



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
2024-001-233**

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

**Tacoma ICE Processing Center
Tacoma, Washington**

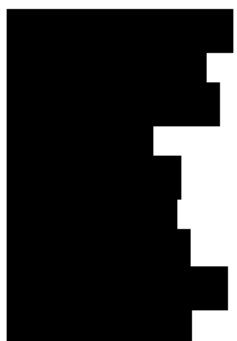
January 23-25, 2024

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 January 23 to 25, 2024.¹ The facility opened in 2001 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 2004 under the oversight of ERO's Field Office Director (FOD) in Seattle (ERO Seattle). The facility operates under the Performance-Based National Detention Standards (PBNDS) 2011 (Revised 2016).

[REDACTED] A facility administrator handles daily operations and manages support personnel. GEO provides food services, ICE Health Service Corps provides medical care, and Keefe Commissary provides commissary services at the facility. The facility was accredited by the National Commission on Correctional Health Care in January 2021 and the American Correctional Association (ACA) in April 2021. In January 2023, 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	[REDACTED]
Average ICE Population ³	[REDACTED]
Adult Male Population (as of January 23, 2024)	[REDACTED]
Adult Female Population (as of January 23, 2024)	[REDACTED]

During its last full inspection, in Fiscal Year (FY) 2023, ODO found 1 deficiency in the following area: Environmental Health and Safety (1).

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 January 22, 2024.

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. While these inspections focus on facility compliance with detention standards that directly affect detainee life, health, safety, and/or well-being, in FY 2024 ODO added additional standards to the scope of each full inspection to ensure ODO inspects every standard at each facility at least once every other year.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 their decision-making to better allocate resources across the agency’s entire detention inventory.

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	1
Sub-Total	1
Part 2 - Security	
Admission and Release	0
Custody Classification System	0
Facility Security and Control	2
Funds and Personal Property	0
Population Counts	0
Post Orders	2
Searches of Detainees	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	4
Part 4 - Care	
Food Service	0
Hunger Strikes	0
Medical Care	0
Medical Care (Women)	0
Personal Hygiene	2
Significant Self-harm and Suicide Prevention and Intervention	0
Sub-Total	2
Part 5 - Activities	
Correspondence and Other Mail	0
Trips for Non-Medical Emergencies	0
Marriage Requests	0
Religious Practices	1
Telephone Access	3
Voluntary Work Program	0
Sub-Total	4

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

⁶ Beginning in FY 2024, ODO instituted a process of rotating all standards every other year. As a result, some standards may not be present in all inspections.

Part 6 - Justice	
Grievance System	0
Law Libraries and Legal Material	0
Sub-Total	0
Part 7 - Administration and Management	
Detention Files	0
Detainee Transfers	0
Sub-Total	0
Total Deficiencies	11

DETAINEE RELATIONS

ODO interviewed 44 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. All 44 detainees reported satisfaction with facility services.

COMPLIANCE INSPECTION FINDINGS

SAFETY

ENVIRONMENTAL HEALTH AND SAFETY (EHS)

ODO observed 21 detainee housing units and found in 2 out of 21 units, the facility did not maintain detainee-to-toilet ratios according to ACA Regulation 4-ALDF-4B-08, which requires a detainee to toilet ration of 12:1 for males and 8:1 for females. Specifically, unit B1 housed 31 male detainees with 2 toilets available and unit C1 housed 36 female detainees with 4 toilets available (**Deficiency EHS-1**⁷).

SECURITY

FACILITY SECURITY AND CONTROL (FSC)

ODO reviewed 21 housing unit logs and found in 9 out of 21 logs, no documentation of weekly visits by the facility administrator nor assistant facility administrator for January 2024 (**Deficiency FSC-81**⁸).

ODO reviewed the facility's FSC program and the shift supervisor's daily log and found no monthly fence-check by the chief of security for August 2023 and no monthly fence-checks by the

⁷ "Environmental health conditions shall be maintained at a level that meets recognized standards of hygiene, including those from the:

a. American Correctional Association."

See ICE PBNDS 2011 (Revised 2016), Standard, Environmental Health and Safety, Section (V)(A)(1)(a).

⁸ "The facility administrator, designated assistant facility administrator, supervisors and others designated by the facility administrator shall be required to visit all housing units weekly at minimum to observe living conditions and interact informally with detainees. Such visitors shall record their visits by initialing the housing unit log." See ICE PBNDS 2011 (Revised 2016), Standard, Facility Security and Control, Section (V)(D)(2).

maintenance supervisor August 2023 through January 2024 (**Deficiency FSC-114⁹**).

POST ORDERS (PO)

ODO reviewed 25 facility post orders and found in 4 out of 25 orders, the last page did not have the facility administrator's signature and date (**Deficiency PO-11¹⁰**).

ODO reviewed 25 facility post orders and found 24 out of 25 orders were not current nor dated between November 1, 2021, and December 29, 2022 (**Deficiency PO-30¹¹**).

CARE

PERSONAL HYGIENE (PH)

ODO observed 21 detainee housing units and found in 2 out of 21 units, an inadequate number of toilets. Specifically, unit B1 housed 31 male detainees with 2 toilets and unit C1 housed 36 female detainees with 4 toilets, which exceeds the ACA requirement for detainee to toilet ratios of 12:1 for males and 8:1 for females (**Deficiency PH-32¹²**).

ODO observed 21 detainee housing units and found in 2 out of 21 units, the facility did not provide toilets at the minimum ratio of the ACA Expected Practice 4-ALDF-4B-08, 12:1 for males and 8:1 for females. Specifically, unit B1 housed 31 male detainees with 2 toilets and unit C1 housed 36 female detainees with 4 toilets (**Deficiency PH-33¹³**).

ACTIVITIES

RELIGIOUS PRACTICES (RP)

ODO observed in 3 out of 21 housing units, no postings of current religious program schedules, posted in a language understood by most detainees (**Deficiency RP-32¹⁴**).

⁹ "Perimeter inspections shall occur frequently, but at irregular times, as follows: ...

d. The facility maintenance supervisor and Chief of Security shall check the fence monthly, documenting the results in the shift supervisor's daily log."

See ICE PBNDS 2011 (Revised 2016), Standard, Facility Security and Control, Section (V)(F)(2)(d).

¹⁰ "The facility administrator (or designee) shall:

1. Approve, sign and date each Post Order on the last page of each section."

See ICE PBNDS 2011 (Revised 2016), Standard, Post Orders, Section (V)(C)(1).

¹¹ "Post Orders shall be kept current at all times. Post orders shall be formally reviewed annually, at a minimum, and updated as needed" See ICE PBNDS 2011 (Revised 2016), Standard, Post Orders, Section (V)(G).

¹² "Detainees shall be provided:

1. An adequate number of toilets, 24 hours per day, which can be used without staff assistance when detainees are confined to their cells or sleeping areas."

See ICE PBNDS 2011 (Revised 2016), Standard, Personal Hygiene, Section (V)(E)(1).

¹³ "ACA Expected Practice 4-ALDF-4B-08 requires that toilets be provided at a minimum ratio of one for every 12 male detainees or one for every 8 female detainees."

See ICE PBNDS 2011 (Revised 2016), Standard, Personal Hygiene, Section (V)(E)(1).

¹⁴ "Current program schedules shall be posted on all unit and detainee bulletin boards in languages understood by a majority of detainees." See ICE PBNDS 2011 (Revised 2016), Standard, Religious Practices, Section (V)(D).

TELEPHONE ACCESS (TA)

ODO observed the TA postings in 21 housing units and found in 21 out of 21 housing units the following deficiencies:

- No current pro bono legal service information provided by ERO Seattle (**Deficiency TA-12¹⁵**);
- No current pro bono legal service information provided by the FOD (**Deficiency TA-36¹⁶**); and
- No posted updated list of pro bono legal services information (**Deficiency TA-37¹⁷**).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 29 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 23 of those standards. ODO found 11 deficiencies in the remaining 6 standards. Since TIPC's last full inspection in February 2023, the facility has trended down. TIPC went from 1 deficient standard and 1 deficiency in February 2023 to 6 deficient standards and 11 deficiencies during the most recent inspection. ODO did not review FSC, PO, PH, RS, nor TA standards during the February 2023 inspection as they were not FY 2023 core standards, and these standards accounted for 10 out of 11 deficiencies found during this most recent inspection. ODO recommends ERO Seattle continue to work with the facility to resolve the deficiencies that remain outstanding in accordance with contractual obligations.

Compliance Inspection Results Compared	FY 2023 Full Inspection (PBNDS 2011) (Revised 2016)	FY 2024 Full Inspection (PBNDS 2011) (Revised 2016)
Standards Reviewed	25	29
Deficient Standards	1	6
Overall Number of Deficiencies	1	11
Priority Component Deficiencies	0	0
Repeat Deficiencies	0	0
Areas Of Concern	0	0
Corrective Actions	0	0
Facility Rating	Superior	Acceptable/Adequate ¹⁸

¹⁵ "All Field Offices are responsible for ensuring facilities which house ICE detainees under their jurisdiction are provided with current pro bono legal service information." See ICE PBNDS 2011(Revised 2016), Standard, Telephone Access, Section (V)(A)(3).

¹⁶ "The Field Office Director shall ensure that all information is kept current and is provided to each facility." See ICE PBNDS 2011 (Revised 2016), Standard, Telephone Access, Section (V)(E).

¹⁷ "Updated lists need to be posted in the detainee housing units." See ICE PBNDS 2011 (Revised 2016), Standard, Telephone Access, Section (V)(E).

¹⁸ ODO revised its rating system at the end of FY 2023, and beginning in FY 2024, facilities rated as "Superior" will have no or very minimal deficiencies and will have no repeat or priority component deficiencies.