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Immigration and Customs Enforcement

Office of Professional Responsibility

Inspections and Detention Oversight

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**Office of Detention Oversight
Compliance Inspection**

**Enforcement and Removal Operations
Phoenix Field Office
Florence Service Processing Center
Florence, Arizona**

December 4 – 6, 2012

**COMPLIANCE INSPECTION
FLORENCE SERVICE PROCESSING CENTER
PHOENIX FIELD OFFICE**

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EXECUTIVE SUMMARY

The Office of Professional Responsibility, Office of Detention Oversight (ODO) conducted a Compliance Inspection (CI) of the Florence Service Processing Center (Florence SPC) in Florence, Arizona, from December 4 to 6, 2012. Florence SPC was built in 1942 to hold prisoners of war during World War II. Since 1983, the former U.S. Immigration and Naturalization Service (INS) has used the facility to house adult males detained for administrative immigration violations. The facility is approximately 140,203 square feet, and has a capacity of 392 beds. U.S. Immigration and Customs Enforcement (ICE) owns and operates the facility to house detainees of all security classification levels (Level I – lowest threat, Level II – medium threat, Level III – highest threat) for over 72 hours. The average daily detainee population at Florence SPC is 369. The average length of stay is 12 days. At the time of this inspection, the facility housed 328 male detainees (293 Level I, 35 Level II, 0 Level III). Florence SPC does not house female detainees.

Asset Protection and Security Services (APSS) is contracted to provide security, transportation, and food service. Rosemark is the maintenance contractor. Florence SPC holds accreditations from the American Correctional Association (ACA) and the National Commission on Correctional Health Care (NCCHC).

The Enforcement and Removal Operations (ERO), Field Office Director (FOD), Phoenix, Arizona (ERO Phoenix) is responsible for ensuring facility compliance with ICE policies and the Performance-Based National Detention Standards (PBNDS). An Assistant Field Office Director (AFOD) is stationed at Florence SPC, and is the highest-ranking ERO official at the facility. In addition to the AFOD, ERO staff at Florence SPC is comprised of (b)(7)e Assistant Officers in Charge, (b)(7)e Supervisory Detention and Deportation Officers (SDDO), (b)(7)e Supervisory Immigration Enforcement Agents, (b)(7)e Deportation Officers (DO), and (b)(7)e Immigration Enforcement Agents. The AFOD stated there are no vacant positions at Florence SPC. A permanently-assigned ERO Detention Service Manager monitors facility compliance with the PBNDS.

The Project Manager is the highest ranking APSS official at Florence SPC, and is responsible for oversight of security operations, transportation, and food service. In addition to the Project Manager, APSS supervisory staff consists of (b)(7)e shift commanders, (b)(7)e detention lieutenants, and (b)(7)e transportation lieutenants. Line staff consists of (b)(7)e detention officers, (b)(7)e transportation officers, and (b)(7)e staff members in the Detainee Services Department.

In October 2010, ODO conducted a Quality Assurance Review at Florence SPC. Of the 23 PBNDS reviewed, 17 were in full compliance. The remaining six standards accounted for 11 deficiencies. None of these was repeated during this CI.

In March 2012, ERO Detention Standards Compliance Unit contractor, the Nakamoto Group, Inc., conducted an annual review of the PBNDS at Florence SPC. Florence SPC received an overall rating of “Meets Standards,” and was found compliant with all 41 standards reviewed.

During this CI, ODO reviewed 16 PBNDS. ODO determined 15 standards were fully compliant. ODO found only one deficiency, in the Emergency Plans standard. Specifically, the PBNDS

Emergency Plans standard requires that an integrated training exercise for the Command Post, Hostage Negotiation Team (HNT), and Special Response Team (SRT) be conducted every six months. At the time of inspection, ODO verified Florence SPC conducted only one training exercise for calendar year 2012.

This report details the deficiency identified by ODO and refers to the specific, relevant sections of the PBNDS. ERO will be provided a copy of this report to assist in developing corrective actions to resolve the deficiency. This deficiency was discussed with Florence SPC personnel on-site during the inspection, as well as during the closeout briefing conducted on December 6, 2012.

ODO attributes Florence SPC's high level of compliance with the PBNDS and the low number of deficiencies identified in this CI to ERO leadership and staff who are very well educated regarding the requirements of the 2008 PBNDS. ODO also attributes the low number of deficiencies to the presence of a dedicated ERO standards compliance team, in addition to the presence of an on-site Detention Service Manager.

The Florence SPC staff-detainee communication policy allows detainees to have informal and unrestricted access and interaction with ERO and facility staff. ERO visitation schedules are conspicuously posted in all detainee housing units. Detainees can also submit formal written questions, concerns, or requests to ERO and facility staff by completing a request form. From January 1 to November 30, 2012, the facility received and processed over 13,500 formal requests from detainees. ODO reviewed 35 randomly-selected formal requests submitted by detainees during this time period, and verified all 35 requests were documented and recorded in the electronic request log, answered with a response to the detainee in a timely manner, and a copy of the request was placed and maintained in the detainee's detention file. Furthermore, ODO reviewed the Facility Liaison Visit Checklists from January 1 to November 30, 2012, and confirmed ERO officers consistently conduct scheduled and unannounced visits multiple times each week to interact with detainees, address their questions or concerns, and monitor the living conditions in the housing units, including the SMU. In addition, the AFOD informed ODO that ERO officers frequently spend an entire day interacting with detainees during their staff-detainee communication visits, and observe various detainee recreational activities.

The facility maintains an electronic grievance log to document and track all formal grievances submitted by detainees. The grievance log reflects that Florence SPC received and processed a total of 57 formal grievances from January 1 to November 30, 2012; 22 pertained to staff treatment, 12 to funds and personal property, six pertained to medical-related issues, four to mail, and three to detainee searches. The remaining ten formal grievances were divided among issues such as commissary, food service, laundry, segregation, and visitation. ODO reviewed ten randomly-selected formal grievances submitted by detainees during this time period and verified that all ten requests were documented and recorded in the electronic grievance log and answered with a timely response to the detainee. Copies of the grievances were placed in the detainees' detention files. ODO reviewed all six formal medical grievances and verified they were responded to in a timely manner and placed in the detainees' medical files. Medical grievances are handled and processed only by medical staff. In addition, the medical department maintains its own grievance log to document and track all medical grievances.

Of the 22 formal grievances regarding staff treatment, two detainees alleged excessive use of force by officers, and one detainee alleged his finger was injured by an officer during a routine search of his housing unit. After-action reviews and investigations conducted by facility management for the two allegations involving excessive use of force concluded there was no evidence of officer misconduct or excessive use of force. The grievance alleging the finger injury was refuted since the detainee's finger was injured previously while he was working in the kitchen slicing meat.

ICE Health Service Corps (IHSC), augmented by InGenesis, Inc. contract employees, provides medical services at Florence SPC. The clinic is open 24 hours a day, seven days a week, and is administered by a Health Services Administrator, supported by the Assistant Health Services Administrator, and an Administrative Assistant. Providers include the Clinical Director and (b)(7)e mid-level practitioners. Nursing staff consists of (b)(7)e Nurse Manager, (b)(7)e registered nurses, and (b)(7)e licensed practical nurses. At the time of the review, the Nurse Manager, (b)(7)e registered nurse positions, and (b)(7)e licensed practical nurse positions were vacant. The physician and mid-level practitioners share on-call coverage. Additional staff includes a dentist, a dental assistant, (b)(7)e medical records technicians, (b)(7)e pharmacist, and (b)(7)e pharmacy technician. The psychiatrist and licensed clinical social worker positions at Florence SPC were vacant at the time of the review; therefore, Florence SPC used a psychiatrist from Krome Detention Center in Florida to provide mental health services via tele-psychiatry.

ODO reviewed 36 medical files for compliance with the PBNDS; all detainees were medically screened and physically examined by medical staff upon arrival at Florence SPC. The intake process includes a medical and mental health screening performed by nursing staff to identify chronic care issues, and medication and emergent needs. A chest X-ray is performed to screen for the presence of tuberculosis. ODO confirmed all 36 detainees underwent intake screenings and chest X-rays within the required 12 hours of arrival at the facility. Of the 36 records reviewed, six were detainees on the chronic care list. ODO verified all six detainees received a physical examination by a provider the same day or the day following identification of a chronic care need, and all received necessary medications and appropriate follow-up. A provider completed physical examinations in the remaining 30 cases within 14 days as required by the PBNDS.

Detainees access health care services by completing an IHSC Sick Call Request form, available in Spanish and English. Registered nurses see detainees for sick call on a daily basis. Nursing staff picks up Sick Call Request forms daily from all units during medical rounds. ODO reviewed the Sick Call Log and medical records, and verified detainees are seen for sick call in a timely manner.

Florence SPC staff informed ODO there have been no detainee deaths since the facility began housing detainees in 1983. While there have been no detainee suicides or suicide attempts, there have been a total of 14 suicide watches since October 2010. ODO reviewed seven randomly-selected suicide watch records and confirmed Florence SPC followed facility policy and the PBNDS in all seven cases. During this CI, there were no detainees on suicide watch. ODO verified part of intake screening includes suicide risk. Detainees determined at risk for suicide are immediately referred for further medical and mental health evaluation. Detainees determined suicidal are housed and monitored in accordance with the PBNDS. ODO verified

Florence SPC policy requires officers to conduct and document 15-minute checks of detainees placed on suicide watch, in accordance with the PBNDS.

ODO reviewed the facility's suicide prevention training plan, and noted all required elements are covered in accordance with the PBNDS. ODO reviewed training records for (b)(7)e contract security staff, (b)(7)e ERO officers, and (b)(7)e medical staff. ODO confirmed all staff timely completed required training in suicide prevention and intervention.

Florence SPC designated a Supervisory Immigration Enforcement Agent as the Sexual Abuse and Assault Prevention and Intervention (SAAPI) coordinator. ERO and APSS personnel are required to attend pre-service and annual training on the SAAPI program. ODO reviewed a random sample of training records for (b)(7)e ERO and (b)(7)e APSS staff members, and confirmed completion of required SAAPI training. ERO and APSS staffs also receive training in sexual harassment, the Prison Rape Elimination Act, and the SAAPI PBNDS. ODO interviewed ERO and APSS staffs, and verified their knowledge with respect to the SAAPI program and how to handle any information received concerning possible sexual abuse or assault.

During the intake process, detainees are screened to identify sexual abuse victimization history and identification of potential sexual aggressors. Florence SPC separates detainees identified with a history of predatory or abusive sexual behavior from detainees with a history of victimization.

During the intake process, staff provides detainees with a tri-fold brochure with information and guidance for reporting any kind of sexual abuse or misconduct by other detainees or staff. Detainees are also informed of the SAAPI program in the detainee handbook, which contains detailed and comprehensive information addressing nonconsensual sexual acts, abusive sexual contact, non-contact sexual abuse, staff sexual misconduct, and staff sexual harassment. In addition, the handbook provides instructions for reporting sexual assault, and the toll-free and speed dial numbers to the DHS Office of Inspector General Hotline. Florence SPC runs a daily video in the housing units that addresses SAAPI. ODO observed SAAPI informational postings in the intake area, the medical department, the kitchen, all housing units, and the segregation unit. The informational postings are provided in both English and Spanish, and include toll-free telephone numbers for reporting incidents.

The SAAPI coordinator informed ODO of four incidents of reported sexual abuse and assault from January 2012 to November 2012, all classified as detainee-on-detainee. Documentation indicates Florence SPC personnel complied with current ERO policy and the PBNDS in all of the reported incidents. Three of the incidents involved allegations of verbal sexual harassment or inappropriate comments with no physical contact, and were deemed unsubstantiated. One incident involved an allegation of inappropriate physical contact. ODO verified the SAAPI coordinator and AFOD made notifications to the ICE Joint Intake Center telephonically within two hours of the alleged incident, and in writing within 24 hours via the ICE Significant Event Notification database. ODO reviewed the documentation, and confirmed ERO investigated the incident internally and notified the local police. The local police interviewed the alleged victim and perpetrator, and filed a report regarding the one allegation of inappropriate physical contact. No criminal charges were filed. There were no witnesses to this incident, and the allegation was deemed unsubstantiated by investigating authorities.

At the time of the inspection, there were four detainees in administrative segregation (AS) and none in disciplinary segregation. One of the four detainees was placed in AS at his own request for protective custody; the remaining three detainees were in AS for medical observation. ODO reviewed AS documentation for these detainees and verified facility officials issued AS orders to all four detainees. In addition, ERO supervisory staff members timely perform AS status reviews, and the FOD was notified of the two detainees who were placed in AS for over 30 days. Furthermore, ERO Headquarters was also notified of the one detainee who had been placed in AS for over 60 days. ODO observed the Special Management Unit (SMU) at Florence SPC to be clean, well-lit, and temperature appropriate. ODO also reviewed SMU housing records, and confirmed custody and medical staff consistently monitor detainee living and health conditions in the SMU.

Florence SPC has a comprehensive written policy governing the use of force, including the five-level use of force continuum. The facility does not use four-point restraints, restraint chairs, or any electro-muscular disruption devices. ODO was informed there were eight use-of-force incidents from January 1 to December 4, 2012. Seven involved immediate uses of force and one involved a calculated use of force. ODO reviewed written documentation and video recordings, and confirmed full compliance with the PBNDS and facility policy. Medical personnel performed medical examinations on involved detainees immediately following the incidents. After-action review teams convened the first workday following the incidents. ODO confirmed required documentation was forwarded to the AFOD as required.

INSPECTION PROCESS

ODO inspections evaluate the welfare, safety, and living conditions of detainees. ODO primarily focuses on areas of noncompliance with the ICE National Detention Standards or the ICE PBNDS, as applicable. The PBNDS apply to Florence SPC. In addition, ODO may focus its inspection based on detention management information provided by the ERO Headquarters and ERO field offices, and on issues of high priority or interest to ICE executive management.

ODO reviewed the processes employed at Florence SPC to determine compliance with current policies and detention standards. Prior to the inspection, ODO collected and analyzed relevant allegations and detainee information from multiple ICE databases, including the Joint Integrity Case Management System, the ENFORCE Alien Booking Module, and the ENFORCE Alien Removal Module. ODO also gathered facility facts and inspection-related information from ERO Headquarters staff to prepare for the site visit at Florence SPC.

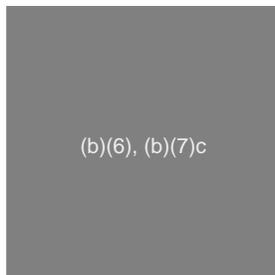
REPORT ORGANIZATION

This report documents inspection results, serves as an official record, and is intended to provide ICE and detention facility management with a comprehensive evaluation of compliance with policies and detention standards. It summarizes those PBNDS that ODO found deficient in at least one aspect of the standard. ODO reports convey information to best enable prompt corrective actions and to assist in the on-going process of incorporating best practices in nationwide detention facility operations.

OPR defines a deficiency as a violation of written policy that can be specifically linked to the PBNDS, ICE policy, or operational procedure. When possible, the report includes contextual and quantitative information relevant to the cited standard. Deficiencies are highlighted in bold throughout the report and are encoded sequentially according to a detention standard designator.

Comments and questions regarding the report findings should be forwarded to the Deputy Division Director, OPR ODO.

INSPECTION TEAM MEMBERS



Special Agent (Team Leader)	ODO, Phoenix
Section Chief	ODO, Phoenix
Special Agent	ODO, Phoenix
Special Agent	ODO, San Diego
Contract Inspector	Creative Corrections
Contract Inspector	Creative Corrections
Contract Inspector	Creative Corrections

OPERATIONAL ENVIRONMENT

INTERNAL RELATIONS

ODO interviewed the AFOD, the SDDO of the American Correctional Association (ACA) and PBNDS compliance team, and the APSS Project Manager. During the interviews, ERO and APSS leadership stated the working relationship between the two entities is excellent, and the morale of ERO and APSS staff is very good.

The APSS Project Manager stated he consistently observes ERO staff visiting the housing units multiple times each week, and communicating with ICE detainees to address their issues or concerns. The Project Manager praised the leadership of the AFOD, and said the professionalism of the ERO staff has resulted in the facility's high level of compliance with the PBNDS. The SDDO praised the members of his ACA compliance team for doing an excellent job ensuring the facility maintains a high level of compliance with the PBNDS.

DETAINEE RELATIONS

ODO interviewed 11 Level I detainees, and five Level II detainees, housed at Florence SPC, for a total of 16 detainee interviews. The periods of detention for these 16 detainees ranged from five days to six months. All of the detainees said they received a total of three hours of recreation daily. In addition, all confirmed they received a complete supply of personal hygiene items upon admission, and the hygiene items are replenished daily at no cost to the detainees. All were satisfied with the quality and quantity of the food at the facility. No detainees complained about the adequacy of medical care, and no detainees stated they had been victims of or observed any verbal, physical or sexual abuse by staff or other detainees. All stated they had access to religious services, regular visitation by family members, free access to the law library, and access to grievance forms.

All but one detainee confirmed facility officials provided them with national and facility-specific detainee handbooks in both English and Spanish. ODO reviewed the detention file associated with the detainee claiming he did not receive a detainee handbook, and verified the detainee signed a receipt indicating he had indeed received both the national and local detainee handbooks.

Nine detainees knew the identity of their DO, and all knew how to contact a DO, if necessary. The seven detainees who claimed they did not know the identity of their DO stated they did not care to know or did not have a need to know the identity of their DO. All detainees said they frequently see and observe ERO officers visiting the housing units each week to communicate with detainees.

All 16 detainees interviewed stated they were able to use the detainee telephone system. Three detainees who were housed in the same pod complained they sometimes had difficulty hearing through the detainee telephones in that pod. ODO notified facility officials of the matter; the officials promptly issued a work order and repaired the telephones. ODO verified the telephones were working properly upon completion of the repairs.

ICE PERFORMANCE-BASED NATIONAL DETENTION STANDARDS

ODO reviewed a total of 16 PBNDS and found Florence SPC fully compliant with the following 15 standards:

- Admission and Release
- Classification System
- Detainee Handbook
- Environmental Health and Safety
- Food Service
- Grievance System
- Hunger Strikes
- Law Libraries and Legal Material
- Medical Care
- Sexual Abuse and Assault Prevention and Intervention
- Special Management Units
- Staff-Detainee Communication
- Suicide Prevention and Intervention
- Telephone Access
- Use of Force and Restraints

As these standards were compliant at the time of the review, a synopsis for these standards was not prepared for this report.

ODO found one deficiency in the Emergency Plans PBNDS. The finding for this standard is presented in the remainder of this report.

EMERGENCY PLANS (EP)

ODO reviewed the Emergency Plans standard at Florence SPC to determine if a contingency plan has been developed to quickly and effectively respond to any emergency situations, and minimize their severity, in accordance with the ICE PBNDS. ODO interviewed ERO and APSS staffs, reviewed emergency plans and memoranda of understanding, and inspected command post equipment.

An SDDO is responsible for the development and implementation of the facility's emergency plans. ODO confirmed the emergency plans are well organized, and access is strictly controlled. ODO verified the emergency plans were developed in cooperation with local, state, and federal law enforcement agencies and memoranda of understanding exist formalizing the inter-agency agreements. An SDDO maintains a list identifying the location of each emergency plan in the command center. Interviews of the AFOD, SDDO, Immigration Enforcement Agents, the ICE Facility Operation Specialist, and APSS contract security staff confirmed they are knowledgeable about the emergency plans. ERO and APSS staff receives training on the plans as part of orientation, during annual refresher training, and periodically as part of daily and weekly staff briefings. ODO confirmed Florence SPC has not encountered an incident that would require the activation of the facility emergency plans.

ODO verified Florence SPC emergency plans include all contingency-specific plans required by the PBNDS. The plans are comprehensive and cover all mandated elements. Procedures are in place requiring documentation and accurate recording of events, staff responses, and command decisions during and immediately after emergency situations. Post-action debriefings are required, involving analytical discussion, to ensure actions taken were appropriate and in accordance with policy and the PBNDS. Florence SPC maintains a current roster of all staff telephone numbers, as well as law enforcement and other emergency responders.

ODO verified no integrated training exercise for the Command Post, HNT, and SRT were conducted in 2012 (**Deficiency EP-1**). Training exercises every six months as required by the PBNDS reinforces staff readiness and integrated responses in the event of a hostage situation. Though no hostage situation training exercises were conducted, ODO notes Florence SPC conducted an extensive Anthrax Disaster Drill in September 2012. The drill, hosted by the ICE National Emergency Management Division, in partnership with ERO Phoenix, included training and several practical exercises.

STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS

DEFICIENCY EP-1

In accordance with the ICE PBNDS, Emergency Plans, section (V)(E)(5)(b)(5), the FOD must ensure training exercises integrating the activities of the Command Post, HNT and SRT shall occur every six months to underscore the importance of a total facility response to a hostage situation. As participants collaborate and interact, they will experience how the other operational teams think and function, as well as what each can contribute in a crisis.