



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

Office of Detention Oversight Compliance Inspection

Enforcement and Removal Operations
ERO Miami Field Office
Krome North Service Processing Center
Miami, Florida

June 2 – 4, 2015

**COMPLIANCE INSPECTION
for the
KROME NORTH PROCESSING CENTER
MIAMI, FLORIDA**

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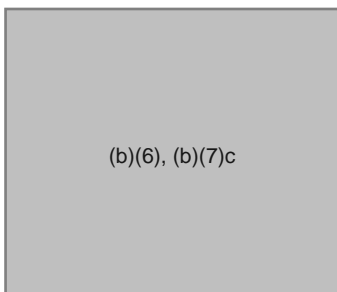
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INSPECTION TEAM MEMBERS



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EXECUTIVE SUMMARY

The Office of Detention Oversight (ODO) conducted a compliance inspection of the Krome North Service Processing Center (KNSPC) in Miami, Florida, from June 2 to 4, 2015. KNSPC opened in 1979 and is owned and operated by U.S. Immigration and Customs Enforcement (ICE) Enforcement and Removal Operations (ERO). ERO began housing detainees at KNSPC in 1980 under the oversight of ERO’s Field Office Director (FOD) in Plantation, Florida.

ERO staff members, including a Detention Service Manager, are assigned to the facility. An Assistant Field Office Director is responsible for oversight of daily facility operations and is supported by (b)(7)e personnel. Borden Dairy, Cisco, Produce Connection, and Bimbo Food Incorporated provide food services and the ICE Health Service Corps (IHSC) provides medical services. The facility is accredited by the American Correctional Association.

Capacity and Population Statistics	Quantity
Total Bed Capacity	581
ICE Detainee Bed Capacity	581
Average Daily Population	443
Average ICE Detainee Population	439
Average Length of Stay (Days)	24.4
Male Detainee Population (as of 04/21/2015) ¹	465
Female Detainee Population	N/A

OVERALL FINDINGS

In August 2012, ODO conducted an inspection of KNSPC under the Performance-Based National Detention Standards (PBNDS) 2008, reviewing the facility’s compliance with 18 standards and finding the facility compliant with 14 standards. There were a total of five deficiencies in the remaining four standards.

Inspection Results Compared	FY 2012 (PBNDS 2008)	FY2015 (PBNDS 2011)
Standards Reviewed	18	16
Deficient Standards	4	4
Overall Number of Deficiencies	5	8
Deficient Priority Components	0	1
Best Practice	0	1

In FY2015, KNSPC is obligated to comply with the requirements of the PBNDS 2011 and ICE policies. ODO reviewed the facility accordingly for compliance with 16 standards and found the facility compliant with 12 of those standards. ODO found eight deficiencies under the remaining four standards; one of those deficiencies relates to a priority component.² Finally, ODO cited one best practice during the inspection.³

¹ Male detainees with low, medium and high security classification levels are detained at the facility for longer than 72 hours.

² A deficient priority component was found in the following standard: Use of Force and Restraints.

³ Corrective actions, where immediately implemented, best practices and ODO recommendations, as applicable, have been identified in the *Inspection Findings* section and annotated with a “C”, “BP” or “R”, respectively.

FINDINGS BY PBNDS 2011 MAJOR CATEGORIES

PBNDS 2011 STANDARDS INSPECTED⁴	DEFICIENCIES
Part 1 - Safety	
1.2 - Environmental Health and Safety	2
Sub-Total	2
Part 2 - Security	
2.1 - Admission and Release	1
2.2 - Custody Classification System	0
2.5 - Funds and Personal Property	0
2.11 - Sexual Abuse and Assault Prevention and Intervention	0
2.12 - Special Management Units	0
2.13 - Staff-Detainee Communication	0
2.15 - Use of Force and Restraints	2
Sub-Total	3
Part 4 - Care	
4.1 - Food Service	0
4.3 - Medical Care	3
4.4 - Medical Care (Women)	0
4.6 - Significant Self-Harm and Suicide Prevention and Intervention	0
Sub-Total	3
Part 5 - Activities	
5.6 - Telephone Access	0
Sub-Total	0
Part 6 - Justice	
6.1 - Detainee Handbook	0
6.2 - Grievance System	0
6.3 - Law Libraries and Legal Materials	0
Sub-Total	0
Total Deficiencies	8

⁴ For greater detail on ODO's findings, see the *Inspection Findings* section of this report.

INSPECTION PROCESS

Every fiscal year, the Office of Detention Oversight (ODO), a unit within U.S. Immigration and Customs Enforcement's (ICE) Office of Professional Responsibility (OPR), conducts compliance inspections at detention facilities in which detainees are accommodated for periods in excess of 72 hours and with an average daily population greater than ten to determine compliance with either the ICE National Detention Standards (NDS) 2000, or the Performance-Based National Detention Standards (PBNDS) 2008 or 2011, as applicable.

During the compliance inspection, ODO reviews each facility's compliance with those detention standards that directly affect detainee health, safety, and/or well-being.⁵ Any violation of written policy specifically linked to ICE detention standards, other policies, or operational procedures that ODO identifies is noted as a deficiency. ICE has designated certain detention standards within either the PBNDS 2008 or 2011 to be "priority components"⁶, given their substantial impact on facility security and/or the health and safety, legal rights, and quality of life of detainees in ICE custody. In recognition of their significance, ODO will highlight any deficiencies found involving those priority components.

Immediately following an inspection, ODO hosts a closeout briefing in person with both facility and ERO field office management to discuss their preliminary findings, which are summarized and provided to ERO in a preliminary findings report. Thereafter, ODO provides ERO with a final compliance inspection report to: (i) assist ERO in working with the facility to develop a corrective action plan to resolve identified deficiencies; and (ii) provide senior ICE and ERO leadership with an independent assessment of the overall state of ICE detention facilities. The reports enable senior agency leadership to make decisions on the most appropriate actions for individual detention facilities nationwide.

⁵ ODO reviews the facility's compliance with selected standards in their entirety.

⁶ Priority components have not been identified for the NDS.

DETAINEE RELATIONS

ODO interviewed 25 detainees, who volunteered to participate. None of the detainees made allegations of mistreatment, abuse, or discrimination. The majority of detainees reported being satisfied with facility services, with the exception of the complaints below:

- *Medical Care:* Three detainees alleged they were not receiving adequate medical care. One detainee stated he advised medical during the intake process on May 29, 2015 that he had a toothache and his legs hurt, but medical did not address the issue. One detainee alleged he was experiencing pain in his stomach, heartburn, and pain in their testicles. The detainee stated they submitted several medical requests and have not received a response. One detainee advised he had issues with his feet swelling. The detainee alleged he saw a physician regarding this issue approximately four months ago, but he felt he was not treated appropriately.
 - Action Taken: ODO consulted with medical staff about the aforementioned allegations. In reference to the detainee with the alleged toothache, ODO reviewed medical records and determined there were no documented complaints made during the intake process but that the detainee is scheduled for an initial physical assessment. The detainee was referred to medical for further review. In reference to the detainee with alleged pain issues, ODO reviewed medical records and determined the detainee was evaluated on June 2, 2015 and was referred to urology. In reference to the detainee with alleged swelling issues, ODO consulted with IHSC and was informed the detainee's blood pressure was normal. The detainee's care is being followed by the chronic care clinic and lab results are pending. Once lab results are received the detainee will be re-evaluated by an IHSC physician.

- *Detainee Handbook:* Five detainees alleged they did not receive the local supplement of the detainee handbook and seven detainees alleged they did not receive the ICE National Detainee handbook.
 - Action Taken: ODO reviewed the detainee's files and determined all the aforementioned detainees signed forms acknowledging receipt of both handbooks.

INSPECTION FINDINGS

SAFETY

ENVIRONMENTAL HEALTH AND SAFETY (EH&S)

A review of documentation revealed the facility does not maintain a master index of all hazardous substances in the facility and their storage locations (**Deficiency EH&S-1⁷**).

A review of the posted facility diagrams revealed that Areas of Safe Refuge are only identified on diagrams in the Krome Transitional Unit (**Deficiency EH&S-2⁸**).

SECURITY

ADMISSION AND RELEASE (AR)

ODO observed staff not allowing detainees to shower in private without being visually observed (**Deficiency AR-1⁹**).

USE OF FORCE AND RESTRAINTS (UOF&R)

A cell extraction team was assembled; however, they remained in their uniform and did not don protective gear (**Deficiency UOF&R-1¹⁰**).

After-action reviews by a team comprised of the Supervisory Detention Deportation Officer, Supervisory Immigration Enforcement Agent, a captain, and Health Service Administrator (HSA) or assistant HSA were completed; however, in six of the 21 cases, the reviews were not completed within two working days (**Deficiency UOF&R-2¹¹**).

⁷ “The maintenance supervisor or facility administrator designee shall compile a master index of all hazardous substances in the facility and their locations.” See ICE PBNDS 2011, Standard 1.2, Environmental Health and Safety, Section (V)(B)(5)(a).

⁸ “Areas of Safe Refuge’ shall be identified and explained on diagrams. Diagram posting shall be in accordance with applicable fire safety regulations of the jurisdiction.” See ICE PBNDS 2011, Standard 1.2, Environmental Health and Safety, Section (V)(C)(5).

⁹ “Staff shall permit the detainee to change clothing and shower in a private room without being visually observed by staff, unless the staff member has reasonable suspicion to search the detainee in accordance with the following section on Strip Searches and standard 2.10 Searches of Detainees.” See ICE PBNDS 2011, Standard 2.1, Admission and Release, Section (V)(B)(2).

¹⁰ “Use-of-force team members and others participating in a calculated use of force shall wear protective gear, taking particular precautions when entering a cell or area where blood or other body fluids could be present.” See ICE PBNDS 2011, Standard 2.15, Use of Force and Restraints, Section (V)(I)(3)(c)(1). This is a priority component.

¹¹ “The after-action report is due within two workdays after the detainee’s release from restraints.” See ICE PBNDS 2011, Standard 2.15, Use of Force and Restraints, Section (V)(P)(3).

CARE

FOOD SERVICE (FS)

Best Practice: ODO observed knives are tagged with a tracking device that alerts central control if removed from the kitchen and considers this a best practice **(BP)**.

MEDICAL CARE (MC)

All health appraisals conducted by registered nurses were reviewed by the clinical director; however, there was no documentation to evidence his review of five of the health appraisals completed by midlevel providers to assess priority for treatment **(Deficiency MC-1¹²)**.

ODO noted the medical transfer summary is completed and placed in a zippered, clear plastic bag, and the bags can be opened and resealed without detection; furthermore, the information on the medical transfer summary may be read through the clear plastic. In addition, the envelopes are not marked as “Medical Confidential” **(Deficiency MC-2¹³)**.

According to the HSA, a copy of the complete medical record was not forwarded when a detainee was transferred to an Intergovernmental Service Agreement detention facility as required by the standard **(Deficiency MC-3¹⁴)**.

¹² “The CMA shall be responsible for review of all comprehensive health assessments to assess the priority for treatment.” See ICE PBNDS 2011, Standard 4.3, Medical Care, Section (V)(L).

¹³ “When a detainee is transferred within the ICE Health Service Corps (IHSC) system, ICE shall ensure that the full medical record is placed in a sealed envelope or other container labeled with the detainee’s name and A-number and marked ‘MEDICAL CONFIDENTIAL.’” See ICE PBNDS 2011, Standard 4.3, Medical Care, Section (V)(Y)(4)(c)(1)(b).

¹⁴ “A copy of the full medical record must accompany each detainee during transfer unless extenuating circumstances make this impossible, in which case the full medical record will follow as soon as practicable.” See ICE PBNDS 2011, Standard 4.3, Medical Care, Section (Y)(4)(c)(2).