

Adams County Detention Center Unannounced Compliance Inspection 2025-004-042

January 14-16, 2025



UNANNOUNCED COMPLIANCE INSPECTION of the ADAMS COUNTY DETENTION CENTER

Natchez, Mississippi

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COMPLIANCE INSPECTION TEAM MEMBERS

Team Lead	ODO
Senior Inspections and Compliance Specialist	ODO
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Inspections and Compliance Specialist	ODO
Section Chief	ODO
Contractor	Creative Corrections

FACILITY OVERVIEW

The U.S. Immigration and Customs Enforcement (ICE) Office of Professional Responsibility (OPR) Office of Detention Oversight (ODO) conducted an unannounced compliance inspection of the Adams County Detention Center (ACDC) in Natchez, Mississippi, from January 14 to 16, 2025. The facility opened in 2007 and is owned and operated by CoreCivic. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at ACDC in June 2019 under the oversight of ERO's Field Office Director in New Orleans (ERO New Orleans). The facility operates under the Performance-Based National Detention Standards (PBNDS) 2011 (Revised 2016).

A warden handles daily facility operations and manages support personnel. Trinity Services provides food services, CoreCivic provides medical care, and Keefe Commissary provides commissary services at the facility. The facility was accredited by the American Correctional Association in August 2019 and the National Commission on Correctional Health Care in January 2020. In June 2022, ACDC was audited for the Department of Homeland Security (DHS) Prison Rape Elimination Act (PREA) and was DHS PREA certified.

Capacity and Population Statistics	Quantity
ICE Bed Capacity ²	
Average ICE Population ³	
Adult Male Population (as of January 14, 2025)	
Adult Female Population (as of January 14, 2025)	

During its last rated inspection, in Fiscal Year (FY) 2024, ODO found 0 deficiencies.

¹ This facility holds male and female detainees with low, medium-low, medium-high, and high security classification levels for periods greater than 72 hours.

² Data Source: ERO Custody Management Division Authorized Facility List as of January 13, 2025.

³ Ibid.

UNANNOUNCED COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population (ADP) of 10 or more, and where detainees are housed for over 72 hours, to assess compliance with ICE national detention standards. While these inspections focus on facility compliance with detention standards that directly affect detainee life, health, safety, and/or well-being, in FY 2024 ODO added additional standards to the scope of each full inspection to ensure ODO inspects every standard at each facility at least once every other year.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.

In FY 2022, ODO began conducting special reviews of under 72-hour ICE detention facilities with an ADP of 1 or more detainees and over 72-hour ICE detention facilities with an ADP of 1 to 9 detainees. Additionally, ODO began conducting unannounced inspections of ICE detention facilities, regardless of ADP of detainees, as well as reviews of ICE special/emerging detention facilities/programs. As such, these facility inspections will result in an ODO Inspection Compliance Rating; however, for facilities that are not contractually obligated to an ICE NDS, those ratings will be for ERO's informational purposes. ODO will conduct a complete review of several core standards, in accordance with the facility's contractually required ICE NDS or in accordance with the ICE NDS listed in the current ERO Custody Management Division Authorized Facility List for facilities that are not contractually obligated to an ICE NDS, which may include but are not limited to Medical Care/Health Care, Medical Care (Women)/Health Care (Females), Significant Self-harm and Suicide Prevention and Intervention, Hunger Strikes, Food Service, Environmental Health and Safety, Special Management Units (SMU) or Hold Rooms (if the facility does not have an SMU), Use of Force and Restraints/Use of Physical Control Measures, and Sexual Abuse and Assault Prevention and Intervention.

Upon completion of each special review or unannounced 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 uniform corrective action plans (UCAPs); and (ii) provide senior executives with an independent assessment of facility operations. ODO's findings inform ICE executive management in their decision-making to better allocate resources across the agency's entire detention inventory.

⁴ ODO reviews the facility's compliance with selected standards in their entirety.

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

PBNDS 2011 (Revised 2016) Standards Inspected ^{5,6,7}	Deficiencies
Part 1 – Safety	
Emergency Plans	0
Environmental Health and Safety	1
Transportation (By Land)	0
Sub-Total	1
Part 2 – Security	
Admission and Release	0
Custody Classification System	0
Contraband	0
Funds and Personal Property	0
Hold Rooms in Detention Facilities	0
Key and Lock Control	2
Sexual Abuse and Assault Prevention and Intervention	0
Special Management Units	0
Staff-Detainee Communication	0
Tool Control	0
Use of Force and Restraints	0
Sub-Total	2
Part 3 – Order	•
Disciplinary System	0
Sub-Total	0
Part 4 – Care	•
Food Service	1
Medical Care	0
Medical Care (Women)	0
Significant Self-harm and Suicide Prevention and Intervention	0
Terminal Illness, Advance Directives and Death	0
Disability Identification, Assessment, and Accommodation	0
Sub-Total	1
Part 5 – Activities	-

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

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

⁷ During an unannounced inspection, ODO will review a facility's compliance with at least 10 individual standards; however, unannounced full inspections will include a review of the same standards as announced full inspections.

Recreation	0	
Visitation	0	
Sub-Total	0	
Part 6 – Justice		
Detainee Handbook	0	
Grievance System	0	
Legal Rights Group Presentations	0	
Sub-Total	0	
Part 7 – Administration and Management		
Interview and Tours	0	
Staff Training	0	
Sub-Total	0	
Total Deficiencies	4	

DETAINEE RELATIONS

ODO interviewed 40 detainees who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. All 40 detainees reported satisfaction with facility services.

UNANNOUNCED COMPLIANCE INSPECTION FINDINGS

SAFETY

ENVIRONMENTAL HEALTH AND SAFETY (EHS)

ODO interviewed the facility's safety manager, reviewed the master index of hazardous substances, the safety data sheets, and emergency phone numbers, and found the facility had not provided a copy of these documents to the local fire department (**Deficiency EHS-498**).

SECURITY

KEY AND LOCK CONTROL (KLC)

ODO observed the facility's security keys and found the facility does not use key covers for large security keys (**Deficiency KLC-11**9).

⁸ "The maintenance supervisor shall maintain this information in the safety office (or equivalent) and ensure that a copy is sent to the local fire department." See ICE PBNDS 2011 (Revised 2016), Standard, Environmental Health and Safety, Section (V)(B)(5).

⁹ "Facilities shall use key covers for large security keys to prevent detainees or other unauthorized persons from observing and duplicating them." *See* ICE PBNDS 2011 (Revised 2016), Standard, Key and Lock Control, Section (V)(A)(9).

ODO interviewed the facility's key control officer, reviewed the facility lock shop inventory, and found the facility does not inventory unassigned padlocks (**Deficiency KLC-35**¹⁰).

CARE

FOOD SERVICE (FS)

ODO reviewed the FS multi-tank conveyor machine temperature records and found facility staff recorded the following temperature readings: 50 out of 600 wash temperatures between 101- and 149-degrees Fahrenheit (F) and 57 out of 600 final rinse temperatures between 110- and 179-degrees F (**Deficiency FS-371**¹¹).

CONCLUSION

During this unannounced inspection, ODO assessed the facility's compliance with 28 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 25 of those standards. ODO found four deficiencies in the remaining three standards. Since ACDC's last rated inspection in January 2024, the facility's compliance with PBNDS 2011 (Revised 2016) has remained consistent with having 0 or relatively few deficiencies. ODO did not require a UCAP for their last inspection of ACDC, which occurred in August 2024. ODO recommends ERO New Orleans continue to work with the facility to resolve the deficiencies that remain outstanding in accordance with contractual obligations.

Compliance Inspection Results Compared	FY 2024 Full Inspection (PBNDS 2011) (Revised 2016)	FY 2025 Full Inspection (PBNDS 2011) (Revised 2016)
Standards Reviewed	29	28
Deficient Standards	0	3
Overall Number of Deficiencies	0	4
Priority Component Deficiencies	0	0
Repeat Deficiencies	0	0
Areas Of Concern	0	0
Corrective Actions	0	0
Facility Rating	Superior	Superior

See ICE PBNDS 2011 (Revised 2016), Standard, Food Service, Section (V)(J)(7)(g)(3)(c).

¹⁰ "The security key control officer shall maintain inventories of all keys, locks and locking devices in the lock shop." See ICE PBNDS 2011 (Revised 2016), Standard, Key and Lock Control, Section (V)(C).

^{11 &}quot;The following temperatures must be maintained for hot-water sanitizing: ...

c) Multi-tank, conveyor machine: wash temperature of 150 F degrees; pumped rinse, 160 F degrees; final rinse, 180 F degrees."



Office of Professional Responsibility

