

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

Office of Detention Oversight
Follow-Up Compliance Inspection

Enforcement and Removal Operations
ERO Miami Field Office

Krome North Service Processing Center
Miami, Florida

May 3-6, 2021

FOLLOW-UP COMPLIANCE INSPECTION
of the
KROME NORTH SERVICE PROCESSING CENTER
Miami, Florida

TABLE OF CONTENTS

FACILITY OVERVIEW	4
FOLLOW-UP COMPLIANCE INSPECTION PROCESS.....	5
FINDINGS BY PERFORMANCE-BASED NATIONAL DETENTION STANDARDS PBND 2011 (REVISED 2016) MAJOR CATEGORIES.....	6
DETAINEE RELATIONS.....	7
FOLLOW-UP COMPLIANCE INSPECTION FINDINGS.....	7
SECURITY	7
Special Management Units	7
Use of Force and Restraints	7
CONCLUSION	8

FOLLOW-UP COMPLIANCE INSPECTION TEAM MEMBERS



Team Lead
Assistant Team Lead
Contractor
Contractor
Contractor
Contractor

ODO
ODO
Creative Corrections
Creative Corrections
Creative Corrections
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 Krome North Service Processing Center (KNSPC) in Miami, Florida, from May 3 to 6, 2021.¹ This inspection focused on the standards found deficient during ODO's last inspection of KNSPC from December 14 to 17, 2020. The facility opened in 1979 and is owned and operated by ICE. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at KNSPC in 1980 under the oversight of ERO's Field Office Director in Miami (ERO Miami). 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 assistant field office director handles daily facility operations and is supported by [REDACTED] personnel. Akima Global Services provides food services, ICE Health Service Corps provides medical care, and JAPLOP Enterprises, Inc. provides commissary services at the facility. The facility was accredited by the American Correctional Association in June 2018 and by the National Commission on Correctional Health Care in April 2018. In June 2017, KNSPC 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 ²	420
Average ICE Detainee Population ³	[REDACTED]
Male Detainee Population (as of May 3, 2021)	[REDACTED]
Female Detainee Population (as of May 3, 2021)	N/A

During its last inspection, in Fiscal Year (FY) 2021, ODO found five deficiencies in the following areas: Custody Classification System (1); Special Management Units (3); and Use of Force and Restraints (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 May 3, 2021.

³ *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.⁴

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 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.

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 2016) Standards Inspected⁵	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
Funds and Personal Property	0
Special Management Units	3
Use of Force and Restraints	2
Sub-Total	5
Part 4 – Care	
Food Service	0
Hunger Strikes	0
Medical Care	0
Significant Self-Harm and Suicide Prevention and Intervention	0
Sub-Total	0
Total Deficiencies	5

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, nor abuse. All detainees reported satisfaction with facility services. ODO conducted detainee interviews via video teleconference.

FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

SECURITY

SPECIAL MANAGEMENT UNITS (SMU)

ODO reviewed 12 administrative segregation (AS) orders and found the facility did not immediately provide AS orders to the detainees in 5 out of 12 instances (**Deficiency SMU-36⁶**).

ODO reviewed 12 disciplinary segregation (DS) orders and found the facility did not immediately provide DS orders in 12 out of 12 instances (**Deficiency SMU-66⁷**).

ODO reviewed 22 segregation observation logbook entries and found observation checks exceeding the [REDACTED] in 8 out of 22 instances and no conducting of observation checks on [REDACTED] in 9 out of 22 instances (**Deficiency SMU-126⁸**). **This is a repeat deficiency.**

USE OF FORCE AND RESTRAINTS (UOFR)

ODO reviewed two calculated UOF audiovisual recordings and found no documentation of the incident in its entirety in one out of the two recordings. Specifically, the recording ended prior to the team debrief (**Deficiency UOFR-69⁹**).

ODO reviewed two calculated UOF incident records and found no debrief of the incident in one out of two audiovisual recordings (**Deficiency UOFR-73¹⁰**).

⁶ "The administrative segregation order shall be immediately provided to the detainee in a language or manner the detainee can understand, unless delivery would jeopardize the safe, secure, or orderly operation of the facility." *See* ICE PBNDS 2011 (Revised 2016), Standard, Special Management Units, Section (V)(A)(2)(e).

⁷ "The completed disciplinary segregation order shall be immediately provided to the detainee in a language or manner the detainee can understand, unless delivery would jeopardize the safe, secure, or orderly operation of the facility." *See* ICE PBNDS 2011 (Revised 2016), Standard, Special Management Units, Section (V)(B)(2)(b).

⁸ "Detainees in SMU shall be personally observed and logged at least [REDACTED] e." *See* ICE PBNDS 2011 (Revised 2016), Standard, Special Management Units, Section (V)(M).

⁹ "For calculated use of force, it is required that the entire incident be audio visually recorded." *See* ICE PBNDS 2011 (Revised 2016), Standard, Use of Force and Restraints, Section (V)(I)(2).

¹⁰ "Calculated use-of-force incidents shall be audio visually-recorded in the following order: ...

f. Debrief the incident with a full discussion/analysis/assessment of the incident." *See* ICE PBNDS 2011 (Revised 2016), Standard, Use of Force and Restraints, Section (V)(I)(2)(f).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 11 standards under PBND 2011 (Revised 2016) and found the facility in compliance with 9 of those standards. ODO found five deficiencies in the remaining two standards. ODO recommends ERO work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations.

Compliance Inspection Results Compared	First FY 2021 (PBND 2011) (Revised 2016)	Second FY 2021 (PBND 2011) (Revised 2016)
Standards Reviewed	19	11
Deficient Standards	3	2
Overall Number of Deficiencies	3	5
Repeat Deficiencies	0	1
Areas of Concern	2	0
Corrective Actions	1	0