

# Office of Detention Oversight Compliance Inspection

# Enforcement and Removal Operations ERO Phoenix Field Office

Florence Service Processing Center Florence, Arizona

March 8-12, 2021

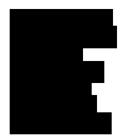
# COMPLIANCE INSPECTION of the FLORENCE SERVICE PROCESSING CENTER

Florence, Arizona

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## COMPLIANCE INSPECTION TEAM MEMBERS



Acting Team Lead	ODO
Inspections and Compliance Specialist	ODO
Inspections and Compliance Specialist	ODO
Section Chief	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 Florence Service Processing Center (FSPC) in Florence, Arizona, from March 8 to 12, 2021. The facility opened in 1963 and is owned and operated by ICE. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at FSPC in 1983 under the oversight of ERO's Field Office Director (FOD) 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 service manager to the facility. An officer in charge (OIC) handles daily facility operations and manages support personnel. Akima Global Services, LLC provides food services, and ICE Health Service Corps (IHSC) provides medical care. The American Correctional Association accredited the facility in April 2018 and the National Commission on Correctional Health Care accredited it in December 2018. In January 2020, FSPC 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 Detainee Bed Capacity <sup>2</sup>	392
Average ICE Detainee Population <sup>3</sup>	
Male Detainee Population (as of March 8, 2021)	
Female Detainee Population (as of March 8, 2021)	N/A

During its last inspection, in Fiscal Year (FY) 2020, ODO found 13 deficiencies in the following areas: Environmental Health and Safety (1); Admission and Release (2); Custody Classification System (1); Special Management Units (1); Staff-Detainee Communication (1); Food Service (1); Medical Care (2); Significant Self-harm and Suicide Prevention and Intervention (1); and Religious Practices (3).

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

<sup>&</sup>lt;sup>2</sup> Data Source: ERO Facility List Report as of March 8, 2021.

<sup>3</sup> Ibid.

### COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population greater than ten, 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.<sup>4</sup>

ODO identifies violations of ICE detention standards, ICE policies, or operational procedures as "deficiencies." ODO also highlights instances in which 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.

ODO was unable to conduct an on-site inspection of this facility, as a result of the COVID-19 pandemic, and instead, conducted a remote inspection of the facility. During this remote inspection, ODO interviewed facility staff, ERO field office staff, and detainees, reviewed files and detention records, and was able to assess compliance for at least 90 percent or more of the ICE national detention standards reviewed during the inspection.

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<sup>&</sup>lt;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

PBNDS 2011 (Revised 2016) Standards Inspected <sup>5</sup>	Deficiencies
Part 1 – Safety	•
Emergency Plans	0
Environmental Health and Safety	0
Sub-Total	0
Part 2 – Security	
Admission and Release	0
Custody Classification System	0
Facility Security and Control	0
Funds and Personal Property	0
Population Counts	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	0
Part 4 – Care	
Food Service	0
Hunger Strikes	0
Medical Care	0
Significant Self-harm and Suicide Prevention and Intervention	0
Disability Identification, Assessment, and Accommodation	0
Sub-Total	0
Part 5 – Activities	
Religious Practices	0
Telephone Access	0
Sub-Total	0
Part 6 – Justice	
Grievance Systems	1
Law Libraries and Legal Material	0
Sub-Total	1
Total Deficiencies	1

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

### **DETAINEE RELATIONS**

ODO interviewed 12 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. Most detainees reported satisfaction with facility services except for the concern listed below. ODO attempted to conduct detainee interviews via video teleconference; however, the ERO field office and facility were not able to accommodate this request due to the facility's COVID-19 protocols. As such, the detainee interviews were conducted via telephone.

*Medical Care:* One detainee stated ringing in his left ear was affecting his hearing. Additionally, he stated the facility's medical staff evaluated his left ear on three occasions, and medical staff told him nothing was wrong with his ear.

• Action Taken: ODO reviewed the detainee's medical record and found a nurse practitioner (NP) saw the detainee on October 27, 2021, for a complaint of ear pain and found no signs of infection or trauma in the outer ear nor ear canal. On November 20, 2020, a registered nurse (RN) saw the detainee at sick call, examined his outer ear and ear canal, noted no abnormalities, and proceeded with nursing guidelines for earache treatment, which included over the counter pain relief medication and educating the detainee on the proper care of his ear. On November 21, 2020, the NP saw the detainee for ear pain, ordered a left ear lavage due to ear wax build up, and ordered medication intended to treat ear wax build-up. On February 23, 2021, the NP saw the detainee at sick call with a complaint of left ear discomfort, examined his ear, found no signs or symptoms of infection or trauma, and completed the ear lavage. Since February 23, 2021, the detainee has not requested a sick call appointment. As a result of ODO's referral, the NP scheduled a follow-up visit with the detainee for March 11, 2021. On March 11, 2021, the IHSC medical doctor saw the detainee. The detainee informed the medical doctor his condition has been on-going for several years and he had no additional complaints. The detainee also denied any headache, nausea, vomiting, fever, or any other complaints.

### COMPLIANCE INSPECTION FINDINGS

### **JUSTICE**

#### **GRIEVANCE SYSTEM (GS)**

ODO reviewed the facility's detainee handbook and found it did not inform detainees of the opportunity to file a complaint with the Department of Homeland Security's Office of Inspector General (DHS OIG) about physical, sexual, nor civil rights violations (**Deficiency GS-18**<sup>6</sup>).

Corrective Action: On March 12, 2021, FSPC updated the grievance section of its detainee handbook to include the notification to detainees of the opportunity to file a complaint with DHS OIG about physical, sexual, or civil rights violations. On March 12, 2021, the facility's OIC instructed a supervisory detention and deportation officer to immediately begin educating the facility's staff and the detained population on the update to the facility's detainee handbook (C-1).

#### CONCLUSION

During this inspection, ODO assessed the facility's compliance with 20 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 19 of those standards. ODO found one deficiency in the remaining one standard. ODO commends facility staff for its responsiveness during this inspection and notes there was one instance where the facility's staff initiated immediate corrective action during the inspection. ODO recommends ERO work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations.

Compliance Inspection Results Compared	FY 2020 (PBNDS 2011) (Revised 2016)	FY 2021 (PBNDS 2011) (Revised 2016)
Standards Reviewed	18	20
Deficient Standards	9	1
Overall Number of Deficiencies	13	1
Repeat Deficiencies	1	0
Areas of Concern	0	0
Corrective Actions	0	1

<sup>&</sup>lt;sup>6</sup> "The facility shall provide each detainee, upon admittance, a copy of the detainee handbook and local supplement (see also standard "6.1 Detainee Handbook"), in which the grievance section provides notice of the following: ...

<sup>8.</sup> The opportunity at any point to file a complaint directly to the Department of Homeland Security (DHS) OIG about staff misconduct, physical or sexual abuse or civil rights violations; complaints may be filed by calling the DHS OIG Hotline at 800-323-8603 or by writing to: Department of Homeland Security Attn: Office of the Inspector General Washington, DC 20528." See ICE PBNDS 2011 (Revised 2016), Standard, Grievance System, Section, (V)(B)(8).