Office of Professional Responsibility

California City Immigration Processing Center

Inspection 2026-001-168

August 25-27, 2026

U.S. Immigration and Customs Enforcement

INSPECTION
of the
CALIFORNIA CITY IMMIGRATION PROCESSING CENTER
California City, 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 an inspection of the California City Immigration Processing Center (CCIPC) in California City, California, from August 25 to 27, 2026..[1] The facility opened in 2025 and is owned by California City and operated by CoreCivic. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at CCIPC in 2025 under the oversight of ERO's Field Office Director in San Francisco (ERO San Francisco). The facility is a dedicated ICE detention facility and operates under National Detention Standards (NDS) 2025.

ERO has deportation officers assigned full-time to the facility. They are on-site Monday through Friday, from (b)(7)(e) A warden handles daily facility operations and manages (b)(7)(e) support personnel. Trinity Services provides food services, CoreCivic provides medical care, and Keefe Commissary Network provides commissary services at the facility. The facility does not hold any accreditations from any outside entities.

Capacity and Population Statistics	Quantity
ICE Bed Capacity.[2]	(b)(7)(e)
Average ICE Population.[3]	(b)(7)(e)
Adult Male Population (as of August 25, 2026)	
Adult Female Population (as of August 25, 2026)	(b)(7)(e)

This was ODO's first inspection of CCIPC.

[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 August 20, 2026.
[3] *Ibid.*

INSPECTION PROCESS

ODO conducts the following annual and biennial oversight inspections of ICE detention facilities to assess and rate each facility's compliance with their contractually obligated detention standards as noted in the Facility Overview section above.

- Dedicated facility: ODO conducts annual on-site inspections of dedicated inter-governmental service agreement (IGSA) facilities, contract detention facilities (CDF), family residential centers, and service processing centers.

- Non-dedicated IGSA facility:
  - For facilities with an average daily population (ADP) of 50 or more, ODO conducts biennial on-site inspections.
  - For facilities with an ADP of 50 or less,
    - If the facility has not previously had a rated ODO inspection, then ODO conducts an initial on-site inspection, and
    - If the facility has had an ODO inspection, then the facility completes a biennial ODO-assisted self-inspection process (OASIP).

- U.S. Marshal Service (USMS): USMS CDF and intergovernmental agreement facilities complete biennial OASIPs.

In FY 2025, ODO implemented OASIPs, which replaced the annual Special Review inspections ODO conducted at most low ADP and/or short-term use facilities. This new inspection framework is more reflective of the actual operation demand of facilities with a low ADP and/or short-term use. OASIP inspections focus on facility compliance with detention standard requirements that directly affect detainee life, health, safety, and/or well-being. Facilities have 30 calendar days to complete the OASIP inspection and ODO staff will go on-site for 1 day towards the end of the 30-day inspection window to observe facility conditions, interview ICE detainees, and spot-check the facility's reported findings.[4]

ODO defines a "deficiency" as any violation of detention standards, policies, or operational procedures, as applicable. ODO highlights instances when the facility resolves deficiencies prior to the completion of the ODO inspection as corrective actions. Where applicable, these corrective actions are annotated with a "C" in the *Inspection Findings* section of the report.

Upon completion of each inspection, ODO conducts a closeout briefing with facility and local ERO officials to discuss preliminary findings. ODO shares a summary of these findings with ERO management officials. Thereafter, ODO provides ICE leadership with a final report to: (i) assist ERO in developing and initiating a uniform corrective action plan (UCAP); and (ii) provide senior executives with an independent assessment of facility operations. ODO's findings inform ICE executive management in its decision-making to better allocate resources across the agency's entire detention inventory.

[4] When ODO conducts on-site inspections for non-OASIP facilities, the facility is notified 4 weeks before the inspection and ODO is on-site for 2-3 business days conducting the inspection.

FINDINGS BY NATIONAL DETENTION STANDARDS 2025 MAJOR CATEGORIES

NDS 2025 Standards Inspected[5]	Deficiencies
Part 1 - Safety	
Environmental Health and Safety	3
Sub-Total	**3**
Part 2 - Security	
Admission and Release	3
Custody Classification System	0
Facility Security and Control	0
Funds and Personal Property	0
Post Orders	1
Use of Force and Restraints	1
Special Management Units	0
Staff-Detainee Communication	0
Sexual Abuse and Assault Prevention and Intervention	1
Sub-Total	**6**
Part 4 - Care	
Food Service	1
Hunger Strikes	0
Medical Care	3
Personal Hygiene	0
Significant Self-Harm and Suicide Prevention and Intervention	1
Sub-Total	**5**
Part 5 - Activities	
Correspondence and Other Mail	0
Religious Practices	0
Telephone Access	1
Voluntary Work Program	0
Sub-Total	**1**
Part 6 - Justice	
Grievance System	3
Law Libraries and Legal Materials	0
Sub-Total	**3**
Total Deficiencies	**18**

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

DETAINEE RELATIONS

ODO interviewed 28 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. All detainees reported satisfaction with facility services.

INSPECTION FINDINGS

SAFETY

ENVIRONMENTAL HEALTH AND SAFETY (EHS)

ODO interviewed fire safety manager and unit manager and found:

- Barbers did not use clean and laundered towels and shared hand brushes to remove loose hair from detainees after barbering **(Deficiency EHS-44[6])**.
- The facility did not provide at least one lavatory and sink with hot and cold water nor was waterless hand sanitizer available in all designated barber shop areas in the housing units **(Deficiency EHS-46[7])**.
- The facility did not provide barbers with clean laundered towels to remove hair from detainees **(Deficiency EHS-47[8])**.

SECURITY

ADMISSION AND RELEASE (AR)

ODO interviewed Records Supervisor, reviewed California City Immigration Processing Center (CCIPC) Admission/Orientation policy and procedures, and 25 detainee files, and found:

- In 11 out of 12 files, the facility did not provide site-specific orientation programs to the detainees upon their arrival **(Deficiency AR-1[9])**;

[6] "Sanitation of barber operations is of the utmost concern due to the possible transfer of diseases through direct contact or by the tools, implements, and supplies including the towels, combs, and clippers. Towels must not be reused after use on one person." *See* ICE NDS 2025, Standard, Environmental Health and Safety, Section (II)(H)(1).

[7] "Sanitation of barber operations is of the utmost concern due to the possible transfer of diseases through direct contact or by the tools, implements, and supplies including the towels, combs, and clippers. Towels must not be reused after use on one person.

b. At least one lavatory/sink with hot and cold running water, or waterless hand sanitizer, will be available." *See* ICE NDS 2025, Standard, Environmental Health and Safety, Section (II)(H)(1)(b).

[8] "Sanitation of barber operations is of the utmost concern due to the possible transfer of diseases through direct contact or by the tools, implements, and supplies including the towels, combs, and clippers. Towels must not be reused after use on one person.

c. Barber operations will be provided with all equipment and facilities necessary for maintaining sanitary procedures of hair care, including containers for waste, disinfectants, disposable headrest covers, laundered towels, and haircloths." *See* ICE NDS 2025, Standard, Environmental Health and Safety, Section (II)(H)(1)(c).

[9] "Every new arrival shall undergo custody and medical screening interviews, which will include a determination as to whether the detainee is a victim of or at risk for sexual abuse or assault and a suicide risk screening; complete

- In 11 out of 12 files, the facility did not provide detainees with an orientation to the facility as soon as practicable, in a language or manner detainees understood **(Deficiency AR-22[10])**. **This is a priority component**; and
- In 12 out of 25 files, the facility did not have documentation to show detainees were provided an ICE/ERO National Detainee Handbook upon their arrival **(Deficiency AR-26[11])**.

POST ORDERS (PO)

ODO found facility staff did not consistently sign and date utility and armory post orders before assuming their posts to indicate having read and understood its provisions **(Deficiency PO-7[12])**.

USE OF FORCE AND RESTRAINTS (UOFR)

ODO reviewed an after-action review report and a video for one calculated use of force and found five facility staff members who participated did not wear personal protective equipment **(Deficiency UOFR-27[13])**.

SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION (SAAPI)

ODO reviewed the facility's SAAPI log and found in 18 out of 31 recorded SAAPI allegations, facility staff did not complete a sexual abuse and assault incident review at the conclusion of every investigation of sexual abuse and assault within 30 days. Specifically, facility staff completed incident reviews between 33 and 108 days **(Deficiency SAAPI-153[14])**.

questionnaires and other forms; attend any site-specific orientation program…" *See* ICE NDS 2025, Standard, Admission and Release, Section (II)(A).

[10] "All facilities shall provide detainees an orientation to the facility as soon as practicable in a language or manner detainees can understand." *See* ICE NDS 2025, Standard, Admission and Release, Section (II)(H).

[11] "Upon admission, every detainee will receive an ICE/ERO National Detainee Handbook." *See* ICE NDS 2025, Standard, Admission and Release, Section (II)(I).

[12] "Prior to assuming a post, officers will sign and date the post order to indicate having read and understood its provisions." *See* ICE NDS 2025, Standard, Post Orders, Section (II)(B).

[13] "Use-of-Force Team members and others participating in a calculated use of force shall wear appropriate protective gear." *See* ICE NDS 2025, Standard, Use of Force and Restraints, Section (II)(D)(2).

[14] "The facility shall conduct a sexual abuse and assault incident review at the conclusion of every investigation of sexual abuse and assault within 30 days. If an allegation was determined to be substantiated or unsubstantiated, the facility must prepare a written report within 30 days of the conclusion of the investigation recommending whether the allegation or investigation indicates that a change in policy or practice could better prevent, detect, or respond to sexual abuse and assault." *See* ICE NDS 2025, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(M)(5).

CARE

FOOD SERVICE (FS)

ODO reviewed pre-employment health screening for food workers and found the facility did not have pre-employment health screening medical examination documentation of the staff who worked in food service **(Deficiency FS-86[15])**.

MEDICAL CARE (MC)

ODO interviewed the health services administrator (HSA) and reviewed 25 detainee medical records and found:

- In 4 out of 25 medical records, detainees did not receive a comprehensive health assessment, including a physical examination and mental health screening within 14 days of their arrival at the facility **(Deficiency MC-27[16])**. **This is a priority component**;
- In 4 out of 25 medical records, detainees did not receive an initial dental screening within 14 days of their arrival at the facility **(Deficiency MC-43[17])**; and
- In 1 out of 25 medical records of detainees prescribed psychotropic medications, medical staff did not obtain separate documented informed consent forms that included a description of the medications' side effects prior to administering **(Deficiency MC-92[18])**. **This is a priority component**.

SIGNIFICANT SELF-HARM AND SUICIDE PREVENTION AND INTERVENTION (SSHSPI)

ODO interviewed HSA, reviewed SSHPI policy 13-84, Suicide Management, dated November 8, 2025, page 5, and the medical records of 10 detainees placed on suicide watch during the inspection period, and found, in 2 out of 10 records, suicide watch monitoring logs were not documented every 15 minutes or more frequently when necessary. Specifically, in 3 instances documented monitoring occurred 19-21 minutes after the last documented monitoring **(Deficiency SSHSPI-21[19])**. **This is a priority component**.

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[15] "All food service personnel (both staff and detainee) shall receive a documented preemployment medical examination." *See* ICE NDS 2025, Standard, Food Service, Section (II)(I)(3).

[16] "The facility will conduct and document a comprehensive health assessment, including a physical examination and mental health screening, on each detainee within 14 days of the detainee's arrival at the facility." *See* ICE NDS 2025, Standard, Medical Care, Section (II)(E).

[17] "An initial dental screening exam shall be performed within 14 days of the detainee's arrival." *See* ICE NDS 2025, Standard, Medical Care, Section (II)(H).

[18] "…Prior to the administration of psychotropic medications, a separate documented informed consent, that includes a description of the medications side effects, shall be obtained." *See* ICE NDS 2025, Standard, Medical Care, Section (II)(O).

[19] "…The monitoring must be documented every 15 minutes or more frequently if necessary." *See* ICE NDS 2025, Standard, Significant Self-Harm and Suicide Prevention and Intervention, Section (II)(F).

ACTIVITIES

TELEPHONE ACCESS (TA)

ODO found the facility staff do not consistently inspect the telephones daily, promptly report telephones out-of-order to the repair service, nor ensure required repairs were completed quickly **(Deficiency TA-7[20])**.

JUSTICE

GRIEVANCE SYSTEM (GS)

ODO reviewed the facility's grievance log and found:

- The facility did not consistently respond to detainee grievances within five business days **(Deficiency GS-15[21])**;
- The facility did not maintain detainee grievance logs prior to June 2026 except for medical grievances **(Deficiency GS-27[22])**. **This is a priority component**; and
- The facility did not issue a decision on the grievance within five days of receipt nor respond to an appeal of the grievance decision within 30 days **(Deficiency GS-31[23])**.

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 24 standards under NDS 2025 and found the facility in compliance with 14 of those standards. ODO found 18 deficiencies in 10 standards. This was ODO's first inspection of CCIPC so prior inspection data does not exist for ODO to perform a trend analysis. ODO recommends ERO San Francisco continue to work with the facility to resolve the deficiencies that remain outstanding in accordance with contractual obligations.

[20] "The facility shall maintain detainee telephones in proper working order. Appropriate facility staff shall inspect the telephones daily, promptly report out-of-order telephones to the repair service, and ensure required repairs are completed quickly." *See* ICE NDS 2025, Standard, Telephone Access, Section (II)(D).
[21] "Barring extraordinary circumstances, grievances shall be addressed within five business days." *See* ICE NDS 2025, Standard, Grievance System, Section (II)(A)(2)(a).
[22] "…At a minimum, the facility will maintain a Detainee Grievance Log." *See* ICE NDS 2025, Standard, Grievance System, Section (II)(E).
[23] "If a detainee files a grievance related to a sexual abuse claim, the facility shall issue a decision on the grievance within five days of receipt and shall respond to an appeal of the grievance decision within 30 days." *See* ICE NDS 2025, Standard, Grievance System, Section (II)(G).

Inspection Results Compared	Previous ODO Inspection	FY 2026 NDS 2025
Standards Reviewed	N/A	24
Deficient Standards	N/A	10
Overall Number of Deficiencies	N/A	18
Priority Component Deficiencies	N/A	5
Repeat Deficiencies	N/A	N/A
Areas Of Concern	N/A	0
Corrective Actions	N/A	0
Facility Rating	N/A	Acceptable/Adequate

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