



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

Office of Detention Oversight
Compliance Inspection

Enforcement and Removal Operations
ERO Phoenix Field Office

Florence Service Processing Center
Florence, Arizona

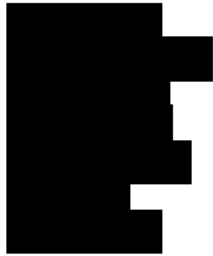
September 14-18, 2020

COMPLIANCE INSPECTION
of the
FLORENCE SERVICE PROCESSING CENTER
Florence, Arizona

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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 September 14 to 18, 2020.¹ 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 services manager to the facility. FSPC's officer in charge handles daily facility operations and is supported by [REDACTED] personnel. Asset Protection & Security Services provides food services and ICE Health Service Corps (IHSC) provides medical care at the facility. The facility is accreditation by the American Correctional Association in 2018 and the National Commission on Correctional Health Care in 2018.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity ²	392
Average ICE Detainee Population ³	271
Male Detainee Population (as of 9/14/2020)	78
Female Detainee Population (as of 9/14/2020)	N/A

During its last inspection, in Fiscal Year (FY) 2019, ODO found 16 deficiencies in the following areas: Environmental Health and Safety (1), Admission and Release (1), Funds and Personal Property (2), Staff Detainee Communication (1), Use of Force and Restraints (3), Medical Care (2), Personal Hygiene (1), Significant Self-harm and Suicide Prevention and Intervention (2), Telephone Access (2), Law Libraries and Legal Materials (1).

¹ This facility holds male detainees with low, medium-low, medium-high, and high security classification levels for periods longer than 72 hours.

² Data Source: ERO Facility List Report as of September 14, 2020.

³ *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.⁴

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.

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

PBNDs 2011 (Revised) Standards Inspected ⁵	Deficiencies
Part 1 – Safety	
Environmental Health and Safety	1
Sub-Total	1
Part 2 – Security	
Admission and Release	2
Custody Classification System	1
Funds and Personal Property	0
Sexual Abuse and Assault Prevention and Intervention	0
Special Management Units	1
Staff-Detainee Communication	1
Use of Force and Restraints	0
Sub-Total	5
Part 4 – Care	
Food Service	1
Medical Care	2
Significant Self-harm and Suicide Prevention and Intervention	1
Disability Identification, Assessment, and Accommodation	0
Sub-Total	4
Part 5 – Activities	
Recreation	0
Religious Practices	3
Telephone Access	0
Visitation	0
Sub-Total	3
Part 6 – Justice	
Grievance Systems	0
Law Libraries and Legal Material	0
Sub-Total	0
Total Deficiencies	13

⁵ 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. All interviewed detainees reported satisfaction with facility services. ODO attempted to conduct detainee interviews via video teleconference; however, ERO Phoenix and the facility were not able to accommodate this request due to technological issues. As such, the detainee interviews were conducted via telephone.

COMPLIANCE INSPECTION FINDINGS

SAFETY

ENVIRONMENTAL HEALTH AND SAFETY (EH&S)

ODO reviewed [REDACTED] fire drills conducted within the 12-months preceding the ODO inspection and found [REDACTED] out of [REDACTED] fire drills did not include emergency [REDACTED] (**Deficiency EH&S-1⁶**).

SECURITY

ADMISSION AND RELEASE (A&R)

ODO interviewed the intake supervisor and found non-ERO Phoenix personnel were routinely provided access to detainees' A-files for processing and classification purposes (**Deficiency A&R-1⁷**). Specifically, ERO Phoenix provided A-files to contract staff performing the duties of intake and classification at the facility.

ODO reviewed ten detainee files and found ten out of ten detainee files did not contain an Order to Detain Form (Form I-203) (**Deficiency A&R-2⁸**).

FSPC utilized a local Identity Document Transmittal form to inventory, receipt, and document the placement of detainee identity documents in detainee files. ODO notes the FSPC Identity Document Transmittal form as a **Best Practice**.

CUSTODY CLASSIFICATION SYSTEM (CCS)

ODO reviewed ten detainee files and found five out of ten detainee files did not contain an initial

⁶ [REDACTED] shall be included in each fire drill, and [REDACTED]

[REDACTED] NFPA recommends a limit of [REDACTED]. However, when conducting fire drills, emphasis shall be placed on safe and orderly evacuation rather than speed." See ICE PBND 2011, Standard, Environmental Health and Safety, Section (V)(C)(4)(c).

⁷ "...Under no circumstances may non-ICE/ERO personnel have access to the detainee's A-file..." See ICE PBND 2011, Standard, Admission and Release, Section (V)(D).

⁸ "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 PBND 2011, Standard, Admission and Release, Section (V)(E).

classification form (**Deficiency CCS-1⁹**).

SPECIAL MANAGEMENT UNITS (SMU)

ODO reviewed two detainee requests regarding access to reading materials submitted by a detainee housed in SMU during the ODO inspection. ODO interviewed ERO Phoenix and confirmed the facility closed the library due to COVID-19 (**Deficiency SMU-1¹⁰**).

STAFF-DETAINEE COMMUNICATION (SDC)

ODO reviewed the facility's detainee request log and determined the request log did not record the staff member who responded to the request, the date the request was returned to the detainee, reasons the request was considered urgent, nor any other pertinent site-specific information (**Deficiency SDC-1¹¹**).

CARE

FOOD SERVICE (FS)

ODO reviewed 11 purchase requests completed within the six-months preceding the ODO inspection for controlled/hot food items and found in 11 out of 11 requests there were no special-handling requirements for delivery for the purchase of sugar (**Deficiency FS-1¹²**).

MEDICAL CARE (MC)

ODO reviewed 12 detainee medical records and found one out of 12 newly in processed detainees were not screened for Tuberculosis (TB) within 12 hours of arrival (**Deficiency MC-1¹³**). The medical summary stated the TB screening was conducted 17-days after arrival.

⁹ "All detainees shall be classified upon arrival and before being admitted into the general population of the facility. ICE/ERO staff shall provide facilities the data needed from each detainee's file to complete the classification process." See ICE PBNDS 2011, Standard, Custody Classification System, Section (V)(J).

¹⁰ "Detainees in SMU shall have access to reading materials, including religious materials, in English, Spanish, and other languages frequently encountered in the facility population. The Recreation Specialist shall offer each detainee soft-bound, reading materials of this type on a rotating basis." See ICE PBNDS 2011, Standard, Special Management Units, Section (V)(W).

¹¹ "All requests shall be recorded in a logbook (or electronic logbook) specifically designed for that purpose. At a minimum, the log shall record

- e. name of the staff member who logged the request;
- f. date that the request, with staff response and action, was returned to the detainee;
- g. any other pertinent site-specific information, including detention condition complaints.
- h. specific reasons why the detainee's request is urgent and requires a faster response."

See ICE PBNDS 2011, Staff-Detainee Communication Section (V)(B)(2)(e-h)

¹² "Other Food Items Mace, nutmeg, cloves, sugar and alcohol-based flavorings also require special handling and storage.

1) The purchase order for any of these items shall specify the special-handling requirements for delivery." See ICE PBNDS 2011, Standard, Food Service, Section (V)(B)(4)(b)(1).

¹³ "...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, Standard, Medical Care, Section (V)(C)(2).

ODO reviewed one medical record for a detainee enrolled in the mental health chronic care clinic with prescribed psychotropic medications and found no documentation of a signed consent form that included a description of the medication's side effects (**Deficiency MC-2¹⁴**).

SIGNIFICANT SELF HARM AND SUICIDE PREVENTION AND INTERVENTION (SSH&SPI)

ODO reviewed training records of [REDACTED] medical staff and found no documentation of suicide prevention training for [REDACTED] out of [REDACTED] medical staff (**Deficiency SSH&SPI-1¹⁵**).

ACTIVITIES

RELIGIOUS PRACTICES

ODO found copies of requests and staff responses were not maintained in the detention file of a detainee denied access to a religious activity (**Deficiency RP-1¹⁶**).

ODO reviewed a denied detainee request for a religious activity, interviewed FSPC staff, and found detainees practicing a different religious faith from the chaplain do not have access to pastoral care and counseling from external clergy and religious service providers due to COVID-19 (**Deficiency RP-2¹⁷**). Due to COVID-19, detainees of every faith do not have access to official representatives of their faith groups while housed in SMUs or hospital units (**Deficiency RP-3¹⁸**).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 18 standards under PBNDS 2011(Revised 2016) and found the facility in compliance with nine of those standards. ODO found 13 deficiencies in the remaining nine standards. ODO commends facility staff for their responsiveness during this inspection.

ODO recommends ERO Phoenix work with the facility to remedy any outstanding deficiencies as applicable and in accordance with contractual obligations.

¹⁴ "4. Prior to the administration of psychotropic medications, a separate documented informed consent, that includes a description of the medication's side effects, shall be obtained." See ICE PBNDS 2011, Standard, Medical Care, Section (V)(AA)(4).

¹⁵ "All facility staff members who interact with and/or are responsible for detainees shall receive comprehensive suicide prevention training, during orientation and at least annually." See ICE PBNDS 2011, Standard, Significant Self-Harm and Suicide Prevention and Intervention, Section (V)(A). **This is a repeat deficiency**

¹⁶ "When a detainee submits a request concerning the reason for denial of access to religious activities, facilities or meals, a copy of the request and response to the request shall be placed in the detention file." See ICE PBNDS 2011, Religious Practices, Section (V)(A).

¹⁷ "Detainees who belong to a religious faith different from that of the chaplain or religious services provider staff may, if they prefer, have access to pastoral care and counseling from external clergy and religious service providers." See ICE PBNDS 2011, Religious Practices, Section (V)(C).

¹⁸ "Detainees of any faith tradition may ordinarily have access to official representatives of their faith groups while housed in SMUs or hospital units, by requesting such visits through the chaplain or other religious service coordinator." See ICE PBNDS 2011, Religious Practices, Section (V)(G).

Compliance Inspection Results Compared	FY 2019 (PBNDS 2011) Revised 2016	FY 2020 (PBNDS 2011) Revised 2016
Standards Reviewed	20	18
Deficient Standards	10	9
Overall Number of Deficiencies	16	13
Repeat Deficiencies	0	1
Corrective Actions	6	0