



U.S. Department of Homeland Security
U.S. Immigration and Customs Enforcement
Office of Professional Responsibility
Inspections and Detention Oversight Division
Washington, DC 20536-5501

Office of Detention Oversight
Contingency Compliance Inspection

Enforcement and Removal Operations
ERO El Paso Field Office

El Paso Service Processing Center
El Paso, Texas

February 8-11, 2021

CONTINGENCY COMPLIANCE INSPECTION
of the
EL PASO SERVICE PROCESSING CENTER
El Paso, Texas

TABLE OF CONTENTS

| | |
|--|----------|
| FACILITY OVERVIEW | 4 |
| COMPLIANCE INSPECTION PROCESS | 5 |
| FINDINGS BY PERFORMANCE-BASED NATIONAL DETENTION STANDARDS 2011 (REVISED 2016) MAJOR CATEGORIES | 6 |
| DETAINEE RELATIONS | 7 |
| COMPLIANCE INSPECTION FINDINGS | 8 |
| SAFETY..... | 8 |
| Emergency Plans..... | 8 |
| SECURITY | 8 |
| Admission And Release..... | 8 |
| Custody Classification System | 8 |
| Facility Security and Control..... | 9 |
| CONCLUSION | 9 |



COMPLIANCE INSPECTION TEAM MEMBERS

| | | |
|------------|---------------------------------------|----------------------|
| [REDACTED] | Acting Team Lead | ODO |
| [REDACTED] | Inspections and Compliance Specialist | ODO |
| [REDACTED] | Inspections and Compliance Specialist | ODO |
| [REDACTED] | Contractor | Creative Corrections |
| [REDACTED] | Contractor | Creative Corrections |
| [REDACTED] | Contractor | Creative Corrections |
| [REDACTED] | Contractor | Creative Corrections |

FACILITY OVERVIEW

The U.S. Immigration and Customs Enforcement (ICE) Office of Professional Responsibility (OPR) Office of Detention Oversight (ODO) conducted a compliance inspection of the El Paso Service Processing Center (EPSPC) in El Paso, Texas, from February 8 to 11, 2021.¹ The facility opened in 1966 and is owned and operated by the ICE Office of Enforcement and Removal Operations (ERO). ICE ERO began housing detainees at EPSPC in 1966 under the oversight of ERO’s Field Office Director (FOD) in El Paso (ERO El Paso). The facility operates under the Performance-Based National Detention Standards (PBNDS) 2011 (Revised 2016).

ERO has assigned deportation officers and a detention services manager to the facility. An officer in charge handles daily facility operations and is supported by █████ personnel. Global Precision Systems, LLC provides food services, ICE Health Service Corps provides medical care, and Dooley Services provides commissary services at the facility. The facility was accredited by the American Correctional Association and the National Commission on Correctional Health Care in 2019. In December 2019, EPSPC 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 Detainee Bed Capacity ² | 840 |
| Average ICE Detainee Population ³ | ████ |
| Male Detainee Population (as of 2/8/2021) | ████ |
| Female Detainee Population (as of 2/8/2021) | ████ |

During its last inspection, in Fiscal Year (FY) 2020, ODO found five deficiencies in the following areas: Admission and Release (1); Funds and Personal Property (1); Staff-Detainee Communication (1); and Use of Force and Restraints (2).

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

² Data Source: ERO Facility List Report as of February 8, 2021.

³ *Ibid.*

COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population greater than ten, and where detainees are housed for longer than 72 hours, to assess compliance with ICE national detention standards. These inspections focus solely on facility compliance with detention standards that directly affect detainee life, health, safety, and/or well-being.⁴

ODO identifies violations of ICE detention standards, ICE policies, or operational procedures as “deficiencies.” ODO also highlights instances in which 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.

Upon completion of each 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 corrective action plans; 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.

ODO was unable to conduct an on-site inspection of this facility, as a result of the COVID-19 pandemic, and instead, conducted a remote inspection of the facility. During this remote inspection, ODO interviewed facility staff, ERO field office staff, and detainees, reviewed files and detention records, and was able to assess compliance for at least 90 percent or more of the ICE national detention standards reviewed during the inspection.

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**

| PBNS 2011 (Revised 2016) Standards Inspected⁵ | Deficiencies |
|---|---------------------|
| Part 1 – Safety | |
| Emergency Plans | 2 |
| Environmental Health and Safety | 0 |
| Sub-Total | 2 |
| Part 2 – Security | |
| Admission and Release | 1 |
| Custody Classification System | 7 |
| Facility Security and Control | 1 |
| Funds and Personal Property | 0 |
| Population Counts | 0 |
| Sexual Abuse and Assault Prevention and Intervention | 0 |
| Special Management Units | 0 |
| Staff-Detainee Communication | 0 |
| Use of Force and Restraints | 0 |
| Sub-Total | 9 |
| Part 4 – Care | |
| Food Service | 0 |
| Hunger Strikes | 0 |
| Medical Care | 0 |
| Medical Care (Women) | 0 |
| Significant Self-Harm and Suicide Prevention and Intervention | 0 |
| Disability Identification, Assessment, and Accommodation | 0 |
| Sub-Total | 0 |
| Part 5 – Activities | |
| Religious Practices | 0 |
| Telephone Access | 0 |
| Sub-Total | 0 |
| Part 6 – Justice | |
| Grievance System | 0 |
| Law Libraries and Legal Material | 0 |
| Sub-Total | 0 |
| Total Deficiencies | 11 |

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

DETAINEE RELATIONS

ODO interviewed 12 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. Most detainees reported satisfaction with facility services except for the concerns listed below. ODO conducted detainee interviews via video teleconference.

Medical Care (Women): Two detainees expressed thoughts of self-harm.

- Action Taken: ODO interviewed the health services administrator and reviewed both detainee medical files. On February 9, 2021, a mental health counselor evaluated both detainees and determined they were stable and had no suicidal ideations. The mental health counselor recommended one of the detainees receive a follow-up evaluation with a psychiatric mental health nurse practitioner, which the facility scheduled to occur after the inspection.

Telephone Access: One detainee stated she wanted to make a private call to her attorney, but facility staff told her to make the call in her housing unit.

- Action Taken: The facility provided ODO with documentation, which showed the detainee did not have an attorney on file and the detainee had not submitted any requests to call an attorney.

COMPLIANCE INSPECTION FINDINGS

SAFETY

EMERGENCY PLANS (EP)

ODO reviewed facility documentation and found the Hostage Negotiation Team (HNT) does not convene for at least eight hours every month to plan and practice negotiation scenarios nor to consult with other law enforcement agencies (**Deficiency EP-96⁶**).

ODO reviewed facility documentation and found the command post, HNT, and Special Response Team does not conduct integrated training exercises every six months (**Deficiency EP-99⁷**).

SECURITY

ADMISSION AND RELEASE (AR)

ODO reviewed facility documentation and found the facility does not keep new detainee arrivals separate from the general population until facility staff classify and house the detainees, in accordance with their respective classification levels (**Deficiency AR-6⁸**).

CUSTODY CLASSIFICATION SYSTEM (CCS)

ODO reviewed the facility's policy and found the facility does not classify all detainees prior to admitting the detainees into general population (**Deficiency CCS-3⁹**).

ODO found 1 out of 12 detainee classification forms in which a supervisor did not review the classification forms for accuracy and completeness (**Deficiency CCS-31¹⁰**).

ODO reviewed the detainee roster and found the facility does not house detainees according to their classification level (**Deficiency CCS-33¹¹**).

ODO interviewed the compliance manager (CM) and found the facility does not refrain from:

⁶ "HNT members shall convene for no less than eight hours of duty time every month to plan and practice negotiation scenarios, and consult with other law enforcement agencies." *See* ICE PBNDS 2011, Standard, Emergency Plans, Section (V)(E)(5)(b)(3).

⁷ "Training exercises integrating the activities of the command post, HNT and SRT, shall occur every six months to underscore the importance of a total facility response to a hostage situation." *See* ICE PBNDS 2011, Standard, Emergency Plans, Section (V)(E)(5)(b)(5).

⁸ "For safety, security and good order of the facility, each newly arrived detainee shall be kept separated from general population until he/she is classified and housed accordingly." *See* ICE PBNDS 2011, Standard, Admission and Release, Section (V)(A).

⁹ "All detainees shall be classified upon arrival and before being admitted into the general population of the facility." *See* ICE PBNDS 2011, Standard, Custody Classification System, Section (V)(A)(1).

¹⁰ "The designated classification supervisor or facility administrator designee shall review the intake processing officer's classification files for accuracy and completeness and ensure that each detainee is assigned to the appropriate housing unit." *See* ICE PBNDS 2011, Standard, Custody Classification System, Section (V)(E).

¹¹ "All facilities shall ensure that detainees are housed according to their classification levels." *See* ICE PBNDS 2011, Standard, Custody Classification System, Section (V)(F).

- Comingling low custody level detainees with high custody level detainees (**Deficiency CCS-37¹²**).
- Comingling medium-low custody level detainees with high custody level detainees (**Deficiency CCS-39¹³**).
- Housing low custody level detainees with high custody level detainees (**Deficiency CCS-44¹⁴**).
- Housing low and medium-low custody level detainees with high custody level detainees (**Deficiency CCS-45¹⁵**).

ODO reviewed the facility's policy and practice of assigning [REDACTED] and found the facility does not have a [REDACTED] level detainees. The facility notes "ML" or "MH" on the detainee's wristband. ODO noted this as an **Area of Concern**.

FACILITY SECURITY AND CONTROL (FSC)

ODO reviewed facility documentation and found the facility does not have a written policy nor or procedures for the use of canine units (**Deficiency FSC-115¹⁶**).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 21 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 17 of those standards. ODO found 11 deficiencies in the remaining 4 standards. ODO commends facility staff for their responsiveness during this inspection. ODO recommends ERO El Paso work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations.

¹² "Low custody detainees may not be comingled with high custody detainees." See ICE PBNDS 2011, Standard, Custody Classification System, Section (V)(F)(1).

¹³ Medium custody detainees may not ordinarily be comingled with high or low custody detainees, except as specified in the section on "G. Housing Detainees with Different Classification Levels." See ICE PBNDS 2011, Standard, Custody Classification System, Section (V)(F)(2).

¹⁴ "High custody detainees may not be housed with low custody detainees." See ICE PBNDS 2011, Standard, Custody Classification System, Section (V)(G)(1).

¹⁵ "Low custody detainees and medium-low custody detainees may be housed together, and medium-high custody detainees and high custody detainees may be housed together." See ICE PBNDS 2011, Standard, Custody Classification System, Section (V)(G)(2).

¹⁶ "Each facility administrator shall establish a written policy and procedures for housing unit and personal area searches and the use of canine units." See ICE PBNDS 2011, Standard, Facility Security and Control, Section (V)(F)(3).

| Compliance Inspection Results Compared | FY 2020 (PBND 2011) (Revised 2016) | FY 2021 (PBND 2011) (Revised 2016) |
|---|---|---|
| Standards Reviewed | 20 | 21 |
| Deficient Standards | 4 | 4 |
| Overall Number of Deficiencies | 5 | 11 |
| Repeat Deficiencies | 1 | 0 |
| Areas of Concern | 1 | 1 |
| Corrective Actions | 1 | 0 |