



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
Special Review
2024-003-399**

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

**Florence Staging Facility
Florence, Arizona**

June 11-13, 2024

**SPECIAL REVIEW
of the
FLORENCE STAGING FACILITY
Florence, Arizona**

TABLE OF CONTENTS

FACILITY OVERVIEW	4
SPECIAL REVIEW PROCESS	5
FINDINGS BY PERFORMANCE-BASED NATIONAL DETENTION STANDARDS 2011 (REVISED 2016) MAJOR CATEGORIES.....	6
DETAINEE RELATIONS	7
SPECIAL REVIEW FINDINGS	7
SECURITY	7
SPECIAL MANAGEMENT UNITS.....	7
CONCLUSION	7

SPECIAL REVIEW TEAM MEMBERS



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Acting Section Chief	ODO
Contractor	Creative Corrections
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 special review of the Florence Staging Facility (FSF) in Florence, Arizona, from June 11 to 13, 2024.¹ The facility opened in 1963 and is owned and operated by ICE. ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at FSF in 1986 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]

[REDACTED] An officer in charge handles daily facility operations and manages [REDACTED] support personnel. Akima Global Services, LLC provides food services and ICE Health Service Corps provides medical care at the facility. The facility was accredited by the American Correctional Association in August 2021. In May 2022, FSF 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 June 11, 2024)	[REDACTED]
Adult Female Population (as of June 11, 2024)	[REDACTED]

This inspection was ODO’s first rated compliance inspection of FSF.

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

² Data Source: ERO Custody Management Division Authorized Facility List as of June 10, 2024.

³ *Ibid.*

SPECIAL REVIEW PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population (ADP) 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.

In FY 2022, ODO began conducting special reviews of under 72-hour ICE detention facilities with an ADP of 1 or more detainees and over 72-hour ICE detention facilities with an ADP of 1 to 9 detainees. Additionally, ODO began conducting unannounced inspections of ICE detention facilities, regardless of ADP of detainees, as well as reviews of ICE special/emerging detention facilities/programs. As such, these facility inspections will result in an ODO Inspection Compliance Rating; however, for facilities that are not contractually obligated to an ICE NDS, those ratings will be for ERO’s informational purposes. ODO will conduct a complete review of several core standards, in accordance with the facility’s contractually required ICE NDS or in accordance with the ICE NDS listed in the current ERO Custody Management Division Authorized Facility List for facilities that are not contractually obligated to an ICE NDS, which may include but are not limited to Medical Care/Health Care, Medical Care (Women)/Health Care (Females), Significant Self-harm and Suicide Prevention and Intervention, Hunger Strikes, Food Service, Environmental Health and Safety, Special Management Units (SMU) or Hold Rooms (if the facility does not have an SMU), Use of Force and Restraints/Use of Physical Control Measures, and Sexual Abuse and Assault Prevention and Intervention.

Upon completion of each special review or unannounced 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 uniform corrective action plans (UCAPs); 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**

PBND Standards 2011 (Revised 2016) Standards Inspected^{5,6}	Deficiencies
Part 1 - Safety	
Environmental Health and Safety	0
Sub-Total	0
Part 2 - Security	
Sexual Abuse and Assault Prevention and Intervention	0
Special Management Units	3
Staff-Detainee Communication	0
Use of Force and Restraints	0
Sub-Total	3
Part 4 - Care	
Food Service	0
Hunger Strikes	0
Medical Care	0
Medical Care (Women)	0
Significant Self-harm and Suicide Prevention and Intervention	0
Sub-Total	0
Total Deficiencies	3

⁵ For greater detail on ODO’s findings, see the *Special Review Findings* section of this report.

⁶ During a special review, ODO will review a facility’s compliance with at least 10 individual standards.

DETAINEE RELATIONS

ODO attempted to interview 30 detainees; however, all detainees declined ODO's request.

SPECIAL REVIEW FINDINGS

SECURITY

SPECIAL MANAGEMENT UNITS (SMU)

ODO interviewed the SDDO and DO, reviewed the facility's SMU policy, 27 SMU housing unit records, and 27 observation logs, and found the following deficiencies:

- No log of whether a detainee ate in 2 out of 27 housing unit records (**Deficiency SMU-98⁷**);
- No medical staff signature in 2 out of 27 housing unit records (**Deficiency SMU-100⁸**); and
- No recorded detainee observation every 30 minutes in 18 out of 27 observation logs. Specifically, facility staff recorded their observations at time intervals between 31- and 60-minutes from the previously recorded observation (**Deficiency SMU-126⁹**). **This is a priority component.**

CONCLUSION

During this special review, ODO assessed the facility's compliance with 10 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 9 of those standards. ODO found three deficiencies in the remaining standard. Because this was ODO's first inspection of FSF, ODO did not conduct a trend analysis. ODO recommends ERO Phoenix work with the facility to resolve the remaining deficiencies in accordance with contractual obligations.

⁷ "The special housing unit officer shall immediately record:

1) Whether the detainee ate, showered, recreated and took any medication."

See ICE PBNDS 2011 (Revised 2016), Standard, Special Management Units, Section (V)(D)(3)(a)(1).

⁸ "The facility medical officer shall sign each individual's record when he/she visits a detainee in the SMU." See ICE PBNDS 2011 (Revised 2016), Standard, Special Management Units, Section (V)(D)(3)(b).

⁹ "Detainees in SMU shall be personally observed and logged at least every 30 minutes on an irregular schedule." See ICE PBNDS 2011 (Revised 2016), Standard, Special Management Units, Section (V)(M).

Compliance Inspection Results Compared	No Previous ODO Inspection	FY 2024 Special Review (PBNS 2011) (Revised 2016)
Standards Reviewed	N/A	10
Deficient Standards	N/A	1
Overall Number of Deficiencies	N/A	3
Priority Component Deficiencies	N/A	1
Repeat Deficiencies	N/A	N/A
Areas Of Concern	N/A	0
Corrective Actions	N/A	0
Facility Rating	N/A	Good ¹⁰

¹⁰ ODO revised its rating system at the end of FY 2023, and beginning in FY 2024, facilities rated as “Superior” will have no or very minimal deficiencies and will have no repeat or priority component deficiencies.