



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
Follow-Up Compliance Inspection
2024-002-371**

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

**Eloy Federal Contract Facility
Eloy, Arizona**

May 21-23, 2024

FOLLOW-UP COMPLIANCE INSPECTION
of the
ELOY FEDERAL CONTRACT FACILITY
Eloy, Arizona

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FOLLOW-UP 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 follow-up compliance inspection of the Eloy Federal Contract Facility (EFCF) in Eloy, Arizona, from May 21 to 23, 2024.¹ This inspection focused on the standards found deficient during ODO’s last inspection of EFCF from October 24 to 26, 2023. 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] ERO also has a detention service manager assigned to the facility who splits his time with another facility. A warden handles daily facility operations and manages [REDACTED] support personnel. Trinity Services provides food services, ICE Health Service Corps 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 2021. In August 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 May 21, 2024)	[REDACTED]
Adult Female Population (as of May 21, 2024)	[REDACTED]

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

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 May 20, 2024.

³ *Ibid.*

FOLLOW-UP COMPLIANCE INSPECTION PROCESS

ODO conducts biannual oversight inspections of ICE detention facilities with an average daily population (ADP) of 10 or more detainees, and where detainees are housed for longer than 72-hours, to assess compliance with ICE National Detention Standards. In FY 2021, to meet congressional requirements, ODO began conducting follow-up inspections at all over-72-hour ICE detention facilities with an ADP of 10 or more detainees that ODO conducted a full inspection of earlier in the FY. Follow-up inspections focus on facility compliance with detention standards that directly affect detainee life, health, safety, and/or well-being, and other standards ODO found deficient during the previous rated inspection to assess the facility's corrective actions taken to address those previously cited deficiencies.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.

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 uniform corrective action plan (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 the full and follow-up inspection are annotated as "Repeat Deficiencies" in this report.

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
Sub-Total	0
Part 2 - Security	
Admission and Release	8
Custody Classification System	0
Facility Security and Control	0
Funds and Personal Property	18
Special Management Units	0
Staff-Detainee Communication	1
Use of Force and Restraints	0
Sub-Total	27
Part 4 - Care	
Food Service	0
Hunger Strikes	0
Medical Care	0
Medical Care (Women)	0
Personal Hygiene	1
Significant Self-harm and Suicide Prevention and Intervention	1
Sub-Total	2
Part 5 - Activities	
Recreation	0
Telephone Access	0
Sub-Total	0
Part 6 - Justice	
Grievance System	0
Sub-Total	0
Total Deficiencies	29

⁵ For greater detail on ODO's findings, see the *Follow-up 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.

DETAINEE RELATIONS

ODO interviewed 23 detainees, who each voluntarily agreed to participate. ODO offered interviews to five additional detainees and all five detainees declined. 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 she never received an eye exam during the intake process at the facility and was unable to read any printed material.

- Action Taken: ODO interviewed the ICE Assistant Health Services Administrator (AHSA) and found the detainee arrived at the facility on March 2, 2024, and during the intake process the detainee stated she did not have vision issues, nor did she wear eyeglasses. On May 22, 2024, a facility optometrist evaluated the detainee and fitted her for reading glasses on May 24, 2024.

Medical Care: One detainee stated he informed a facility nurse he had a toothache on the left side of his mouth and had not been evaluated by a facility dentist.

- Action Taken: ODO interviewed the ICE AHSA and found the detainee arrived at the facility on April 22, 2024, and did not report any dental issues until his health assessment on May 12, 2024.⁷ During his health assessment, the detainee reported having intermittent tooth pain on the left side of his mouth, but he did not report having any pain. The medical staff scheduled the detainee for a dental appointment on May 15, 2024; however, the detainee contracted chickenpox, preventing him from reporting for his scheduled appointment. On May 16, 2024, medical staff rescheduled his dental appointment for May 23, 2024. During the examination, the facility dentist completed an X-ray of the upper left area of the detainee's mouth and found tooth decay extending into the tooth's nerve. The dentist discussed treatment options with the detainee, such as a root canal versus extraction, and the potential consequences of refusing an extraction. The detainee confirmed his understanding and signed a refusal form. The dentist prescribed ibuprofen to be taken twice daily as needed, for 7 days with one refill.

FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

SECURITY

ADMISSION AND RELEASE (AR)

ODO observed the in-processing of [REDACTED] detainees and inventorying at the detainee property room, interviewed an EFCF intake lieutenant and the assistant chief of security, and reviewed [REDACTED] detainee

⁷ On March 28, 2024, ERO Custody Management approved a 90-day waiver for EFCF, extending the 14-day requirement for comprehensive health assessments to 21 days, which is why ODO did not cite a deficiency for not completing this detainee's comprehensive health assessment within 14 days.

files. ODO found the following deficiencies in all [REDACTED] files:

- Staff did not inventory nor receipt all detainee baggage and personal property (**Deficiency AR-2**⁸);
- The admission process for newly admitted detainees did not include inventory of personal property (**Deficiency AR-11**⁹);
- Staff did not inventory factory-sealed durable goods in accordance with facility procedures (**Deficiency AR-19**¹⁰);
- The facility did not have a procedure for inventory and receipt of detainee baggage and personal property (**Deficiency AR-38**¹¹);
- Facility staff did not prepare an itemized list of a detainee’s baggage and personal property using the personal property inventory form nor its equivalent (**Deficiency AR-40**¹²);
- Facility staff did not screen the orientation video produced by the facility administrator for every detainee to ensure viewing of all required topics (**Deficiency AR-62**¹³); and
- A facility processing officer did not place a copy of a completed inventory form in the detainees’ detention files (**Deficiency AR-91**¹⁴).

ODO reviewed [REDACTED] training records for the facility intake staff and supervisors, interviewed an EFCF intake lieutenant, and found in [REDACTED] out of [REDACTED] records, no documentation verifying staff members received and completed training on the admissions process (**Deficiency AR-10**¹⁵).

FUNDS AND PERSONAL PROPERTY (FPP)

ODO observed the in-processing of [REDACTED] detainees and inventorying in the property room, interviewed an EFCF intake lieutenant and the assistant chief of security, reviewed [REDACTED] detainee

⁸ “At intake, detainees shall be searched, and their personal property and valuables checked for contraband, inventoried, receipted and stored.” See ICE PBNDS 2011 (Revised 2016), Standard, Admission and Release, Section (V)(A).

⁹ “Admission processes for a newly admitted detainee shall include, but not be limited to inventory of personal property.” See ICE PBNDS 2011 (Revised 2016), Standard, Admission and Release, Section (V)(B)(1)(e).

¹⁰ “Staff shall also inspect all open containers, and inventory and store factory-sealed durable goods in accordance with facility procedures.” See ICE PBNDS 2011 (Revised 2016), Standard, Admission and Release, Section (V)(B)(3).

¹¹ “In accordance with standard ‘2.5 Funds and Personal Property,’ each facility shall have a procedure for taking inventory and receipt of detainee baggage and personal property (other than funds and valuables, which are addressed below).” See ICE PBNDS 2011 (Revised 2016), Standard, Admission and Release, Section (V)(B)(5).

¹² “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).

¹³ “At SPCs, CDFs, and dedicated IGSAs, the facility administrator shall produce an orientation video that covers the required topics listed below and shall screen it for every detainee.” See ICE PBNDS 2011 (Revised 2016), Standard, Admission and Release, Section (V)(F).

¹⁴ “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).

¹⁵ “Staff members shall be provided with adequate training on the admissions process at the facility.” See ICE PBNDS 2011 (Revised 2016), Standard, Admission and Release, Section (V)(B)(1).

files, and found the following deficiencies:

- Staff did not inventory detainee property in the presence of the detainee (**Deficiency FPP-22**¹⁶);
- Facility staff did not complete an itemized inventory of all detainee baggage and personal property using the personal property inventory form during the admissions process (**Deficiency FPP-80**¹⁷);
- The facility did not inventory all property, after another facility previously inventoried and sealed the property in a bag (**Deficiency FPP-81**¹⁸);
- Facility staff did not issue a Baggage Check form (Form I-77) or equivalent for each separate item of baggage or container (**Deficiency FPP-83**¹⁹);
- The personal property inventory form did not contain the description, quantity, and disposition of articles (**Deficiency FPP-87**²⁰);
- The personal property inventory form did not contain the general condition of the property (**Deficiency FPP-88**²¹);
- Facility staff did not properly inventory baggage and facility containers (**Deficiency FPP-90**²²);
- Facility staff did not issue a pre-numbered, three-part Form I-77 or its equivalent for each separate item of baggage or container (**Deficiency FPP-91**²³);
- Each Form I-77 or its equivalent did not bear the detainee’s full name, non-citizen number/facility detainee number, and the date (**Deficiency FPP-92**²⁴);
- The detainee’s signature did not appear on both the top (Part I) and bottom (Part III) of Form I-77 or its equivalent (**Deficiency FPP-93**²⁵);

¹⁶ “Staff shall inventory detainee property only in the presence of the detainee(s), unless instructed otherwise by the facility administrator.” See ICE PBND 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(D).

¹⁷ “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 PBND 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(I).

¹⁸ “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 PBND 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(I).

¹⁹ “A Form I-77 or equivalent shall also be issued for each separate item of baggage or container.” See ICE PBND 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(I).

²⁰ “The personal property inventory form must contain the following information at a minimum: description, quantity, and disposition of articles; disposition may be indicated as either ‘S’ for ‘safekeeping’ (by the facility); or ‘R’ for ‘retained’ (by the detainee).” See ICE PBND 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(I)(3)(a-b).

²¹ “The personal property inventory form must contain the following information at a minimum: ...
4. General condition of the property.”

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

²² “After being properly inventoried and inspected for contraband, all baggage and facility containers shall be tagged and stored securely.” See ICE PBND 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(I).

²³ “A pre-numbered, three-part Form I-77 or its equivalent shall be issued for each separate item of baggage or container.” See ICE PBND 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(I).

²⁴ “Each Form I-77 or its equivalent shall bear the detainee’s full name and A-number/facility detainee number and the date.” See ICE PBND 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(I)(1).

²⁵ “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 PBND 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(I)(2).

- Facility staff did not attach the top part of Form I-77 or its equivalent to the detainee's property (**Deficiency FPP-94**²⁶);
- Part II of Form I-77 did not provide a description of the property container and staff did not attach it to the detainee's booking card or detention file (**Deficiency FPP-95**²⁷);
- Facility staff did not give Part III (bottom) of Form I-77 to the detainee, and the reverse side had no brief description of the property container (**Deficiency FPP-96**²⁸);
- Facility staff did not maintain a logbook listing the detainee's name, non-citizen number or facility detainee number, Form I-77 number, security tie-strap number, property description, date issued, nor date returned (**Deficiency FPP-98**²⁹);
- Facility staff did not tag baggage and other property only with Form I-77 nor its equivalent (**Deficiency FPP-99**³⁰);
- A detainee did not present the white copy of both the Property Receipt Logbook form (Form G-589) and Form I-77 or equivalents for all receipted property upon release or transfer (**Deficiency FPP-127**³¹);
- Staff did not compare signatures on Form I-77 receipt portions nor match cash funds, negotiable instruments, and valuables against property descriptions on Form G-589 (**Deficiency FPP-128**³²); and
- For each Form I-77 presented, staff did not compare the signature on the detainee's portion with the portion on the stored item and the portion on the booking card (**Deficiency FPP-129**³³).

STAFF-DETAINEE COMMUNICATION (SDC)

ODO interviewed ERO Phoenix staff and although ERO Phoenix staff review and respond to detainee submitted hardcopy ICE requests, ERO Phoenix staff do not record those hardcopy ICE

²⁶ "The top part of the Form I-77 or its equivalent shall be attached to the detainee's property." See ICE PBNDS 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(I)(3).

²⁷ "The center part shall provide a brief description of the property container (for example, black suitcase, paper bag, etc.) and shall be attached to the detainee's booking card or detention file." See ICE PBNDS 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(I)(4).

²⁸ "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).

²⁹ "A logbook shall be maintained listing detainee name, A-number or facility detainee number, I-77 number, security tie-strap number, property description, date issued, and date returned." See ICE PBNDS 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(I).

³⁰ "Tagged baggage and other property tagged only with a Form I-77, or equivalent, shall then be stored in the facility baggage storage area." See ICE PBNDS 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(I).

³¹ "After checking the I-385 Form or equivalent, wristbands and property receipts to positively identify the detainee being released or transferred, the detainee shall present the white copy of both the G-589 Form(s) and I-77 Form(s) or equivalents for all receipted property." See ICE PBNDS 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(K).

³² "Staff shall compare signatures on Form I-77 receipt portions, and match cash funds, negotiable instruments, and valuables against property descriptions on G-589 forms." See ICE PBNDS 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(K).

³³ "For each I-77 presented, staff shall compare the signature on the detainee's portion with the portion on the stored item and the portion on the booking card." See ICE PBNDS 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(K).

requests in a logbook (**Deficiency SDC-19**³⁴).

CARE

PERSONAL HYGIENE (PH)

ODO observed ERO Phoenix staff members did not announce their presence when entering opposite-gender dorms (**Deficiency PH-43**³⁵).

SIGNIFICANT SELF-HARM AND SUICIDE PREVENTION AND INTERVENTION (SSHSPI)

ODO interviewed the ICE AHSA, reviewed the suicide watch logs of █ detainees placed on continuous monitoring, and found in █ out of █ logs, 6 instances where medical staff documented monitoring of detainees between 16 and 28 minutes (**Deficiency SSHSPI-34**³⁶). **This is a priority component.**

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 18 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 13 of those standards. ODO found 29 deficiencies in the remaining 5 standards. Since EFCF's last full 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 5 deficient standards and 29 deficiencies during this most recent inspection. ODO found the facility stopped inventorying and receipting detainee personal property, which resulted in 18 deficiencies in FPP and 8 deficiencies in AR. ODO received a completed UCAP for the inspection conducted in October 2023, and ODO noted the facility had no repeat deficiencies. ODO recommends ERO Phoenix continue to work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations.

³⁴ "All requests shall be recorded in a logbook (or electronic logbook) specifically designed for that purpose." *See* ICE PBNDS 2011 (Revised 2016), Standard, Staff-Detainee Communication, Section (V)(B)(2).

³⁵ "Staff of the opposite gender shall announce their presence when entering an area where detainees are likely to be showering, performing bodily functions, or changing clothing." *See* ICE PBNDS 2011 (Revised 2016), Standard, Personal Hygiene, Section (V)(E).

³⁶ "The monitoring must be documented every 15 minutes or more frequently if necessary." *See* ICE PBNDS 2011 (Revised 2016), Standard, Significant Self-harm and Suicide Prevention and Intervention, Section (V)(F).

Compliance Inspection Results Compared	FY 2024 Full Inspection (PBNDS 2011) (Revised 2016)	FY 2024 Follow-Up Inspection (PBNDS 2011) (Revised 2016)
Standards Reviewed	30	18
Deficient Standards	1	5
Overall Number of Deficiencies	1	29
Priority Component Deficiencies	0	1
Repeat Deficiencies	0	0
Areas Of Concern	1	0
Corrective Actions	0	0
Facility Rating	Superior	N/A