



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

**Office of Detention Oversight
Compliance Inspection**

**Enforcement and Removal Operations
ERO Seattle Field Office**

**Tacoma ICE Processing Center
Tacoma, Washington**

November 29 – December 3, 2021

COMPLIANCE INSPECTION
of the
TACOMA ICE PROCESSING CENTER
Tacoma, Washington

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COMPLIANCE INSPECTION TEAM MEMBERS



Team Lead	ODO
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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 a compliance inspection of the Tacoma ICE Processing Center (TIPC) in Tacoma, Washington, from November 29 – December 3, 2021.¹ The facility opened in 2004 and is owned and operated by the GEO Group, Inc. (GEO). The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at TIPC in May 2004 under the oversight of ERO’s Field Office Director in Seattle (ERO Seattle). The facility operates under the Performance-Based National Detention Standards (PBNDS) 2011 (Revised 2016).

ERO has assigned deportation officers, a supervisory detention and deportation officer (SDDO), and a detention services manager to the facility. A TIPC administrator handles daily facility operations and manages █████ support personnel. GEO provides both medical and food services, and Keefe Supply Company provides commissary services at the facility. The facility was accredited by the American Correctional Association in January 2021. In December 2019, TIPC 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 November 29, 2021)	█████
Adult Female Population (as of November 29, 2021)	█████

During its last inspection, in Fiscal Year (FY) 2021, ODO found 14 deficiencies in the following areas: Admission and Release (1); Custody Classification System (1); Emergency Plans (1); Funds and Personal Property (9); and Special Management Units (2).

¹ This facility holds both 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 Facility List as of October 12, 2021.

³ *Ibid.*

COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population greater than 10, and where detainees are housed for over 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 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.

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 its 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 (PBNDS) 2011 (REVISED 2016) MAJOR CATEGORIES

PBNDS 2011 (Revised 2016) Standards Inspected ^{5,6}	Deficiencies
Part 1 - Safety	
Emergency Plans	0
Environmental Health and Safety	0
Sub-Total	0
Part 2 - Security	
Admission and Release	0
Searches of Detainees	0
Sexual Abuse and Assault Prevention and Intervention	0
Special Management Units	0
Use of Force and Restraints	0
Custody Classification System	0
Funds and Personal Property	0
Post Orders	0
Sub-Total	0
Part 4 - Care	
Food Service	0
Hunger Strikes	0
Medical Care	0
Medical Care (Women)	0
Personal Hygiene	0
Significant Self-harm and Suicide Prevention and Intervention	0
Sub-Total	0
Part 5 - Activities	
Correspondence and Other Mail	1
Trips for Non-Medical Emergencies	0
Marriage Requests	0
Voluntary Work Program	0
Sub-Total	1
Part 6 - Justice	
Legal Rights Group Presentations	0
Sub-Total	0
Part 7 - Administration and Management	
Detention Files	0
Detainee Transfers	0

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

⁶ Beginning in FY 2022, ODO instituted a process of rotating all standards on a 3-year basis. As a result, some standard components may not be present in all standards.

Interview and Tours	0
Sub-Total	0
Total Deficiencies	1

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 attempted to conduct detainee interviews via video teleconference; however, the ERO field office and facility were not able to accommodate this request due to technology issues. As such, ODO conducted the detainee interviews via telephone.

Staff-Detainee Communication: Seven detainees stated they had received their removal notices since arriving at the facility, but no one from ICE had spoken to them while awaiting removal for the past 2 months. The detainees requested to speak with ICE staff about the status of their removal notices.

- Action Taken: ODO discussed the detainees’ concerns with the SDDO, and the SDDO stated that five of the detainee cases remain in immigration court proceedings, pending decision by the immigration judge. The remaining two cases progressed to final orders, and the SDDO expects ERO will remove these two detainees within the next 30 days. The SDDO stated he met with each detainee on December 1, 2021, to discuss their concerns.

COMPLIANCE INSPECTION FINDINGS

ACTIVITIES

CORRESPONDENCE AND OTHER MAIL (COM)

ODO reviewed the detainee handbook and found the handbook did not notify detainees that facility staff shall not open, inspect, nor read outgoing special correspondence or legal mail (**Deficiency COM-19**⁷).

CONCLUSION

During this inspection, ODO assessed the facility’s compliance with 25 standards under PBNDS 2011 and found the facility in compliance with 23 of those standards. ODO found one deficiency in the remaining one standard. ODO recommends ERO work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations. ODO has not

⁷ “At a minimum, the notification shall specify: ...

5. That incoming special correspondence or legal mail may only be opened in the detainee’s presence, and may be inspected for contraband, but not read, and that outgoing special correspondence or legal mail shall not be opened, inspected or read.” See ICE PBNDS 2011 (Revised 2016), Standard, Correspondence and Other Mail, Section (V)(C)(5).

received the uniform corrective action plan for ODO’s last inspection of TIPC in June 2021.

Compliance Inspection Results Compared	FY 2021 (PBNS 2011) (Revised 2016)	FY 2022 (PBNS 2011) (Revised 2016)
Standards Reviewed	13	24
Deficient Standards	5	1
Overall Number of Deficiencies	14	1
Repeat Deficiencies	0	0
Areas Of Concern	1	0
Corrective Actions	0	0
Facility Rating	N/A	Superior