



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
2024-002-414**

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

**Moshannon Valley Processing Center
Philipsburg, Pennsylvania**


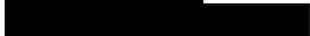
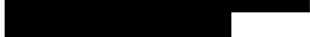



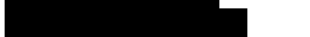
July 30-August 1, 2024

FOLLOW-UP COMPLIANCE INSPECTION
of the
MOSHANNON VALLEY PROCESSING CENTER
Philipsburg, Pennsylvania

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FOLLOW-UP COMPLIANCE INSPECTION TEAM MEMBERS

	Team Lead	ODO
	Senior Inspections and Compliance Specialist	ODO
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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 Moshannon Valley Processing Center (MVPC) in Philipsburg, Pennsylvania, from July 30 to August 1, 2024.¹ This inspection focused on the standards found deficient during ODO’s last inspection of MVPC from March 5 to 7, 2024. The facility opened in 2006 and is owned and operated by The GEO Group, Inc. (GEO). The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at MVPC in 2021 under the oversight of ERO’s Field Office Director in Philadelphia (ERO Philadelphia). The facility operates under the Performance-Based National Detention Standards (PBNDS) 2011 (Revised 2016).

[REDACTED] A facility administrator handles daily operations and manages [REDACTED] support personnel. GEO provides food services and medical care, and Keefe Commissary provides commissary services at the facility. The facility was accredited by the American Correctional Association in January 2023 and the National Commission on Correctional Health Care in July 2023. In March 2023, MVPC 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 July 30, 2024)	[REDACTED]
Adult Female Population (as of July 30, 2024)	[REDACTED]

During its last full inspection, in Fiscal Year (FY) 2024, ODO found 8 deficiencies in the following areas: Correspondence and Other Mail (2); Detainee Transfers (1); Medical Care (4); and Significant Self-harm and Suicide Prevention and Intervention (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 July 29, 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	0
Custody Classification System	2
Facility Security and Control	0
Funds and Personal Property	0
Special Management Units	0
Staff-Detainee Communication	0
Use of Force and Restraints	0
Sub-Total	2
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
Part 5 - Activities	
Correspondence and Other Mail	0
Telephone Access	0
Sub-Total	0
Part 6 - Justice	
Grievance System	0
Sub-Total	0
Part 7 - Administration and Management	
Detainee Transfers	0
Sub-Total	0
Total Deficiencies	2

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 24 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. However, two detainees advised ODO about thoughts of harming themselves, and ODO contacted facility medical staff and ERO Philadelphia to ensure proper treatment of the detainees. All detainees reported satisfaction with facility services except for the concerns listed below.

Medical Care: One detainee stated he felt like harming himself in March 2024.

- Action Taken: The detainee stated he felt like harming himself in March 2024 during an interview with ODO on June 30, 2024. ODO promptly reported the information to MVPC medical staff and ERO Philadelphia. MVPC’s licensed psychologist met with the detainee, and the detainee stated he did not feel suicidal at the time of the evaluation. MVPC’s mental health department had been meeting with the detainee once a month since March 2024 and prescribed Paxil (30 mg) for anxiety and depression. MVPC staff informed the detainee to submit a sick call request for mental health if needed and cleared him to return to his housing unit.

Medical Care: One detainee stated she had thoughts of harming herself in the past; however, she referenced no specific timeframe.

- Action Taken: The detainee stated she felt like harming herself but with no reference to a particular time during an interview with ODO on June 30, 2024. ODO promptly reported the information to MVPC medical staff and ERO Philadelphia. MVPC’s licensed psychiatrist met with the detainee, and the detainee stated she felt better and had no recent suicidal thoughts. MVPC’s mental health department had been meeting with her since June 7, 2024, and prescribed Zoloft (100 mg), once per day. MVPC medical staff cleared the detainee to return to her housing unit.

FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

SECURITY

CUSTODY CLASSIFICATION SYSTEM (CCS)

ODO reviewed MVPC’s classification policy and [REDACTED] detention files of detainees, interviewed MVPC’s classification manager, and found in [REDACTED] out of [REDACTED] files, a first-line supervisor did not review and approve a detainee’s ICE custody classification form (**Deficiency CCS-9**⁷).

ODO reviewed MVPC’s classification policy and [REDACTED] detention files of detainees, interviewed

⁷ “Each facility administrator shall require that the facility’s classification system ensures the following: ...

4. Each detainee’s classification shall be reviewed and approved by a first-line supervisor or classification supervisor.”

See ICE PBNDS 2011(Revised 2016), Standard, Custody Classification System, Section (V)(A)(4).

MVPC’s classification manager, and found in █ out of █ files, neither the designated classification supervisor nor facility administrator designee reviewed the intake processing officer’s classification forms for accuracy and completeness and to ensure facility staff assigned each detainee to the appropriate housing unit (**Deficiency CCS-31**).⁸

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 17 of those standards. ODO found two deficiencies in the remaining standard. Since MVPC’s last full inspection in March 2024, the facility has trended upward. MVPC went from 4 deficient standards and 8 deficiencies including 2 priority components in March 2024 to 1 deficient standard and 2 deficiencies during this most recent inspection. ODO has not received a completed UCAP for its last inspection in March 2024. ODO recommends ERO Philadelphia continue to work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations.

Compliance Inspection Results Compared	FY 2024 Full Inspection (PBNDS 2011) (Revised 2016)	FY 2024 Follow-Up Inspection (PBNDS 2011) (Revised 2016)
Standards Reviewed	29	18
Deficient Standards	4	1
Overall Number of Deficiencies	8	2
Priority Component Deficiencies	2	0
Repeat Deficiencies	0	0
Areas Of Concern	0	0
Corrective Actions	0	0
Facility Rating	Good	N/A

⁸ “The designated classification supervisor or facility administrator designee shall review the intake processing officer’s classification files for accuracy and completeness and ensure that each detainee is assigned to the appropriate housing unit.” See ICE PBNDS 2011 (Revised 2016), Standard, Custody Classification System, Section (V)(E).