



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**

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

**Buffalo (Batavia) Service Processing Center
Batavia, New York**


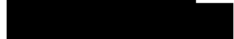
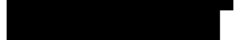
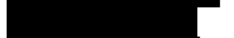
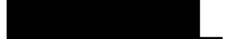
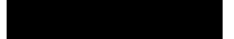
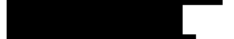
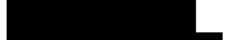
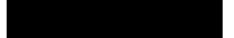
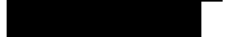
December 13-15, 2022

COMPLIANCE INSPECTION
of the
BUFFALO (BATAVIA) SERVICE PROCESSING CENTER
Batavia, New York

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COMPLIANCE INSPECTION TEAM MEMBERS

	Acting Team Lead	ODO
	Inspections and Compliance Specialist	ODO
	Inspections and Compliance Specialist	ODO
	Inspections and Compliance Specialist	ODO
	Section Chief	ODO
	Writer/Editor	ODO
	Contractor	Creative Corrections
	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 Buffalo (Batavia) Service Processing Center (BSPC) in Batavia, New York, from December 13 to 15, 2022.¹ The facility opened in 1998 and is owned by ICE and operated by Akima Global Services (AGS), LLC. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at BSPC in 1998 under the oversight of ERO’s Field Office Director in Buffalo (ERO Buffalo). The facility operates under the Performance-Based National Detention Standards (PBNDS) 2011 (Revised 2016).

ERO has assigned deportation officers (DO) and a detention services manager to the facility. An officer in charge handles daily facility operations and manages [REDACTED] support personnel. AGS provides food services, ICE Health Services Corps (IHSC) provides medical care, and Trinity Services provides commissary services at the facility. The facility was accredited by the American Correctional Association in August 2017 and the National Commission on Correctional Health Care in May 2019. In June 2021, BSPC 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 December 13, 2022)	[REDACTED]
Adult Female Population (as of December 13, 2022)	[REDACTED]

During its last inspection, in Fiscal Year (FY) 2022, ODO found 11 deficiencies in the following areas: Detainee Transfers (1); Emergency Plans (1); Hunger Strikes (1); Medical Care (1); Personal Hygiene (1); Significant Self-harm and Suicide Prevention and Intervention (1); Special Management Units (1); and Use of Force and Restraints (4).

¹ This facility holds female and 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 December 5, 2022.

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 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**

PBND Standards 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	1
Custody Classification System	1
Contraband	0
Funds and Personal Property	1
Hold Rooms in Detention Facilities	0
Key and Lock Control	0
Sexual Abuse and Assault Prevention and Intervention	0
Special Management Unit	2
Tool Control	0
Use of Force and Restraints	0
Sub-Total	5
Part 3 - Order	
Disciplinary System	0
Sub-Total	0
Part 4 - Care	
Food Service	0
Medical Care	3
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
Sub-Total	3
Part 5- Activities	
Correspondence and Other Mail	0
Recreation	0
Visitation	0
Sub-Total	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.

Part 6- Justice	
Detainee Handbook	0
Sub-Total	0
Part 7- Administration and Management	
Staff Training	0
Sub-Total	0
Total Deficiencies	8

DETAINEE RELATIONS

ODO interviewed 25 detainees, who each voluntarily agreed to participate. One detainee made an allegation of mistreatment by stating he was strip searched at the facility. Most detainees reported satisfaction with facility services except for the concerns listed below.

Detainee Handbook: Two detainees stated they received both the ICE National Detainee Handbook and the facility-specific handbook in English but requested the handbooks in Russian. They also stated they do not understand English. A third detainee who only speaks Spanish stated he did not receive a facility-specific handbook.

- Action Taken: ODO reviewed both detainee files for the Russian-speaking detainees and found the detainees signed receipts for the ICE National Detainee Handbook and facility-specific handbook on November 29, 2021, but with no reference to a request for a Russian translation. ODO also noted the facility provides detainee handbooks online via tablet and in various languages. At ODO's request, the facility issued the detainees Russian translations of both handbooks on December 14, 2022.

ODO reviewed the Spanish-speaking detainee's detention file and found that the detainee signed his receipt for both the ICE National Detainee Handbook and facility-specific handbook on December 9, 2020, and with no language translation specified. At ODO's request, the facility issued the detainee both handbooks in Spanish on December 14, 2022.

Contraband: One detainee stated facility staff strip searched him in October 2021 because an officer found radio batteries on him. The detainee dressed down only to his underwear and refused to dress down any further.

- Action Taken: ODO reviewed facility policy on strip searches and the incident reporting and confirmed facility staff found an altered battery and wire during a search of the detainee's cell on September 21, 2021. The incident report stated staff placed the detainee in a special housing unit and strip searched him due to the contraband found in his cell. On December 13, 2021, facility staff met with the detainee and informed him of facility policy on strip searches and contraband, the disciplinary system, and consequences for infractions of facility rules and regulations. The detainee acknowledged understanding the information.

Medical Care: One detainee stated his medical diet does not include the proper food required for the treatment of his diabetes.

- Action Taken: ODO interviewed facility medical staff and the food services administrator and found the detainee is a Type 2 diabetic and receives a Hindu religious diet, compliant with diabetic dietary requirements. ODO also confirmed the detainee receives a diabetic snack as required. At ODO's request, the medical staff explained the diet to the detainee on December 15, 2022, and he acknowledged understanding.

Medical Care: One detainee stated the facility canceled his scheduled dental appointment for December 12, 2022, without any explanation nor offer to reschedule.

- Action Taken: ODO interviewed facility medical staff and found staff canceled the detainee's dental appointment due to inoperable equipment and with no explanation nor offer to reschedule. At ODO's request, medical informed the detainee on December 14, 2022, of the reason for the cancellation and confirmation of his rescheduled appointment. The staff withheld the date of the rescheduled appointment from the detainee for security reasons, but confirmed with ODO his appointment for December 21, 2022.

Staff-Detainee Communication: One detainee stated he has had no contact with an ICE officer and receives no advance notice of ICE visits to the housing units.

- Action Taken: ODO interviewed ERO Buffalo DO, reviewed the facility-specific handbook and postings in the housing units, and found the handbook and postings include contact information for the ERO Buffalo Field Office and the scheduled hours and days of ERO Buffalo staff visits with detainees. At ODO's request, the facility staff informed the detainee of the staff visit schedule on December 15, 2022, and he acknowledged understanding. Additionally, an ERO Buffalo DO met with the detainee and addressed his concern.

COMPLIANCE INSPECTION FINDINGS

SECURITY

ADMISSION AND RELEASE (AR)

ODO reviewed █ detainee files and found in █ out of █ files, no Order to Detain or Release the Detainee form (Form I-203 or I-203a) with the appropriate ICE/ERO authorizing official signature (**Deficiency AR-547**).

CUSTODY CLASSIFICATION SYSTEM (CCS)

ODO reviewed █ detainee files and found in █ out of █ files, the designated classification supervisor or facility administrator designee did not review the intake processing officer's

⁷ "An Order to Detain or an Order to Release the detainee (Form I-203 or I-203a), bearing the appropriate ICE/ERO Authorizing Official signature, must accompany each newly arriving detainee." See ICE PBNDS 2011 (Revised 2016), Standard, Admission and Release, Section (V)(E).

classification files for accuracy and completeness and did not ensure assignment of the appropriate housing unit (**Deficiency CCS-31⁸**).

FUNDS AND PERSONAL PROPERTY (FPP)

ODO interviewed two property officers and a processing lieutenant, observed the property room, and found a safe outside of the shift supervisor's office, which was not secured in an area accessible only to the shift supervisor. Specifically, ODO found a safe containing detainees' small valuables in the facility property room was open and accessible to non-supervisory staff. ODO found four staff members (a transport officer, a desk officer, and two property officers) with access to the unsecure safe and no shift supervisor present (**Deficiency FPP-12⁹**).

SPECIAL MANAGEMENT UNITS (SMU)

ODO reviewed the facility SMU policy, interviewed the chief of security, and found the facility considered detainees' placement in the SMU justified the application of restraints. Specifically, detention officers applied restraints to detainees in disciplinary segregation (DS) during movement outside the cell as a routine practice (**Deficiency SMU-108¹⁰**). **This is a repeat deficiency.**

ODO reviewed the facility SMU policy, interviewed the chief of security, and found staff routinely applied restraints to detainees in DS prior to exiting their cells and not exclusively as a precaution against escape during transfer, for medical reasons, or to prevent self-injury to others, or serious property damage (**Deficiency SMU-109¹¹**). **This is a repeat deficiency.**

CARE

MEDICAL CARE (MC)

ODO reviewed ■ health care personnel training records and found in ■ out of ■ records, health care personnel performed duties without authorized credentials. Specifically, two registered nurses missed the April 2022 deadline for completion of annual physical examination training by a physician (**Deficiency MC-21¹²**). **This is a priority component.**

⁸ "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 (Revised 2016), Standard, Custody Classification System, Section (V)(E).

⁹ "The safe shall either be kept in the shift supervisor's office or otherwise secured in an area accessible only to the shift supervisor." See ICE PBNDS 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(A).

¹⁰ "Placement in an SMU does not constitute a valid basis for the use of restraints while in the SMU or during movement around the facility." See ICE PBNDS 2011 (Revised 2016), Standard, Special Management Units, Section (V)(E).

¹¹ "Consistent with Standard 2.15, restraints should only be used, if necessary, as a precaution against escape during transfer, for medical reasons (when directed by the medical officer), or to prevent self-injury, injury to others, or serious property damage." See ICE PBNDS 2011 (Revised 2016), Standard, Special Management Units, Section (V)(E).

¹² "Health care personnel perform duties within their scope of practice for which they are credentialed by training, licensure, certification, job descriptions, and/or written standing or direct orders by personnel authorized by law to give such orders." See ICE PBNDS 2011 (Revised 2016), Standard, Medical Care, Section (V)(B).

ODO reviewed the facility medical policy, interviewed the health services administrator (HSA), and found the facility’s COVID-19 operational status was RED. The facility had no updated written procedures for quarantining detainees testing negative for COVID-19. Facility medical staff tested detainees for COVID-19 upon arrival and quarantined; however, the facility removed detainees with negative COVID-19 test results from quarantine within 48-72 hours of arrival and placed them in assigned housing units (**Deficiency MC-23¹³**). **This is a priority component.**

Additionally, the facility did not quarantine detainees per current Centers for Disease Control and Prevention guidance. Instead, the facility removed detainees with negative COVID-19 test results from quarantine within 48-72 hours of arrival and placed them in assigned housing units (**Deficiency MC-25¹⁴**).

CONCLUSION

During this inspection, ODO assessed the facility’s compliance with 25 standards under PBNDS 2011 (Revised 2016), and found the facility in compliance with 20 of those standards. ODO found eight deficiencies in the remaining five standards. ODO recommends ERO Buffalo work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations. ODO has not received the uniform corrective action plan for ODO’s last inspection of BSPC in May 2022.

Compliance Inspection Results Compared	FY 2022 PBNDS 2011 (Revised 2016)	FY 2023 PBNDS 2011 (Revised 2016)
Standards Reviewed	18	25
Deficient Standards	8	5
Overall Number of Deficiencies	11	8
Priority Component Deficiencies	0	2
Repeat Deficiencies	1	2
Areas Of Concern	0	0
Corrective Actions	0	0
Facility Rating	Superior	Good

¹³ “Each facility shall have written plans that address the management of infectious and communicable diseases, including screening, prevention, education, identification, monitoring and surveillance, immunization (when applicable), treatment, follow-up, isolation (when indicated) and reporting to local, state and federal agencies.” *See* ICE PBNDS 2011 (Revised 2016), Standard, Medical Care, Section (V)(C)(1).

¹⁴ “Facilities shall comply with current and future plans implemented by federal, state or local authorities addressing specific public health issues including communicable disease reporting requirements.” *See* ICE PBNDS 2011 (Revised 2016), Standard, Medical Care, Section (V)(C)(1).