

Office of Professional Responsibility

Eloy Federal Contract Facility Inspection 2025-002-019

October 29-31, 2024



U.S. Immigration
and Customs
Enforcement



U.S. Department of Homeland Security
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**Office of Detention Oversight
Compliance Inspection
2025-002-019**

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

**Eloy Federal Contract Facility
Eloy, Arizona**

October 29-31, 2024

COMPLIANCE INSPECTION
of the
ELOY FEDERAL CONTRACT FACILITY
Eloy, 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 Eloy Federal Contract Facility (EFCF) in Eloy, Arizona, from October 29 to 31, 2024.¹ The facility opened in 1994 and is owned and operated by CoreCivic. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at EFCF in 1997 under the oversight of ERO’s Field Office Director in Phoenix (ERO Phoenix). The facility operates under the Performance-Based National Detention Standards (PBNDS) 2011 (Revised 2016).

[REDACTED] A facility warden handles daily operations and manages [REDACTED] support personnel. Trinity Services provides food services, ICE Health Service Corps (IHSC) provides medical care, and Keefe Commissary provides commissary services at the facility. The facility was accredited by the National Commission on Correctional Health Care in June 2021 and the American Correctional Association in August 2024. In October 2022, EFCF 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 ²	[REDACTED]
Average ICE Population ³	[REDACTED]
Adult Male Population (as of October 29, 2024)	[REDACTED]
Adult Female Population (as of October 29, 2024)	[REDACTED]

During its last rated inspection, in Fiscal Year (FY) 2024, ODO found 1 deficiency in Food Service.

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

² Data Source: ERO Custody Management Division Authorized Facility List as of October 28, 2024.

³ *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 national detention standards. 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.⁴

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.

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 Inspected ^{5,6}	Deficiencies
Part 1 - Safety	
Emergency Plans	0
Environmental Health and Safety	0
Transportation (By Land)	0
Sub-Total	0
Part 2 - Security	
Admission and Release	6
Custody Classification System	0
Contraband	0
Funds and Personal Property	9
Hold Rooms in Detention Facilities	0
Key and Lock Control	0
Sexual Abuse and Assault Prevention and Intervention	0
Special Management Units	0
Staff-Detainee Communication	0
Tool Control	0
Use of Force and Restraints	0
Sub-Total	15
Part 3 - Order	
Disciplinary System	0
Sub-Total	0
Part 4 - Care	
Food Service	0
Medical Care	1
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	1
Part 5 - Activities	
Recreation	0
Visitation	0
Sub-Total	0

⁵ For greater detail on ODO's findings, see the *Compliance Inspection Findings* section of this report.

⁶ 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.

Part 6 - Justice	
Detainee Handbook	0
Grievance System	0
Legal Rights Group Presentations	0
Sub-Total	0
Part 7 - Administration and Management	
Interview and Tours	0
Staff Training	0
Sub-Total	0
Total Deficiencies	16

DETAINEE RELATIONS

ODO interviewed 46 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. Most detainees reported satisfaction with facility services except for the concerns listed below.

Medical Care: One detainee stated medical staff did not respond to his multiple sick call requests.

- Action Taken: ODO interviewed the health services administrator (HSA), who confirmed the detainee submitted numerous sick call requests; however, medical staff responded on the same day or within 3 days of each request. Specifically, on June 2, 2024, the detainee submitted a sick call request for wrist pain, and on the same day, was examined and referred to the local hospital. On the same day, local hospital staff examined and diagnosed the detainee with a sprained wrist, but did not write a prescription. On June 11, 2024, the HSA reexamined the detainee's wrist and the detainee reported no pain. On July 17, 2024, the detainee submitted a sick call request but refused an examination on July 18, 2024. On August 1, 2024, the detainee submitted a sick call request for a headache, was examined the same day, and was prescribed Ibuprofen (200 mg), taken once a day with 2 refills, as needed. On August 16, 2024, the detainee submitted a sick call request for urination pain, was evaluated, and submitted a specimen for urinalysis on the same day. Three days later, on August 19, 2024, the HSA diagnosed the detainee with a bacterial infection and treated the detainee with an injection of Ceftriaxone (500 mg), and prescribed Doxycycline (50 mg) and Metronidazole (500 mg), taken twice daily, for 2 weeks. On September 7, 2024, the detainee submitted a sick call evaluation; however, the detainee refused the sick call on the same day. Following ODO's interview with the detainee, the HSA met with the detainee on October 30, 2024, and provided the detainee with instructions on how to submit a new sick call request. The detainee acknowledged understanding.

Medical Care: One detainee stated medical staff had no heartburn medication in stock.

- Action Taken: ODO interviewed the HSA and confirmed the detainee submitted a sick call request for heartburn on June 10, 2024. On the same day, the HSA examined the detainee, prescribed, and provided Omeprazole (20 mg), 1 tablet a day, 30 minutes

before meals, for 30 days with a refill. On September 16, 2024, the detainee submitted a sick call request for a headache. On the same day, the HSA examined the detainee and prescribed Tylenol (325 mg), 2 tablets for 2 days, noting the detainee did not complain about heartburn nor request additional medication. On October 29, 2024, the HSA met with the detainee, refilled his heartburn prescription, and provided the same instructions as before. ODO met with the detainee and confirmed the medication refill.

COMPLIANCE INSPECTION FINDINGS

SECURITY

ADMISSION AND RELEASE (AR)

ODO reviewed [REDACTED] detainee files and found in [REDACTED] out of [REDACTED] files, the following deficiencies:

- No search, inventory, and receipt of all detainee property by staff (**Deficiency AR-2⁷**). **This is a repeat deficiency;**
- No inventory of personal property as part of the admission process for newly admitted detainees (**Deficiency AR-11⁸**). **This is a repeat deficiency;**
- No inspection by staff of all open containers nor inventory of factory-sealed durable goods in accordance with facility procedures (**Deficiency AR-19⁹**). **This is a repeat deficiency;**
- No search by staff of detainee property nor inventory or receipt of property identified as funds, valuables, or other personal property (**Deficiency AR-20¹⁰**); and
- No itemized list of detainee baggage and personal property using the personal property inventory form or its equivalent (**Deficiency AR-40¹¹**). **This is a repeat deficiency.**

ODO reviewed [REDACTED] released detainee files and found in [REDACTED] out of [REDACTED] files, the detainees did not check their property against the original personal property inventory form nor sign the inventory sheet (**Deficiency AR-90¹²**).

⁷ “At intake, detainees shall be searched inventoried and receipted.” See ICE PBNDS 2011 (Revised 2016), Standard, Admission and Release, Section (V)(A).

⁸ “Admission processes for a newly admitted detainee shall include inventory of personal property.” See ICE PBNDS 2011 (Revised 2016), Standard, Admission and Release, Section (V)(B)(1)(e).

⁹ “Staff shall also inspect all open containers and inventory factory-sealed durable goods in accordance with facility procedures.” See ICE PBNDS 2011 (Revised 2016), Standard, Admission and Release, Section (V)(B)(3).

¹⁰ “Items discovered during the search of a detainee or his/her property shall be identified as: Funds, valuables or other personal property, to be kept in the detainee’s possession or inventoried or receipted.” See ICE PBNDS 2011 (Revised 2016), Standard, Admission and Release, Section (V)(B)(3)(b).

¹¹ “Facility staff shall prepare an itemized list of the detainee’s baggage and personal property using the personal property inventory form, or its equivalent.” See ICE PBNDS 2011 (Revised 2016), Standard, Admission and Release, Section (V)(B)(5)(a).

¹² “The detainee shall check his/her property against the original personal property inventory form. If all property is correctly accounted for, the detainee shall sign the inventory sheet, a copy of which the officer shall place in the detainee’s detention file.” See ICE PBNDS 2011 (Revised 2016), Standard, Admission and Release, Section (V)(H)(9)(c).

FUNDS AND PERSONAL PROPERTY (FPP)

ODO reviewed [REDACTED] detainee files and found in [REDACTED] out of [REDACTED] files, the following deficiencies:

- No inventory by staff of detainee property in the presence of the detainee (**Deficiency FPP-22¹³**). **This is a repeat deficiency;**
- No itemized inventory by staff of all detainee baggage and personal property during the admissions process (**Deficiency FPP-80¹⁴**). **This is a repeat deficiency;**
- No issuance by staff of a baggage check form (Form I-77) or equivalent for each separate item of baggage or container (**Deficiency FPP-81¹⁵**). **This is a repeat deficiency;**
- No description, quantity, and disposition of articles documented on the personal property form (**Deficiency FPP-87¹⁶**). **This is a repeat deficiency;**
- No general condition of the property noted on the personal property form (**Deficiency FPP-88¹⁷**). **This is a repeat deficiency;**
- No proper inventory by staff of baggage and facility containers (**Deficiency FPP-90¹⁸**). **This is a repeat deficiency;**
- No detainee signature on both the top (Part I) and bottom (Part III) of Form I-77 or its equivalent (**Deficiency FPP-93¹⁹**). **This is a repeat deficiency;** and
- No Part III (bottom) of Form I-77 given to the detainee and no brief description of the property container on the reverse side of the form (**Deficiency FPP-96²⁰**). **This is a repeat deficiency.**

¹³ “Staff shall search and inventory detainee property only in the presence of the detainee(s), unless instructed otherwise by the facility administrator.” See ICE PBNDS 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(D).

¹⁴ “An itemized inventory of all detainee baggage and personal property (separate from funds and valuables) shall be completed during admissions processing using the personal property inventory form.” See ICE PBNDS 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(I).

¹⁵ “Each facility shall inventory all property, even in the event that the property was previously inventoried by another facility and is contained in a sealed bag.” See ICE PBNDS 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(I).

¹⁶ “The personal property inventory form must contain the following information at a minimum: ...

3. description, quantity and disposition of articles; disposition may be indicated as either:
 - a. “S” for “safekeeping” (by the facility); or
 - b. “R” for “retained” (by the detainee).”

See ICE PBNDS 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(I)(3)(a-b).

¹⁷ “The personal property inventory form must contain the following information at a minimum: ...

4. general condition of the property.”

See ICE PBNDS 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(I)(4).

¹⁸ “After being properly inventoried and inspected for contraband, all baggage and facility containers shall be tagged and stored securely.” See ICE PBNDS 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(I).

¹⁹ “The detainee’s signature must appear on both the top (Part I) and bottom (Part III) of the Form I-77 or its equivalent.” See ICE PBNDS 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(I)(2).

²⁰ “The bottom part shall be given to the detainee and the reverse side shall also contain a brief description of the property container.” See ICE PBNDS 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(I)(5).

ODO reviewed 25 entries in the facility’s electronic property logbook and found in 25 out of 25 entries, no description of the property (**Deficiency FPP-98²¹**). **This is a repeat deficiency.**

CARE

MEDICAL CARE (MC)

ODO observed the facility’s pharmaceutical prescription pass-out procedures and toured the pharmacy room on October 30, 2024. ODO observed medical staff remove the labels from prescription bottles intended to be administered to four detainees housed in the Special Management Unit (SMU). Medical staff placed the detainees’ prescription medicines in unlabeled envelopes with the detainee’s name and A-Number, but did not label the envelopes with the medications in them. A licensed nurse confirmed nursing staff take the envelopes to the SMU and administer the medications from the envelope to the detainees, but do not take the medication administration record for each detainee. Removal of medication from pharmacy-labeled prescription bottles and repackaging them in unlabeled envelopes and administering medication without the use of a medication administration record do not comply with IHSC Medication Administration and rules of the Arizona Board of Nursing’s practice guidelines (**Deficiency MC-96²²**).

CONCLUSION

During this inspection, ODO assessed the facility’s compliance with 28 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 25 of those standards. ODO found 16 deficiencies in the remaining 3 standards. Since EFCF’s last rated inspection in October 2023, the facility’s overall compliance has trended downward. EFCF went from 1 deficient standard and 1 deficiency in October 2023 to 3 deficient standards and 16 deficiencies during this most recent inspection, which included 13 repeat deficiencies. EFCF completed its uniform corrective action plan for its follow-up inspection in May 2024; however, it may not have been sufficient to prevent the repeat deficiencies ODO identified during this inspection. ODO recommends ERO Phoenix continue to work with the facility to resolve the deficiencies that remain outstanding in accordance with contractual obligations.

²¹ “A logbook shall be maintained listing property description.” See ICE PBNDS 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(I).

²² “Does the detention facility have and comply with written policy and procedures for the management of pharmaceuticals, to include administration and management in accordance with state and federal law?” See ICE PBNDS 2011 (Revised 2016), Standard, Medical Care, Section (V)(G)(9).

Compliance Inspection Results Compared	FY 2024 Full Inspection (PBNDS 2011) (Revised 2016)	FY 2025 Full Inspection (PBNDS 2011) (Revised 2016)
Standards Reviewed	30	28
Deficient Standards	1	3
Overall Number of Deficiencies	1	16
Priority Component Deficiencies	0	0
Repeat Deficiencies	0	13
Areas Of Concern	0	0
Corrective Actions	0	0
Facility Rating	Superior	Acceptable/Adequate



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