



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

**Office of Detention Oversight
Compliance Inspection
2023-001-073**

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

**Krome North Service Processing Center
Miami, Florida**

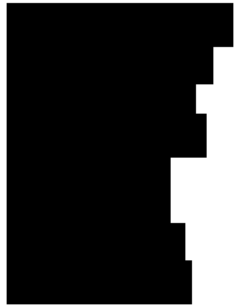
March 21-23, 2023

COMPLIANCE INSPECTION
of the
KROME NORTH SERVICE PROCESSING CENTER
Miami, Florida

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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 Krome North Service Processing Center (KNSPC) in Miami, Florida, from March 21 to 23, 2023.¹ The facility opened in 1979 and is owned by ICE and operated by Akima Global Services (AGS). The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at KNSPC in 1980 under the oversight of ERO's Field Office Director in Miami (ERO Miami). The facility operates under the Performance-Based National Detention Standards (PBNDS) 2011 (Revised 2016).

ERO has supervisory detention and deportation officers, deportation officers, and a detention service manager (DSM) assigned [REDACTED] to the facility, and they are on-site [REDACTED]. A program manager handles daily facility operations and manages [REDACTED] support personnel. AGS provides food services, ICE Health Service Corps provides medical care, and JAPLOP Enterprises, Inc. provides commissary services at the facility. The facility was accredited by the National Commission on Correctional Health Care in June 2022 and the American Correctional Association in February 2023. In January 2021, KNSPC 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	572
Average ICE Population ³	344
Adult Male Population (as of March 21, 2023)	363
Adult Female Population (as of March 21, 2023)	N/A

During its last full inspection, in Fiscal Year (FY) 2022, ODO found three deficiencies in the following areas: Detention Files (1) and Personal Hygiene (2).

¹ This facility holds male 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 March 20, 2023.

³ *Ibid.*

COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population of 10 or more, 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) inform ICE executive management in their decision-making to better allocate resources across the agency’s entire detention inventory.

ODO completed this inspection as a hybrid on-site inspection due to unforeseen circumstances, which prevented an inspection team member from arriving at the facility. With one inspector working remotely, the rest of the team completed the inspection on-site and provided a full review of all standards inspected.

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}	Deficiencies
Part 1 - Safety	
Emergency Plans	0
Environmental Health and Safety	0
Transportation (By Land)	0
Sub-Total	0
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	1
Sexual Abuse and Assault Prevention and Intervention	0
Special Management Units	0
Tool Control	0
Use of Force and Restraints	0
Sub-Total	1
Part 3 - Order	
Disciplinary System	0
Sub-Total	0
Part 4 - Care	
Food Service	0
Medical Care	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	0
Part 5 - Activities	
Correspondence and Other Mail	0
Recreation	0
Visitation	1

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.

Sub-Total	1
Part 6 - Justice	
Detainee Handbook	0
Sub-Total	0
Part 7 - Administration and Management	
Staff Training	0
Sub-Total	0
Total Deficiencies	2

DETAINEE RELATIONS

ODO interviewed 25 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.

Medical Care: One detainee stated he submitted a medical request but had not been evaluated.

- Action Taken: ODO interviewed the facility's health services administrator, reviewed the detainee's medical file, and found the detainee arrived at the facility on March 9, 2023, with medication for shoulder pain. Medical staff completed the detainee's initial medical evaluation and prescribed Motrin (600 mg), four times a day, and menthol methyl-salicylate cream, as needed for pain, through April 5, 2023. On March 19, 2023, the detainee submitted a medical request for pain in the right shoulder and left elbow. On March 22, 2023, medical staff evaluated the detainee, advised him to continue taking current medications, educated the detainee on stretching techniques and the proper procedure to submit a medical request. The detainee verbalized understanding the treatment plan.

Medical Care: One detainee stated he receives no fruit with his diet.

- Action Taken: ODO interviewed food service and healthcare program managers, reviewed the detainee's medical file and the facility's daily, five-week meal menu, and found the medical staff prescribed the detainee a low sodium diet to include fruit with his meals on January 25, 2023.

COMPLIANCE INSPECTION FINDINGS

SECURITY

KEY AND LOCK CONTROL (KLC)

ODO observed KNSPC's facility operations, interviewed a KNSPC facility operations specialist, and found the facility [REDACTED] (Deficiency KLC-11⁷).

ACTIVITIES

VISITATION (V)

ODO interviewed KNSPC's assistant project manager, reviewed the visitation policy and legal visitor's logbook, and found the logbook did not include the on-file status of a detainee's Notice of Entry of Appearance as Attorney or Accredited Representative, Form G-28 (Deficiency V-99⁸).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 24 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 22 of those standards. ODO found two deficiencies in the remaining two standards. Since KNSPC's last full inspection in October 2021, the facility has shown consistent compliance with the PBNDS 2011 (Revised 2016). KNSPC went from two deficient standards and three deficiencies in October 2021 to two deficient standards and two deficiencies during this most recent full inspection. ODO did not inspect the Key and Lock Control and the Visitation standards during the FY 2022 full inspection as they were not FY 2022 core standards, and these standards accounted for both deficiencies during this most recent full inspection. The daily ERO Miami on-site presence and the DSM assigned to KNSPC likely contributed to the facility's sustained performance. ODO did not receive the uniform corrective action plan for ODO's last full inspection of KNSPC in October 2021. ODO recommends ERO continue to work with the facility to resolve the remaining deficiencies in accordance with contractual obligations.

⁷ "Facilities shall use [REDACTED]" See ICE PBNDS 2011 (Revised 2016), Standard, Key and Lock Control, Section [REDACTED].

⁸ "Log entries shall include the following information: ...
g. whether the detainee currently has a G-28 on file."

See ICE PBNDS 2011 (Revised 2016), Standard, Visitation, Section (V)(J)(14)(g).

Compliance Inspection Results Compared	FY 2022 Full Inspection (PBNDS 2011) (Revised 2016)	FY 2023 Full Inspection (PBNDS 2011) (Revised 2016)
Standards Reviewed	23	24
Deficient Standards	2	2
Overall Number of Deficiencies	3	2
Priority Component Deficiencies	N/A	0
Repeat Deficiencies	0	0
Areas Of Concern	0	0
Corrective Actions	0	0
Facility Rating	Superior	Superior