

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

# Office of Detention Oversight Compliance Inspection 2023-001-061

# Enforcement and Removal Operations ERO Seattle Field Office

Tacoma ICE Processing Center Tacoma, Washington

February 14-16, 2023

#### COMPLIANCE INSPECTION of the TACOMA ICE PROCESSING CENTER Tacoma, Washington

### **TABLE OF CONTENTS**

FACILITY OVERVIEW	4
COMPLIANCE INSPECTION PROCESS	5
FINDINGS BY PERFORMANCE-BASED NATIONAL DETENTION STANDARDS 2011 (REVISED 2016) MAJOR CATEGORIES	
DETAINEE RELATIONS	7
COMPLIANCE INSPECTION FINDINGS	8
SAFETY ENVIRONMENTAL HEALTH AND SAFETY	
CONCLUSION	8

## **COMPLIANCE INSPECTION TEAM MEMBERS**



Acting Team Lead ODO Senior Inspections and Compliance Specialist ODO Senior Inspections and Compliance Specialist ODO Inspections and Compliance Specialist ODO Inspections and Compliance Specialist ODO Contractor Creative Corrections Contractor Creative Corrections Creative Corrections Contractor 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 Tacoma ICE Processing Center (TIPC) in Tacoma, Washington, from February 14 to 16, 2023.<sup>1</sup> The facility opened in 2004 and is owned and operated by The Geo Group, Inc. (GEO). The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at TIPC in 2004 under the oversight of ERO's Field Office Director in Seattle (ERO Seattle). The facility operates under the Performance-Based National Detention Standards (PBNDS) 2011 (Revised 2016).

ERO has assigned supervisory detention and deportation officers and a detention service manager to the facility. A TIPC facility administrator handles daily operations and manages support personnel. GEO provides food services, ICE Health Service Corps provides medical care, and Keefe Commissary Network provides commissary services at the facility. The facility was accredited by the National Commission on Correctional Health Care in March 2021 and the American Correctional Association in January 2018. In December 2019, TIPC 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 Bed Capacity <sup>2</sup>	
Average ICE Population <sup>3</sup>	
Adult Male Population (as of February 14, 2023)	
Adult Female Population (as of February 14, 2023)	

During its last full inspection, in Fiscal Year (FY) 2022, ODO found one deficiency in the following area: Correspondence and Other Mail (1).

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

<sup>&</sup>lt;sup>2</sup> Data Source: ERO Facility List as of February 14, 2023.

<sup>&</sup>lt;sup>3</sup> Ibid.

# **COMPLIANCE INSPECTION PROCESS**

ODO conducts oversight inspections of ICE detention facilities with an average daily population greater than 10, and where detainees are housed for over 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 highlights instances when 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.

<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>5,6</sup>	Deficiencies
Part 1 - Safety	
Emergency Plans	0
Environmental Health and Safety	1
Transportation (by Land)	0
Sub-Total	1
Part 2 - Security	
Admission and Release	0
Custody Classification System	0
Contraband	0
Funds and Personal Property	0
Hold Rooms in Detention Facilities	0
Key and Lock Control	0
Sexual Abuse and Assault Prevention and Intervention	0
Special Management Units	0
Tool Control	0
Use of Force and Restraints	0
Sub-Total	0
Part 3 - Order	
Disciplinary System	0
Sub-Total	0
Part 4 - Care	
Food Service	0
Medical Care	0
Medical Care (Women)	0
Significant Self-harm and Suicide Prevention and Intervention	0
Terminal Illness, Advance Directives and Death	0
Disability Identification, Assessment, and Accommodation	0
Sub-Total	0
Part 5 - Activities	
Correspondence and Other Mail	0

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

<sup>&</sup>lt;sup>6</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.

Recreation	0	
Visitation	0	
Sub-Total	0	
Part 6 - Justice		
Detainee Handbook	0	
Sub-Total	0	
Part 7 - Administration and Management		
Staff Training	0	
Sub-Total	0	
Total Deficiencies	1	

#### **DETAINEE RELATIONS**

ODO interviewed 19 detainees, who each voluntarily agreed to participate. Facility operations, specifically, a large intake of detainees on the first day of the inspection limited the number of interviews ODO was able to complete. None of the detainees made allegations of discrimination, mistreatment, or abuse. Most detainees reported satisfaction with facility services except for the concern listed below.

*Medical Care:* One detainee stated TIPC did not conduct a follow-up consultation after the completion of his off-site medical examination.

Action Taken: ODO interviewed the TIPC health services administrator (HSA), • reviewed the detainee's medical file, and found a referral to an off-site medical provider for a colonoscopy exam on April 26, 2022. After receiving the colonoscopy results, medical staff diagnosed the detainee with irritable bowel syndrome (IBS). The HSA originally scheduled the detainee's follow-up evaluation for June 22, 2022, but the provider re-scheduled the follow-up evaluation for August 4, 2022. During the followup exam, the detainee expressed concern over a recurrence of colon cancer, and medical staff scheduled him for a defecography. On October 7, 2022, a gastroenterologist (GI) provider performed the procedure and scheduled a follow-up appointment for December 22, 2022, to discuss exam results. On December 22, 2022, the GI met with the detainee, explained the results indicated only an IBS flare up, and prescribed a fiber supplement. The detainee acknowledged his understanding for treatment, and medical staff instructed him to submit a sick call request as needed. On February 3, 2023, ODO followed up with the HSA and confirmed the detainee had not submitted any additional sick call requests since December 2022.

# **COMPLIANCE INSPECTION FINDINGS**

#### **SAFETY**

#### ENVIRONMENTAL HEALTH AND SAFETY (EHS)

ODO interviewed the safety manager, toured all areas of the facility, and found the facility administrator did not ensure staff and detainees kept a high standard of facility sanitation nor general cleanliness in the housing units. Specifically, ODO found in 6 out of the 11 housing units located in A-1, A-3, B-2, B-3, C-2, and C-3, broken tiles, missing grout, and soap scum. Additionally, ODO found grime and dust residue near the shower floors of housing units G-3 and G-4. ODO also found food debris and stains in the microwave ovens of three housing units located in A-1, A-3, and F-1 (Deficiency EHS-11<sup>7</sup>).

#### CONCLUSION

During this inspection, ODO assessed the facility's compliance with 25 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 24 of those standards. ODO found one deficiency in the remaining standard. Since TIPC's last full inspection in December 2021, the facility has maintained consistent performance with ODO citing one deficiency. TIPC's consistent performance is likely the result of result of ERO Seattle staff and a DSM providing daily oversight of the facility, and from completing a uniform corrective action plan for ODO's last inspection of TIPC, a follow-up inspection in June 2022. ODO recommends ERO Seattle to continue working with the facility to resolve the remaining deficiency in accordance with contractual obligations.

Compliance Inspection Results Compared	FY 2022 Full Inspection (PBNDS 2011) (Revised 2016)	FY 2023 Full Inspection (PBNDS 2011) (Revised 2016)
Standards Reviewed	24	25
Deficient Standards	1	1
Overall Number of Deficiencies	1	1
Priority Component Deficiencies	N/A	0
Repeat Deficiencies	0	0
Areas Of Concern	0	0
Corrective Actions	0	0
Facility Rating	Superior	Superior

<sup>&</sup>lt;sup>7</sup> "The facility administrator shall ensure that staff and detainees maintain a high standard of facility sanitation and general cleanliness." *See* ICE PBNDS 2011 (Revised 2016), Standard, Environmental Health and Safety, Section (V)(A)(3).