



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

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**Office of Detention Oversight  
Follow-Up Compliance Inspection**

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

**Florence Service Processing Center  
Florence, Arizona**

**August 30-September 1, 2022**

**FOLLOW-UP COMPLIANCE INSPECTION**  
**of the**  
**FLORENCE SERVICE PROCESSING CENTER**  
Florence, Arizona

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## **FOLLOW-UP COMPLIANCE INSPECTION TEAM MEMBERS**



|                                       |                      |
|---------------------------------------|----------------------|
| Team Lead                             | ODO                  |
| Inspections and Compliance Specialist | ODO                  |
| Inspections and Compliance Specialist | 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 follow-up compliance inspection of the Florence Service Processing Center (FSPC) in Florence, Arizona, from August 30 to September 1, 2022.<sup>1</sup> This inspection focused on the standards found deficient during ODO’s last inspection of FSPC from February 28 to March 3, 2022. The facility opened in 1963 and is owned and operated by the ICE Office of Enforcement and Removal Operations (ERO). ERO began housing detainees at FSPC in 1983 under the oversight of ERO’s Field Office Director in Phoenix (ERO Phoenix). The facility operates under the Performance-Based National Detention Standards (PBNDS) 2011 (Revised 2016).

ERO has assigned deportation officers and a detention services manager to the facility. An ICE facility administrator handles daily operations and supervises [REDACTED] support personnel. Akima Global Services, LLC provides food services and ICE Health Service Corps provides medical care. The facility was accredited by the American Correctional Association in August 2021 and the National Commission on Correctional Health Care in October 2021.

| Capacity and Population Statistics              | Quantity   |
|---|------------|
| ICE Bed Capacity <sup>2</sup>                   | [REDACTED] |
| Average ICE Population <sup>3</sup>             | [REDACTED] |
| Adult Male Population (as of August 30, 2022)   | [REDACTED] |
| Adult Female Population (as of August 30, 2022) | [REDACTED] |

During its last inspection, in Fiscal Year (FY) 2022, ODO found two deficiencies in the following area of Medical Care (2).

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

<sup>2</sup> Data Source: ERO Facility List as of August 15, 2022.

<sup>3</sup> *Ibid.*

## **FOLLOW-UP COMPLIANCE INSPECTION PROCESS**

ODO conducts oversight inspections of ICE detention facilities with an average daily population of 10 or more detainees, and where detainees are housed for longer than 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. In FY 2021, to meet congressional requirements, ODO began conducting follow-up inspections at all ICE ERO detention facilities, which ODO inspected earlier in the FY.

While follow-up inspections are intended to focus on previously identified deficiencies, ODO will conduct a complete review of several core standards, which include but are not limited to Medical Care, Hunger Strikes, Suicide Prevention, Food Service, Environmental Health and Safety, Emergency Plans, Use of Force and Restraints/Use of Physical Control Measures and Restraints, Admission and Release, Classification, and Funds and Personal Property. ODO may decide to conduct a second full inspection of a facility in the same FY based on additional information obtained prior to ODO's arrival on-site. Factors ODO will consider when deciding to conduct a second full inspection will include the total number of deficiencies cited during the first inspection, the number of deficient standards found during the first inspection, the completion status of the first inspection's uniform corrective action plan (UCAP), and other information ODO obtains from internal and external sources ahead of the follow-up compliance inspection. Conditions found during the inspection may also lead ODO to assess new areas and identify new deficiencies or areas of concern should facility practices run contrary to ICE standards. Any areas found non-compliant during both inspections are annotated as "Repeat Deficiencies" in this report.

## FINDINGS BY PERFORMANCE-BASED NATIONAL DETENTION STANDARDS 2011 (REVISED 2016) MAJOR CATEGORIES

| PBNDs 2011 (Revised 2016) Standards Inspected <sup>4,5</sup>  | Deficiencies |
|---|--------------|
| <b>Part 1 - Safety</b>  |              |
| Emergency Plans   | 0            |
| Environmental Health and Safety                               | 0            |
| <b>Sub-Total</b>  | <b>0</b>     |
| <b>Part 2 - Security</b>                                      |              |
| Admission and Release   | 0            |
| Custody Classification System                                 | 0            |
| Facility Security and Control                                 | 0            |
| Funds and Personal Property                                   | 0            |
| Special Management Units                                      | 0            |
| Staff-Detainee Communication                                  | 0            |
| Use of Force and Restraints                                   | 1            |
| <b>Sub-Total</b>  | <b>1</b>     |
| <b>Part 4 - Care</b>  |              |
| Food Service  | 0            |
| Hunger Strikes  | 0            |
| Medical Care  | 0            |
| Personal Hygiene  | 0            |
| Significant Self-harm and Suicide Prevention and Intervention | 0            |
| <b>Sub-Total</b>  | <b>0</b>     |
| <b>Part 5 - Activities</b>                                    |              |
| Recreation  | 0            |
| Telephone Access  | 0            |
| <b>Sub-Total</b>  | <b>0</b>     |
| <b>Part 6 - Justice</b>                                       |              |
| Grievance System  | 0            |
| <b>Sub-Total</b>  | <b>0</b>     |
| <b>Total Deficiencies</b>                                     | <b>1</b>     |

<sup>4</sup> For greater detail on ODO's findings, see the *Follow-up Inspection Findings* section of this report.

<sup>5</sup> 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.

## DETAINEE RELATIONS

ODO interviewed 20 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. All 20 detainees reported satisfaction with facility services.

## FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

### SECURITY

#### USE OF FORCE AND RESTRAINTS (UOFR)

ODO reviewed one calculated use of force (CUOF) and found the facility did not record the CUOF incident in its entirety. Specifically, the facility staff did not visually record the medical assessment debriefing that occurred on August 14, 2022 (**Deficiency UOFR-69**<sup>6</sup>).

## CONCLUSION

During this inspection, ODO assessed the facility's compliance with 17 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 16 of those standards. ODO found one deficiency in the remaining one standard. ODO commends facility staff members for their responsiveness during this inspection. ODO recommends ERO work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations. ERO provided ODO with the UCAP for ODO's last inspection of FSPC on July 7, 2022.

| <b>Compliance Inspection Results Compared</b> | <b>First FY 2022<br/>(PBNDS 2011)<br/>(Revised 2016)</b> | <b>Second FY 2022<br/>(PBNDS 2011)<br/>(Revised 2016)</b> |
|---|--|---|
| Standards Reviewed                            | 23   | 17  |
| Deficient Standards                           | 1  | 1   |
| Overall Number of Deficiencies                | 2  | 1   |
| Repeat Deficiencies                           | 0  | 0   |
| Areas Of Concern                              | 0  | 0   |
| Corrective Actions                            | 0  | 0   |
| Facility Rating                               | Superior   | N/A   |

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<sup>6</sup> "For calculated use of force, it is required that the entire incident be audio visually recorded." See ICE PBNDS 2011, Standard, Use of Force and Restraints, Section (V)(I)(2).