team of qualified medical professionals to conduct a comprehensive evaluation of detainee medical care at the Adams facility. We incorporated information provided by the medical contractors into our findings.

We conducted this review under the authority of the *Inspector General Act of 1978, as amended*, and according to the *Quality Standards for Inspection and Evaluation* issued by the Council of the Inspectors General on Integrity and Efficiency.



OFFICE OF INSPECTOR GENERAL
Department of Homeland Security

Appendix B
ICE Comments to the Draft Report

Office of the Chief Financial Officer


U.S. Department of Homeland Security
500 12th Street, SW
Washington, DC 20536



**U.S. Immigration
and Customs
Enforcement**

June 29, 2021

MEMORANDUM FOR: Joseph V. Cuffari, Ph.D.
Inspector General

FROM: Stephen A. Roncone 
Chief Financial Officer and
Senior Component Accountable Official

SUBJECT: Management Response to Draft Report: "Violations of
Detention Standards at Adams County Correctional Facility"
(Project No. 21-004-SRE-ICE (b))

Thank you for the opportunity to comment on this draft report. U.S. Immigration and Customs Enforcement (ICE) appreciates the work of the Office of Inspector General (OIG) in planning and conducting its review and issuing this report.

ICE is pleased to note the OIG's recognition of Adams County Correctional Facility's (ACCF) compliance with ICE's "2011 Performance-Based National Detention Standards," dated December 2016 (2011 PBNDS) regarding medical care. For example, ACCF has 24-hour nursing coverage, on-call physician coverage, an on-call mental health provider, and daily sick call. The OIG also acknowledged that ACCF took steps to prevent the spread of COVID-19 by: 1) delivering reading materials and serving meals in detainee housing units; 2) providing hand sanitizer and masks; and 3) restricting visitation and services, as well as providing each detainee 520 free telephone minutes per month to compensate for lost visitation.

ICE remains committed to continually enhancing civil detention operations to promote a safe and secure environment for detainees and staff. ICE detention standards are intended to facilitate, among other things: 1) consistent conditions of confinement; 2) access to legal representation; and 3) safe and secure operations across the detention system. The standards establish consistent program operations and management expectations, accountability for compliance, and a culture of professionalism.

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OFFICE OF INSPECTOR GENERAL

Department of Homeland Security

Management Response to Draft Report: “Violations of Detention Standards at Adams County Correctional Facility” (Project No. 21-004-SRE-ICE (b))
Page 2

It is important to note that the OIG previously highlighted ICE’s longstanding collaboration with stakeholders to improve the safety, security, and conditions of confinement for detainees, which continues today.¹ ICE utilizes a layered approach to monitor conditions at facilities, with processes in place to implement corrective actions in instances of non-compliance with ICE detention standards. For example, ICE’s detention operations are overseen by field office personnel, through inspections by ICE Office of Professional Responsibility, and via other programmatic oversight and inspections by ICE Enforcement and Removal Operations (ERO).

The draft report contained seven recommendations with which ICE concurs. Attached find our detailed response to each recommendation. ICE previously submitted technical comments addressing several accuracy, contextual, and other issues under a separate cover for OIG’s consideration.

Again, thank you for the opportunity to review and comment on this draft report. Please feel free to contact me if you have any questions.

Attachment

¹ See: OIG-18-67, “ICE’s Inspections and Monitoring of Detention Facilities Do Not Lead to Sustained Compliance or Systemic Improvements,” dated June 26, 2018.



OFFICE OF INSPECTOR GENERAL
Department of Homeland Security

Management Response to Draft Report: "Violations of Detention Standards at Adams County Correctional Facility" (Project No. 21-004-SRE-ICE (b))
Page 3

**Attachment: Management Response for Recommendations
Contained in Project No. 21-004-SRE-ICE(b)**

OIG recommended that the Executive Associate Director of ERO direct the New Orleans ERO Field Office responsible for Adams to:

Recommendation 1: Ensure the Adams Medical Unit develops emergency care guidelines, documents patient treatment during sick call encounters, and documents interpretation and medical care provided based on laboratory testing results.

Response: Concur. The ACCF Medical Unit will continue to comply with 2011 PBNDS and has completed actions to enhance its medical care in emergency care guidelines and documenting interpretation and medical care based on laboratory testing results.

ACCF has an existing nursing chest pain protocol. On December 31, 2020, the Adams County Health Services Administrator (HSA) and the Clinical Medical Authority developed an enhanced cardiac diagnostic protocol and guideline for medical providers and on January 31, 2021, completed training on this protocol and guideline. In May 2021, ICE Health Service Corps (IHSC) conducted a full site visit and assessed compliance with detainee medical charts. ACCF scored 100 percent compliance and IHSC reviewed and assessed 10 charts of detainees sent to the emergency room to determine if earlier intervention would have prevented morbidity.

ICE does not agree with the OIG's finding concerning sick call encounters. The National Commission on Correctional Health Care (NCCHC) and 2011 PBNDS do not require documentation of treatment rendered on the sick call request form. Sick Call Clinic is held daily by nursing staff who perform face-to-face triage, and as required by NCCHC, they clearly document the date, time, and disposition of sick call encounters on the sick call request form. All sick call requests with an emergent disposition are immediately evaluated by nursing staff at the time of triage and per nursing protocol, the treatment rendered is documented in the chart progress note. Urgent and routine sick call triage dispositions are referred to the Licensed Independent Provider and evaluated within 2 - 14 days based on acuity. All documentation, including the treatment rendered and the disposition of sick call encounter, is in the detainee's medical record as a clinical progress note. An IHSC Field Medical Coordinator's review of seven detainee records from the alien numbers provided by OIG, shows that ACCF had 100 percent compliance with the 2011 PBNDS Medical Care 4.3.S. Sick Call standards, including progress notes documenting treatment rendered. In a May 2021, IHSC full site visit, ACCF scored 100 percent compliance when a review of 10 charts of detainees submitting sick call requests showed that nursing staff conducted timely and appropriate evaluations.

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OFFICE OF INSPECTOR GENERAL
Department of Homeland Security

Management Response to Draft Report: “Violations of Detention Standards at Adams County Correctional Facility” (Project No. 21-004-SRE-ICE (b))
Page 4

The ACCF has taken steps regarding the documentation of interpretation and medical care provided based on laboratory testing results. On January 15, 2021, the HSA provided education to providers regarding the NCCHC’s standards and expectations. The HSA emphasized that providers are required to document their interpretation of all laboratory results, the plan of care related to the results, and the immediate implementation and use of the Notification of Diagnostic Results form available through the electronic medical record. During an IHSC full site visit in May 2021, ACCF scored 100 percent compliance when IHSC reviewed 10 charts of detainees who had laboratory testing ordered. Laboratory tests were reviewed with the detainees and chart reviews revealed an associated clinical acknowledgement and response.

ICE requests the OIG consider the recommendation resolved and closed, as implemented.

Recommendation 2: Ensure Adams meets ICE’s COVID-19 requirements for wearing masks and social distancing.

Response: Concur. As of May 13, 2021, the ACCF Warden implemented protocols and reinforced to all staff of the proper wearing of masks and social distancing and the importance of ensuring detainees also wear masks properly and are practicing social distancing. This information was communicated to staff through “recall” meetings and email and to the detainee population through town halls and with postings located within the dorms. The town halls are given to detainees shortly upon arrival once intake is completed and they are settled into their housing unit.

ICE requests the OIG consider this recommendation resolved and closed, as implemented.

Recommendation 3: Ensure Adams reviews classification determinations, documents detainee special vulnerabilities, and documents language used to conduct detainee interviews.

Response: Concur. On January 27, 2021, ACCF’s Chief of Unit Management issued a written memorandum requiring all detainee moves from isolation to general population will be reviewed by the Classification Coordinator and approved by the Chief of Unit Management or designated Unit Manager in her absence. The Record Manager will run classification housing rosters daily to verify and ensure all housing classifications are accurate. In the event a discrepancy is identified, the Chief of Unit Management will be notified and will take immediate corrective action.

In addition, ACCF classification staff ask detainees questions during intake using an independent screening questionnaire about special vulnerabilities. Once any special vulnerabilities are identified, the vulnerability is documented, and the classification staff



OFFICE OF INSPECTOR GENERAL
Department of Homeland Security

Management Response to Draft Report: “Violations of Detention Standards at Adams County Correctional Facility” (Project No. 21-004-SRE-ICE (b))

Page 5

sends an e-mail to notify all required staff of the classification. Also, the detainees form I-213, Record of Deportable/Inadmissible Alien, is reviewed upon intake to obtain any information on special vulnerabilities.

ACCF’s practice has always been the use of the language line as the primary means of communication during intake and classification interviews, as the majority of all detainees received have limited or no English proficiency. In April 2021, ACCF purchased translation stamps and trained all intake staff on properly documenting the translation services utilized.

ICE requests the OIG consider this recommendation resolved and closed, as implemented.

Recommendation 4: Ensure Adams establishes a grievance tracking system to ensure timely responses to grievances.

Response: Concur. The ACCF uses the Talton system, which enables detainees to use tablets in each dorm to log into the system with a personal identification number and send requests, questions, or grievances to ICE ERO or the ACCF. When a request is answered, the detainee receives a notification on the tablet, and they can access once they log into the system. The system automatically logs all requests and responses so that they can be retrieved at any time by a detainee. While the majority of staff and detainee communication is conducted with this system, a few request forms are still submitted using the secure drop-box in each designated housing unit.

On January 25, 2021, the ACCF Warden assigned a backup grievance officer to assist with monitoring the existing grievance tracking system and secure drop-box. The grievance officers, primary and alternate, have the required access to log and track grievances submitted to the detention facility and ERO. The Warden also mandated for ACCF to begin following the 2011 PBNDS regarding grievances since ACCF had been operating under CoreCivic’s grievance policy which allowed extensions when responding to grievances. ACCF has been following the timeframe set forth by the 2011 PBNDS concerning grievances.

ICE requests the OIG consider this recommendation resolved and closed, as implemented.

Recommendation 5: Ensure Adams provides detainees in segregation access to laundry, legal materials, mail, required recreation time outside their cells, the commissary (for those in administrative segregation), ICE request forms, and secure drop-boxes.



OFFICE OF INSPECTOR GENERAL
Department of Homeland Security

Management Response to Draft Report: “Violations of Detention Standards at Adams County Correctional Facility” (Project No. 21-004-SRE-ICE (b))

Page 6

Response: Concur. On April 27, 2021 ACCF’s Chief of Unit Management issued guidance for properly documenting the actions in the segregation unit to ensure a complete record of a detainee’s activities. ACCF consistently offers and makes available services such as laundry services, legal materials, mail, required recreation time outside their cells, and the commissary for those in administrative segregation. ACCF also informs detainees of their ability to access these services. ACCF has installed a secure drop-box located in the segregation unit for the detainees to submit various request forms.

In accordance with 2011 PBNDS, Section 2.12 Special Management Unit (SMU), ACCF immediately prepares a Special Management Housing Unit Record or comparable CoreCivic Form 10-1D, Confinement Activity Report (CAR) upon a detainee’s placement in the SMU.

Consistent with the standard, the CAR records whether or not the detainee ate, showered, participated in recreation, and took any medication or accessed approved activities (i.e., law library, phone calls, legal calls, commissary) on a particular day. Detainees have the right to refuse these services and their refusal is noted on the CAR. For example, if a detainee chose not to order commissary while in segregation, there would be no commissary to deliver, and the CAR would reflect no commissary services provided for that particular day though commissary services are offered and accessible to detainees. This applies to other such activities (i.e., laundry and visitation). ICE will ensure that any services and activities are documented and whether or not the detainee elected to receive services.

ICE requests the OIG consider this recommendation resolved and closed, as implemented.

Recommendation 6: Establish a system to ensure timely ICE responses to requests.

Response: Concur. The ACCF uses the Talton system, which enables detainees to use tablets in each dorm to log into the system with a personal identification number and send requests, questions, or grievances to ICE ERO or the ACCF. When a request is answered, the detainee receives a notification on the tablet, which they can access once they log into the system. The system automatically logs all requests and responses so that they can be retrieved at any time by a detainee. While the majority of staff and detainee communication is conducted using this system, a few request forms are still submitted using the secure drop-box in each designated housing unit. ICE ERO officers visit the dorms twice a week to collect all paper request forms and provide written response back to the detainees. ICE ERO will ensure all electronic and written requests and questions are responded to within the timeframe specified by the 2011 PBNDS. On November 20, 2020, these actions were re-enforced to detention facility staff and the ACCF.



OFFICE OF INSPECTOR GENERAL

Department of Homeland Security

Management Response to Draft Report: "Violations of Detention Standards at Adams County Correctional Facility" (Project No. 21-004-SRE-ICE (b))
Page 7

ICE requests that the OIG consider this recommendation resolved and closed, as implemented.

Recommendation 7: Update ICE's contract with Adams to better identify requirements for detainee housing.

Response: Concur. ICE ERO Custody Management will work with the ICE Office of Acquisition Management and/or the Contracting Officer's Representative to direct the contractor to maximize social distancing opportunities when assigning detainees to unit housing and common areas under the guaranteed minimum, in order to be consistent with ICE's intent to reduce health risks related to exposure to and transmission of COVID-19. The contractor will provide a revised housing plan to be approved by ICE.

Estimated Completion Date: September 30, 2021.



Appendix C
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Appendix D
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