

Office of Professional Responsibility

CCA Florence Correctional Center Compliance Inspection 2025-001-043

December 10-12, 2024



U.S. Immigration
and Customs
Enforcement



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
2025-001-043**

**Enforcement and Removal Operations
ERO Phoenix Field Office**

**CCA Florence Correctional Center
Florence, Arizona**

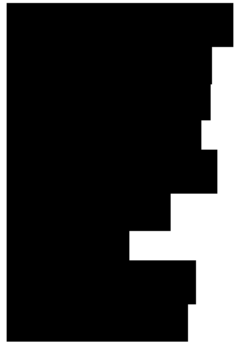
December 10-12, 2024

COMPLIANCE INSPECTION
of the
CCA FLORENCE CORRECTIONAL CENTER
Florence, Arizona

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COMPLIANCE INSPECTION TEAM MEMBERS



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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 CCA Florence Correctional Center (CCA FCC) in Florence, Arizona, from December 10 to 12, 2024.¹ The facility opened in 1999 and is owned and operated by CoreCivic. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at CCA FCC in 1987 under the oversight of ERO’s Field Office Director in Phoenix (ERO Phoenix). ICE is an authorized user of this facility under a United States Marshals Service Intergovernmental Agreement contract, which does not specify an ICE National Detention Standard (NDS). ODO inspected CCA FCC against the NDS 2019, which is the NDS listed on the ERO Custody Management Division Authorized Facility List as of December 9, 2024. ODO’s assigned rating is for ERO’s informational purposes only.²

[REDACTED] A warden handles daily facility operations and manages [REDACTED] support personnel. Trinity Services provides food services, CoreCivic provides medical care, and Keefe Commissary provides commissary services at the facility. In March 2024, CCA FCC was audited for the Department of Justice (DOJ) Prison Rape Elimination Act (PREA) and was DOJ PREA certified.

Capacity and Population Statistics	Quantity
ICE Bed Capacity ³	[REDACTED]
Average ICE Population ⁴	[REDACTED]
Adult Male Population (as of December 10, 2024)	[REDACTED]
Adult Female Population (as of December 10, 2024)	[REDACTED]
Adult Transgender Population (as of December 10, 2024)	[REDACTED]

During its last rated inspection, in Fiscal Year (FY) 2024, ODO found 5 deficiencies in the following areas: Religious Practices (1); Special Management Unit (1); and Telephone Access (3).

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

² For ODO inspections beginning in FY 2024, ERO Custody Management Division requested ODO inspect all United States Marshals Service Intergovernmental Agreement facilities, not contractually obligated to an ICE NDS, to NDS 2019.

³ Data Source: ERO Custody Management Division Authorized Facility List as of December 9, 2024.

⁴ *Ibid.*

COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population of 10 or more, and where detainees are housed for over 72 hours, to assess compliance with ICE NDS. While these inspections focus on facility compliance with detention standards that directly affect detainee life, health, safety, and/or well-being, in FY 2024 ODO added additional standards to the scope of each full inspection to ensure ODO inspects every standard at each facility at least once every other year.⁵

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.

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

FINDINGS BY NATIONAL DETENTION STANDARDS 2019 MAJOR CATEGORIES

NDS 2019 Standards Inspected ^{6,7}	Deficiencies
Part 1 - Safety	
Environmental Health and Safety	0
Transportation by Land	0
Sub-Total	0
Part 2 - Security	
Admission and Release	0
Custody Classification System	0
Funds and Personal Property	0
Hold Rooms in Detention Facilities	0
Use of Force and Restraints	0
Special Management Units	0
Staff-Detainee Communication	0
Sexual Abuse and Assault Prevention and Intervention	0
Sub-Total	0
Part 3 - Order	
Disciplinary System	0
Sub-Total	0
Part 4 - Care	
Food Service	1
Medical Care	3
Significant Self-Harm and Suicide Prevention and Intervention	0
Terminal Illness and Death	0
Disability Identification, Assessment, and Accommodation	0
Sub-Total	4
Part 5 - Activities	
Recreation	0
Visitation	0
Sub-Total	0
Part 6 - Justice	
Detainee Handbook	0
Grievance System	0
Legal Rights Group Presentations	0
Sub-Total	0
Total Deficiencies	4

⁶ For greater detail on ODO's findings, see the *Compliance Inspection Findings* section of this report.

⁷ Beginning in FY 2024, ODO instituted a process of rotating all standards every other year. As a result, some standards may not be present in all inspections.

DETAINEE RELATIONS

ODO interviewed 38 detainees, who voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. All detainees reported satisfaction with facilities services.

COMPLIANCE INSPECTION FINDINGS

CARE

FOOD SERVICE (FS)

ODO interviewed the facility FS director, reviewed a purchase order request for kosher food hot entree items, and found the facility did not purchase the hot entrees precooked. Additionally, the facility heated the kosher entrees in pots and then plated the entrees on disposable trays (**Deficiency FS-63⁸**).

MEDICAL CARE (MC)

ODO reviewed █ detainee medical records and found in █ out of █ records, facility medical staff did not obtain a signed nor dated consent form from the detainee prior to conducting a medical examination and/or providing treatment (**Deficiency MC-92⁹**). **This is a priority component.**

ODO reviewed █ detainee medical records and found in █ out of █ records, facility medical staff did not obtain a separate documented informed consent form that included a description of the medications side effects, prior to administering psychotropic medications (**Deficiency MC-93¹⁰**). **This is a priority component.**

ODO reviewed █ medical transfer summary sheets and found in █ out of █ medical transfer summary forms, no tuberculosis (TB) screening results (including results date) nor current TB status (**Deficiency MC-113¹¹**).

⁸ “Hot entrees shall be offered five times a week and shall be purchased precooked, heated in their sealed containers, and served hot.” See ICE NDS 2019, Standard, Food Service, Section (II)(F)(4).

⁹ “The facility health care practitioner will obtain specific signed and dated consent forms from all detainees before any medical examination or treatment, except in emergency circumstances.” See ICE NDS 2019, Standard, Medical Care, Section (II)(O).

¹⁰ “Prior to the administration of psychotropic medications, a separate documented informed consent, that includes a description of the medications side effects, shall be obtained.” See ICE NDS 2019, Standard, Medical Care, Section (II)(O).

¹¹ “The summary shall include, at a minimum, the following items: ...

2. Tuberculosis (TB) screening results (including results date) and current TB status if TB disease is suspected or confirmed;”

See ICE NDS 2019, Standard, Medical Care, Section (II)(Q)(3)(b)(2).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 21 standards under NDS 2019 and found the facility in compliance with 19 of those standards. ODO found four deficiencies in remaining two standards. Since CCA FCC's last rated inspection in December 2023, the facility's compliance with the NDS 2019 has trended downward. CCA FCC went from 3 deficient standards and 5 deficiencies in December 2023 to 2 deficient standards and 4 deficiencies, which included two priority components, during this compliance inspection. CCA FCC completed its uniform corrective action plan for its last inspection in April 2024, which likely resolved ODO's previously cited deficiencies. ODO recommends ERO Phoenix work with the facility to resolve any deficiencies in accordance with contractual obligations.

Compliance Inspection Results Compared	FY 2024 Full Inspection (NDS 2019)	FY 2025 Full Inspection (NDS 2019)
Standards Reviewed	24	21
Deficient Standards	3	2
Overall Number of Deficiencies	5	4
Priority Component Deficiencies	0	2
Repeat Deficiencies	0	0
Areas Of Concern	7	0
Corrective Actions	0	0
Facility Rating	Superior	Good



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