

October 4, 2018

TO: [REDACTED]  
Assistant Director for Detention Management

FROM: [REDACTED]  
Lead Compliance Inspector  
The Nakamoto Group, Inc.

SUBJECT: **Annual Inspection of the Aurora ICE Processing Center**

The Nakamoto Group, Inc. performed an annual inspection for compliance with the ICE Performance-Based National Detention Standards (PBNDS) 2011 of the Aurora ICE Processing Center (formerly Denver CDF) in Aurora, Colorado during the period of October 2-4, 2018. This is a CDF.

The annual inspection was performed under the guidance of [REDACTED], Lead Compliance Inspector. Team Members were:

Subject Matter Field	Team Member
Security	[REDACTED]
Detainee Rights	[REDACTED]
Medical Care	[REDACTED]
Safety	[REDACTED]
Medical Care	[REDACTED]

**Type of Inspection**

This is a scheduled annual inspection which is performed to determine overall compliance with the ICE PBNDS 2011 for Over 72 hour facilities. The facility received a previous rating of Meets Standards during the September 2017 inspection.

**Inspection Summary**

The Aurora ICE Processing Center is currently accredited by:

- The American Correctional Association (ACA) – Yes
- The National Commission on Correctional Health Care (NCCHC) – Yes
- The Joint Commission (TJC) – No
- Prison Rape Elimination Act (PREA) – Yes

**Standards Compliance**

The following information is a summary of the standards that were reviewed and overall compliance that was determined as a result of the 2017 and 2018 PBNDS 2011 compliance annual inspections:



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2016 Annual Inspection	
Meets Standards	41
Does Not Meet Standards	0
Repeat Finding	0
Not Applicable	1

2017 Annual Inspection	
Meets Standards	41
Does Not Meet Standards	0
Repeat Finding	0
Not Applicable	1

The inspection team identified three (3) deficient components in the following three (3) standards:

- Hold Rooms in Detention Facilities – 1, which is a Priority component
- Special Management Units – 1, which is a Priority component
- Grievance System - 1

### Facility Snapshot/Description

The Aurora ICE Processing Center (formerly Denver CDF) is a [REDACTED] facility operated by The GEO Group, Inc. (GEO). [REDACTED]

[REDACTED] The facility is a single structure one-story building. It is surrounded by a paved road patrolled by an officer 24 hours a day. The facility perimeter is comprised of exterior walls of buildings and/or a single twelve-foot chain link fence which is supplemented with movement detection sensors. The facility is observed by 133 surveillance cameras which are continuously monitored by control center personnel. The entire facility perimeter is under camera observation. The facility is located in Aurora, Colorado, approximately fifteen miles west of Denver, Colorado. [REDACTED]

[REDACTED] Male detainees are classified low, medium low, medium high and high. Female detainees are classified low, medium low and medium high. [REDACTED]

The facility has thirteen different general population detainee housing pods ranging from four-person cells to 48-bed dormitories. There are two 48-cell segregation pods, referred to as restricted housing units (RHU). All RHU cells are single occupancy. ICE detainees are not commingled with U.S. Marshal detainees. Day rooms are furnished with a multipurpose room, television, telephones, tables and a day room. Electronic tablets are available in each housing unit. The tablets include the following information: detainee request forms, text message function, law library, detainee handbooks, religious material, video visitation, audio books, E-books, games, movies, television shows, music education materials, calculator, dictionary, news, meditation and sports. The tablets supplement the programs and services provided at the facility. Detainees stated, in summary, “that the tablets are readily available and there is rarely a waiting list to use a tablet”. Each detainee has a lockable personal property storage bin. Indoor and outdoor recreation is provided at least one hour a day, seven days a week. The outdoor recreational yards have accessible water and toilet facilities. Each housing unit is equipped with an outdoor recreation area.

During the inspection, there was one active case of chicken pox, and the detainee was housed in isolation in the medical department. The detainee's housing pod was quarantined for twenty-one days in order to monitor for additional cases. The HSA had written documentation of her email notice to the field office.



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ICE maintains an on-site presence in the facility. ICE personnel were seen talking with detainees during the inspection. The atmosphere in the housing units was relaxed and detainees openly communicated with the inspection team. Facility employees are experienced and very knowledgeable of the ICE standards, their demands and the duties of their posts. Staff interaction with detainees was direct, respectful and responsive to their requests. Detainees were orderly in their daily movements, housing unit behaviors and program/activity participation. The inspection team interviewed no less than 85 detainees. Confidential and LEP interviews were conducted. Interviews were conducted in the special management unit, kitchen, law library, dayrooms, recreation and visiting rooms. Detainees voiced no concerns regarding safety, conditions of confinement, treatment by staff, asylum requests, consulate/court access, ICE availability, telephone access, visiting privileges, law library access or food services. None expressed any concerns about their treatment and all stated they felt safe at the facility. Everyone stated they were treated respectfully by security officers. Two detainees expressed concerns regarding the treatment they were receiving for specific medical issues. These concerns were conveyed to the medical SME for follow-up. As a result of the follow up, one of the detainees was seen by medical staff and evaluated. The second detainee's medical issue requires that he be seen by a specialist at a local hospital. This requires ICE field office approval which was still pending during the inspection. The medical SME addressed this issue with the HSA who stated she would follow up with an ICE official. The SDDO was advised during the inspection. Cleanliness inside the facility was viewed as above average.

Medical and food services are provided by The GEO Group, Inc. Detainees are not charged a co-payment for medical services.

### **Areas of Concern/Significant Observations**

There were two Priority Components rated Does Not Meet Standard:

#### Hold Rooms in Detention Facilities

*Component #4* – Detainees are not held in hold rooms for more than twelve hours.

*Findings:* A review of detention intake logs revealed that intake officers had failed to enter either the time a detainee was placed in a hold room or the time a detainee was released from a hold room. Documentation was not available to determine whether or not the twelve-hour limit for holding a detainee in a hold room was within standard guidelines.

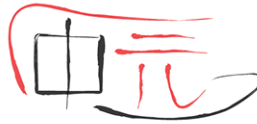
*Recommendation:* Procedures should be developed and implemented to ensure that intake officers are accurately entering the time a detainee is placed into and released from a hold room.

#### Special Management Units

*Component #18* – Health care personnel conduct face-to-face medical assessments for every detainee in an SMU at least once daily.

*Findings:* Observation of the mid-morning medication pass conducted by medical personnel revealed that not all detainees were being seen by the medical staff. Interviews conducted with the medical staff, SMU officer and SMU detainees confirmed that all detainees (in SMU) are not being seen on a daily basis. Only detainees requiring medication are being seen.

*Recommendation:* Procedures should be developed and implemented which ensure that all detainees in the SMU are seen and assessed by medical staff once each day.



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### **Recommended Rating and Justification**

The Lead Compliance Inspector recommends that the facility receive a rating of Meets Standards. The facility complies with the ICE Performance-Based National Detention Standards (PBNDS) 2011. No (0) standards were found Does Not Meet Standards and one (1) standard was Not Applicable (N/A). All remaining forty-one (41) standards were found to be in compliance.

### **LCI Assurance Statement**

The findings of Meets Standards and Does Not Meet Standards are accurately and completely documented on the G324A Inspection Form and are supported by documentation in the inspection file. An out-brief was conducted at the facility and in addition to the entire Nakamoto Group, Inc. Inspection Team, the following were present:

- ICE Officials – [REDACTED]
- Facility Staff – [REDACTED]

[REDACTED]

[REDACTED], Lead Compliance Inspector

Printed Name of LCI

October 4, 2018

Date

[REDACTED]