

# Office of Professional Responsibility

## Krome North Service Processing Center Compliance Inspection 2025-001-017

April 29-May 1, 2025



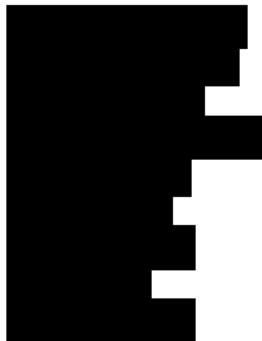
U.S. Immigration  
and Customs  
Enforcement

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

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## COMPLIANCE INSPECTION TEAM MEMBERS

	Team Lead	ODO
	Senior Inspections and Compliance Specialist	ODO
	Senior Inspections and Compliance Specialist	ODO
	Senior Inspections and Compliance Specialist	ODO
	Senior Inspections and Compliance Specialist	ODO
	Contractor	Creative Corrections
	Contractor	Creative Corrections
	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 Krome North Service Processing Center (KNSPC) in Miami, Florida, from April 29 to May 1, 2025.<sup>1</sup> The facility opened in 1979 and is owned by ICE and operated by Akima Global Services. 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).

[REDACTED] A program manager handles daily facility operations and manages support personnel. Akima Global Services 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 October 2024 and American Correctional Association in February 2023. In July 2023, 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 <sup>2</sup>	[REDACTED]
Average ICE Population <sup>3</sup>	[REDACTED]
Adult Male Population (as of April 29, 2025)	[REDACTED]
Adult Female Population (as of April 29, 2025)	[REDACTED]

During its last rated inspection, in Fiscal Year (FY) 2024, ODO found 5 deficiencies in the following areas: Hunger Strikes (3) and Medical Care (2).

<sup>1</sup> This facility holds male detainees with low, medium-low, medium-high and high security classification levels for periods greater than 72 hours.

<sup>2</sup> Data Source: ERO Custody Management Division Authorized Facility List as of April 28, 2025.

<sup>3</sup> *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.<sup>4</sup>

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.

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<sup>4</sup> 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 Inspected <sup>5,6</sup>	Deficiencies
<b>Part 1 - Safety</b>	
Emergency Plans	0
Environmental Health and Safety	1
Transportation (By Land)	0
<b>Sub-Total</b>	<b>1</b>
<b>Part 2 - Security</b>	
Admission and Release	0
Custody Classification System	0
Contraband	0
Funds and Personal Property	0
Hold Rooms in Detention Facilities	7
Key and Lock Control	0
Sexual Abuse and Assault Prevention and Intervention	0
Special Management Units	0
Staff-Detainee Communication	1
Tool Control	0
Use of Force and Restraints	0
<b>Sub-Total</b>	<b>8</b>
<b>Part 3 - Order</b>	
Disciplinary System	0
<b>Sub-Total</b>	<b>0</b>
<b>Part 4 - Care</b>	
Food Service	0
Medical Care	5
Medical Care (Women)	0
Significant Self-harm and Suicide Prevention and Intervention	0
Terminal Illness, Advance Directives and Death	0
Disability Identification, Assessment, and Accommodation	0
<b>Sub-Total</b>	<b>5</b>
<b>Part 5 - Activities</b>	
Recreation	0
Visitation	0
<b>Sub-Total</b>	<b>0</b>

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

<sup>6</sup> 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.

<b>Part 6 - Justice</b>	
Detainee Handbook	0
Grievance System	0
Legal Rights Group Presentations	0
<b>Sub-Total</b>	<b>0</b>
<b>Part 7 - Administration and Management</b>	
Interview and Tours	0
Staff Training	0
<b>Sub-Total</b>	<b>0</b>
<b>Total Deficiencies</b>	<b>14</b>

## DETAINEE RELATIONS

ODO interviewed 57 detainees, who each voluntarily agreed to participate. ODO requested interviews with six additional detainees; however, all six detainees declined ODO’s request for an interview. None of the detainees made allegations of discrimination, mistreatment, or abuse. Most detainees reported satisfaction with facility services except for the concern listed below.

*Hold Rooms in Detention Facilities:* All 57 detainees ODO interviewed complained of excessive hold times prior to the facility moving the detainees to their assigned housing units.

- **Action Taken:** On May 1, 2025, at 8:45 a.m., ODO observed the door sheets for hold rooms (HRs) 4, 5, and 6 which showed detainees entered the HRs on April 30, 2025, at 9:13 p.m., 7:05 p.m., and 3:48 p.m., respectively. By 3:30 p.m. on May 1, 2025, ODO observed the same detainees were still in HRs 4, 5, and 6, resulting in 18, 20, and 23 hour hold times, respectively, which exceeded the 12-hour limit for HRs. Also, ODO noted facility staff did not log detainee placement activity in any of the HRs since February 19, 2025. Further, ODO found detainees did not receive a tuberculosis (TB) screening nor a medical evaluation within required timeframes once they arrived at KNSPC. ODO cited these findings as deficiencies in the *Hold Rooms in Detention Facilities* and *Medical Care* sections of this report.

## COMPLIANCE INSPECTION FINDINGS

### SAFETY

#### ENVIRONMENTAL HEALTH AND SAFETY (EHS)

ODO observed 12 housing units and found the following issues:

- In 9 out of 12 units, detainee to toilet ratios exceeded the 12 to 1 standard with 14 to 1;
- In 9 out of 12 units, detainee to shower ratios exceeded the 14 to 1 standard with 17 to 1; and

- In 4 out of 12 units, detainee to sink ratios exceeded the 12 to 1 standard with 14 to 1 (**Deficiency EHS-1<sup>7</sup>**).

## SECURITY

### **HOLD ROOMS IN DETENTION FACILITIES (HRDF)**

ODO reviewed HRDF procedures, observed six HRs for detainees, and found the following deficiencies:

- In 2 out of 6 HRs, HRs exceeded the 25-person capacity per hold room. Specifically, HR 4 held 37 detainees and HR 5 held 28 detainees (**Deficiency HRDF-3<sup>8</sup>**);
- In 3 out of 6 HRs, hold times exceeded the 12-hour HR limit. Specifically, HRs 4, 5, and 6 exceeded the limit by at least 6 hours as noted previously (**Deficiency HRDF-24<sup>9</sup>**). **This is a priority component;**
- In 6 out of 6 HRs, no HR detention log recordings of detainee placement activity since February 19, 2025<sup>10</sup> (**Deficiency HRDF-44<sup>11</sup>**);
- In 6 out of 6 HRs, no detention log recording detainee name, sex, age, A-number, nationality, reason for placement, time in, time out, nor date and time of new age determination (**Deficiency HRDF-45<sup>12</sup>**);
- In 6 out of 6 HRs, no detention log recording meal times, visual checks, nor security concerns and comments (**Deficiency HRDF-46<sup>13</sup>**);

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<sup>7</sup> “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).

<sup>8</sup> “Multiple-occupant hold rooms shall provide an additional seven square feet of unencumbered space for each additional detainee.” See ICE PBNDS 2011 (Revised 2016), Standard, Hold Rooms in Detention Facilities, Section (V)(A)(2).

<sup>9</sup> “An individual may not be held in a hold room for more than 12 hours.” See ICE PBNDS 2011 (Revised 2016), Standard, Hold Rooms in Detention Facilities, Section (V)(B).

<sup>10</sup> KNSPC had a waiver to not log detainee placement; however, it was only for February 19, 2025.

<sup>11</sup> “Each facility shall maintain a detention log (manual or electronic) into which the hold room officer shall immediately enter specific information on an ICE/ERO detainee’s placement in a hold room.” See ICE PBNDS 2011 (Revised 2016), Standard, Hold Rooms in Detention Facilities, Section (V)(D)(2).

<sup>12</sup> “The detention log shall record each detainee’s:

- a. name;
- b. sex;
- c. age;
- d. A-number;
- e. nationality;
- f. reason for placement;
- g. time in;
- h. time out; and
- i. date and time of new age determination.”

See ICE PBNDS 2011 (Revised 2016), Standard, Hold Rooms in Detention Facilities, Section (V)(D)(2)(a-i).

<sup>13</sup> “The log shall also provide space to record meal times, visual checks, security concerns (which may also necessitate an incident report) and comments.” See ICE PBNDS 2011 (Revised 2016), Standard, Hold Rooms in Detention Facilities, Section (V)(D)(2).



- In 6 out of 6 HRs, no detention log recording when officers offered a meal to any detainee held in the HR for more than 6 hours (**Deficiency HRDF-47<sup>14</sup>**); and
- In 6 out of 6 HRs, no detention log recording to determine if officers questioned newly arrived detainees to determine when the detainee last ate, and if appropriate, to provide a meal soon after placement in the HR (**Deficiency HRDF-48<sup>15</sup>**).

ODO observed detainees sleeping on HR floors without pillows or blankets due to the HRs being over capacity as noted previously. ODO verified the facility did not permit bunks, cots, beds and other sleeping apparatus inside the HRs. ODO noted this practice as an **Area of Concern**.

## STAFF-DETAINEE COMMUNICATION (SDC)

ODO reviewed 3,740 detainee requests to ERO Miami and found in 330 out of 3,740 requests, no response to the requests within 3 business days. Specifically, responses ranged from 12- to 41-business days after receipt (**Deficiency SDC-16<sup>16</sup>**).

## CARE

### MEDICAL CARE (MC)

ODO interviewed the health services administrator, reviewed the annual staff plan, and found a shortage of ■ medical staff positions required to support MC standards (**Deficiency MC-19<sup>17</sup>**).

ODO reviewed ■ detainee medical records and found in ■ out of ■ records, the following deficiencies:

- Medical staff did not complete the mental and medical health screening for new arrivals (**Deficiency MC-28<sup>18</sup>**). **This is a repeat deficiency and priority component;**
- Medical staff did not complete TB screenings (**Deficiency MC-29<sup>19</sup>**);

<sup>14</sup> “Officers shall offer a meal to any adult held in a hold room for more than six hours.” See ICE PBNDS 2011 (Revised 2016), Standard, Hold Rooms in Detention Facilities, Section (V)(D)(3)(a).

<sup>15</sup> “Officers shall question newly arrived individuals to determine when he/she last ate, and, if appropriate, provide a meal soon after arrival in the hold room.” See ICE PBNDS 2011 (Revised 2016), Standard, Hold Rooms in Detention Facilities, Section (V)(D)(3)(a).

<sup>16</sup> “The ICE/ERO staff member receiving the request shall normally respond in person or in writing as soon as possible and practicable, but no later than within three (3) business days of receipt.” See ICE PBNDS 2011 (Revised 2016), Standard, Staff-Detainee Communication, Section (V)(B)(1)(a).

<sup>17</sup> “All facilities shall provide medical staff and sufficient support personnel to meet these standards.” See ICE PBNDS 2011 (Revised 2016), Standard, Medical Care, Section (V)(B).

<sup>18</sup> “As indicated in this standard below in section “J. Medical and Mental Health Screening of New Arrivals,” screening for TB is initiated at intake and in accordance with Center for Disease Control and Prevention (CDC) guidelines.” See ICE PBNDS 2011 (Revised 2016), Standard, Medical Care, Section (V)(C)(2).

<sup>19</sup> “All new arrivals shall receive TB screening within 12 hours of intake and in accordance with CDC guidelines (www.cdc.gov/tb).” See ICE PBNDS 2011 (Revised 2016), Standard, Medical Care, Section (V)(C)(2).

- A health care provider did not complete an initial medical, dental, nor health screening (**Deficiency MC-103.<sup>20</sup>**). **This is a priority component;** and
- Medical staff did not obtain informed consent for health care services upon admission into the facility (**Deficiency MC-238.<sup>21</sup>**).

## CONCLUSION

During this inspection, ODO assessed the facility’s compliance with 28 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 24 of those standards. ODO found 14 deficiencies in the remaining 4 standards. Since KNSPC’s last rated inspection in March 2024, the facility’s overall compliance with PBNDS 2011 (Revised 2016) has trended downward. KNSPC went from 2 deficient standards and 5 deficiencies in March 2024 to 4 deficient standards and 14 deficiencies during this most recent inspection. ODO received a completed uniform corrective action plan for its last inspection in March 2024, which may not have been effective in resolving the previous deficiencies ODO cited. ODO recommends ERO Miami continue to work with the facility to resolve the remaining deficiencies in accordance with contractual obligations.

<b>Compliance Inspection Results Compared</b>	<b>FY 2024 Full Inspection (PBNDS 2011) (Revised 2016)</b>	<b>FY 2025 Full Inspection (PBNDS 2011) (Revised 2016)</b>
Standards Reviewed	26	28
Deficient Standards	2	4
Overall Number of Deficiencies	5	14
Priority Component Deficiencies	0	3
Repeat Deficiencies	0	1
Areas Of Concern	0	1
Corrective Actions	0	0
Facility Rating	Superior	Acceptable/Adequate

<sup>20</sup> “As soon as possible, but no later than 12 hours after arrival, all detainees shall receive, by a health care provider or a specially trained detention officer, an initial medical, dental and mental health screening and be asked for information regarding any known acute or emergent medical conditions.” See ICE PBNDS 2011 (Revised 2016), Standard, Medical Care, Section (V)(J).

<sup>21</sup> “Upon admission at the facility, documented informed consent shall be obtained for the provision of health care services.” See ICE PBNDS 2011 (Revised 2016), Standard, Medical Care, Section (V)(AA)(1).



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