

U.S. Department of Homeland Security  
425 I Street, NW  
Washington, DC 20536



**U.S. Immigration  
and Customs  
Enforcement**

MEMORANDUM FOR: John P. Torres  
Director

FROM: [REDACTED] b6, b7c  
Detention and Deportation Officer  
Detention Standards Compliance Unit

SUBJECT: San Pedro Service Processing Center Annual Review

The Detention Standards Compliance Unit conducted the annual headquarters detention review of the San Pedro Service Processing Center (SPC) on August 28-30, 2007. Headquarters Staff Officer [REDACTED] b6, b7c supervised the review and was assisted by team members [REDACTED] b6, b7c and [REDACTED] b6, b7c. Additionally, the recently hired contractor Creative Corrections participated in the review as initial training. Creative Corrections is one of the contracts that will take over the reviews of all Service Processing Centers (SPCs), Contract Detention Facilities (CDFs) and Intergovernmental Service Agreement (IGSA) Facilities.

**Type of Review**

This review is a scheduled Headquarters Review and was conducted to determine overall compliance with the Immigration and Customs Enforcement (ICE) National Detention Standards.

**Review Summary**

The National Commission on Correctional Health care (NCCHC) and the Joint Commission for Accreditation of Healthcare Organizations (JCAHO) accredit the San Pedro SPC. The facility lost their American Correctional Association (ACA) re-accreditation during the Commission hearing in August 2007. An ACA Technical Assistance visit in March 2007 identified chemical control as a Mandatory Standard in non-compliance. The facility did not address this issue prior to the actual review in May 2007.

NCCHC: June 2005  
JCAHO: December 2005

**2006 Review**

Acceptable	38
Deficient	0
At Risk	0
Repeat Deficiency	0

**2007 Review**

Acceptable	34
Deficient	2
At Risk	2
Repeat Deficiency	0

The following standards received a rating of **At-Risk**.

**Food Service (At-Risk):**

It is ICE policy to provide detainees with nutritious, attractively presented meals, prepared in a sanitary manner while identifying, developing and managing resources to meet the operational needs of the food service program.

The overall sanitation of food service area was found to be extremely poor (see attached pictures). Detainee trays contained old food residue, cooking utensils and equipment were dirty and mold was located in several areas of the kitchen. The dishwasher temperature measured at 122 degrees and not the required 180 degrees, which is needed to properly sanitize trays and other cooking utensils. This presents a serious food borne illness risk. Other issues identified included:

- Broken floor tiles, chipped paint, rusted doorframes
- Caustic chemicals were found unsecured as identified in May 2007.
- No documented formal training provided to kitchen workers regarding safe food handling and sanitation.
- Posted cleaning schedules are not being followed.
- Food carts were dirty and were not maintaining the appropriate temperatures.
- The facility is not following the required common fare menu.
- Kosher meals are not being served on disposable trays with disposable utensils.
- Kosher meals are not being prepared separately from the general population meals.
- Weekly inspections are not being documented accurately.
- Temperatures logged by employees do not reflect the actual temperature of the food.

The position of Food Service Administrator has been vacant for approximately two years. During this time, Senior Cooks have assisted in completing the tasks supervised by this position. The entire food service operation will be transferred to a contractor in September 2007.

**Recommendation(s):**

- All caustic chemicals need to include an accurate inventory. All chemicals need to be secured.
- Kitchen workers need to be trained regarding safe food handling and sanitation. This training must be documented with the signature of each participating detainee.
- Cleaning schedules must be not only posted but also followed.
- Food carts must be sanitized after each meal.
- Staff must monitor the temperature of each food cart to ensure that it is maintaining required temperatures.
- The facility is required to adhere to the common fare menu.
- Kosher meals must be served on disposable trays with disposable utensils.
- Weekly inspections need to be completed and documented with accurate information.
- Employees must document the actual temperature taken, not what is required.

- Administrative staff need to visit the kitchen on a daily basis. It is apparent from the old dirt and mold discovered that this is not the general practice of the facility.

#### Access to Medical Care (At-Risk)

Within ICE facilities, detainees shall have access to medical services that promote detainee health and general well being. Additionally, medical facilities in SPCs, and CDFs will maintain current accreditation by NCHHC and JCAHO.

The overall medical care provided to detainees was found to be poor and unorganized. Medical charts reviewed demonstrate that detainees are not being reviewed within the 14 day required period. The physical exams were found to be either incomplete or lacking detainee documentation. Other issues identified included:

- Documentation could not be located to verify that Mental Health screening is being completed or reviewed by appropriate personnel.
- Medical request (sick call) slips were not available in Chinese and it was identified that the slips are not being delivered to staff in a timely manner with documentation to indicate that follow-up was provided.
- Interpreter lines are not provided in the detainee housing units.
- Staff are not aware of the required "4 minute" response time required in response to all health related emergencies. A random audit of ten employees demonstrated that one employee was familiar with this requirement.
- Officers currently distribute Tylenol within the pods. Staff interviewed stated that they have not received training regarding required referrals to medical. The logbooks reviewed indicate that the distribution of Tylenol is not being logged. The facility began documenting this practice on 8/26/07.
- The facility does not currently have an automatic defibrillator device (AED) on grounds.

The review also identified that several detainees have not received the required follow-up care as follows:

#### Case #1

b6,b7c

A 71-year-old female who arrived at the facility on 2/16/07. The detainee arrived with paperwork stating that she had an ultrasound that showed a suspicious breast lump with recommendations for a follow up biopsy. Upon review of the medical record the physical exam (PE) was noted to be incomplete and there was no mention or documentation noting the presence of a breast lump. A further review of the chart showed that to date, no follow up or referral for a biopsy has been completed.

#### Case#2

b6,b7c

A Male detainee with a history of being found on the floor vomiting and having an apparent seizure (LA Staging). The Detainee was sent to the hospital and later released and transferred to San Pedro on 8/3/07. The detainee was noted to have a history of alcoholism and possible ETOH (alcohol) withdrawal. The detainee's case was referred to the medical provider who ordered that the detainee be "monitored". No monitoring was performed and vital signs were not obtained until 8/6/07. A lower bunk was ordered however; the detainee later fell out of his

bunk resulting in a large laceration to his head. Upon a review of the chart, it was noted that a 14-day physical exam had not been completed.

**Access to Medical Care (At-Risk) (Continued)**

Recommendation:

It is recommended that the Department of Public Health Services (DIHS) provide on-site assistance to review all detainee medical charts to ensure that physical exams are being completed in a timely manner and that the required follow-up is being completed. Additionally, all files need to demonstrate this practice with thorough documentation. It appears that additional basic training is needed regarding 14-day physicals, documentation, and follow-up for noted medical problems

**Environmental Health and Safety (Deficient)**

Each facility will establish a hazardous materials program for the control, handling, storage, and use of flammable, toxic, and caustic materials. This will protect detainees, staff, and visitors, preventing breaches in safety and security. Among other things, the facility will include the identification and labeling of hazardous materials in accordance with applicable regulations, standards and codes (Occupational Safety and Health Administration (OSHA), National Fire Protection Association, ect); will provide warnings of incompatible materials, ect. Every facility will establish a system for storing, issuing, and maintaining inventories of and accountability for hazardous materials. The following areas were found in non-compliance regarding Environmental Health and Safety:

- Material Safety Data Sheets (MSDS) are not available to detainees.
- Detainees in the Food Service area have access to hazardous materials without direct supervision.
- Several vents were found with obstructions during the initial tour of the facility.
- Toxic and caustic materials located in food service were found not secured.
- The facility does not document that detainees are trained prior to utilizing flammable, toxic, or caustic materials. Although a training tape is available, the facility has not documented that detainees have viewed.
- The facility has not designated a safety officer to inspect the facility and monitor progress.
- The facility does not consistently maintain inspection reports, including corrective action taken.
- Schedules are not being consistently followed regarding standard cleaning practices. Several Officers were not aware of a cleaning schedule. Old dirt was discovered throughout the facility and the overall sanitation of the facility was found to be poor.

Recommendation (s)

- MSDS sheets shall be utilized throughout the facility for both detainees and staff.
- Detainees handling hazardous materials shall be trained and the training shall be documented.
- All toxic materials throughout the facility shall be secured and include a running and accurate inventory. As noted, the facility lost ACA accreditation due to this standard.
- The facility shall designate a safety officer to inspect the facility and maintain consistent reports, to include any corrective action taken.

- The facility shall post and follow a cleaning schedule that both detainees and staff are informed of.
- It is recommended that the caustic storage site have a permanently fixed emergency shower and eyewash station installed. Additionally, it is recommended that all chemicals be evaluated or reviewed as to actual need as well as quantities on hand. Many chemicals have available substitutions that are not hazardous and would not require the controls and documentation practices currently involved.
- Battery charging was being done within five feet of one flammable storage cabinet and within 25-30 feet of all of them. Battery charging produces a very high risk of ignition source and should not be completed close to the flammable storage area. This practice should cease immediately.
- There are multiple locations noted where designated emergency exit doors have a sliding type latch device in addition to the standard cylinder lock. This condition generates two immediate concerns: 1) The cylinder locks may not be pressure sensitive detention type locks. If not, they do not meet the intent of NFPA, LSC 101 for locking devices on means of egress doors in detention facilities. 2) The sliding bolt type latch is a violation of NFPA, LSC 101, Ch. 7-2.1.5.9.2, "a release mechanism shall open the door with not more than one operation." Other concerns with this latch device would include areas such as the library. This condition would allow for this area to be more easily barricaded from the inside. This is an issue that could be addressed with the local fire authority.

**Staff/ Detainee Communication (Deficient)**

The requirement to communicate with detainees was implemented to ensure detainees had full access to immigration staff in charge of their immigration case. Detainees generally do not have representation and usually have no other method for obtaining information regarding their custody status or pending removal from the United States. A lack of communication can leave a detainee frustrated and can result in a delay for court proceedings, removal, and infrequently can cause a detainee to be disruptive. Deportation staff, by policy, has a responsibility to communicate effectively with detainees assigned to their respective dockets and ensure that the detainee receives everything they are entitled to by policy and/or regulation. The following areas of deficiency were noted at San Pedro Service Processing Center:

- Documentation could not be located to demonstrate that weekly visits are being conducted within detainee living units.
- The facility does not consistently post Detention and Deportation Officers scheduled visits. Several detainees noted that they do not have the opportunity to speak with staff on a consistent basis.

- A database is currently utilized to record and monitor all staff detainee request forms. The logbook does not demonstrate that detainee requests are being responded to within 72 hours as required.

Recommendation (s)

- A schedule of Detention and Deportation Officer visits shall be posted in all living units and updated as needed.
- Detention and Deportation Officers shall sign the logbook when in housing units to document their visits.
- All detainee request forms shall be responded to within 72 hours as required. The current database shall be updated on a daily basis to indicate what response was provided.
- The facility shall implement the Staff Detainee Communication Model Protocol issued by Director Torres in June 2007.

**Advisories**

**Classification**

On two occasions, detainees of several classification levels were mixed together within holding cells.

**Tool Control**

Power hand tools were discovered in a box and not inventoried on a shadow board. Although the box was inventoried, the tools could not be easily identified as missing.

**Chits**

Several tools were missing off the shadow board and a chit was not utilized to identify the location of the tool.

**Best Practices**

**Correspondence and Other Mail**

The Officers in the Mail Room are extremely organized and process approximately 200-300 letters per day. Detainees are currently required to sign for all letters received.

**Relationship with the Federal Bureau of Prison (BOP) and Contractor MVM**

The facility has a positive working relationship with both agencies.

**RIC Observations**

The facility was notified in June 2007 regarding the date of the scheduled review. The facility took immediate action to correct noted deficiencies and areas of concern and responded in a professional manner. During the review, sanitation was a significant concern in the Food Service Department and failure to meet the requirements of the Staff Detainee Communication Standard was also identified. As noted in the report, chemical control remains a problem at the facility.

As a result of the findings discovered by the review team, Detention and Deportation Officer [REDACTED] and Contractor [REDACTED] remained at the facility throughout the holiday weekend to assist in developing a plan of action for all noted deficiencies and to monitor the facilities short term progress as they worked to correct each identified deficiency or area of concern. This is an ongoing process.

**Recommended Rating and Justification**

It is the RIC recommendation that the facility receive a rating of "At-Risk." The facility complies with 34 of 38 ICE National Detention Standards. The standards rated as At Risk and Deficient are quality of life issues that need to be corrected immediately and monitored on a regular basis.

**RIC Assurance Statement**

Findings of compliance are documented on the G-324a inspection form and are fully supported by documentation in the review file.

cc: Official File  
HQDRO Chron File  
ICE:HODRO [REDACTED] 2-2943:9/5/07

b2High

**A. Type of Facility Reviewed**

ICE Service Processing Center  
 ICE Contract Detention Facility  
 ICE Intergovernmental Service Agreement

**B. Current Inspection**

Type of Inspection  
 Field Office  HQ Inspection  
 Date[s] of Facility Review  
 August 28-30, 2007

**C. Previous/Most Recent Facility Review**

Date[s] of Last Facility Review  
 August 14-18, 2006  
 Previous Rating  
 Superior  Good  Acceptable  Deficient  At-Risk

**D. Name and Location of Facility**

Name  
 San Pedro Service Processing Center  
 Address (Street and Name)  
 2001 South Seaside Avenue  
 City, State and Zip Code  
 San Pedro, CA 90731  
 County  
 Los Angeles  
 Name and Title of Chief Executive Officer (Warden/OIC/Superintendent)  
 Assistant Field Office Director  
 Telephone # (Include Area Code)  
 (310)   
 Field Office / Sub-Office (List Office with oversight responsibilities)  
 Los Angeles  
 Distance from Field Office  
 22

**E. ICE Information**

Name of Inspector (Last Name, Title and Duty Station)  
 DDO / Washington DC  
 Name of Team Member / Title / Duty Location  
 DO/ Bakersfield, CA  
 Name of Team Member / Title / Duty Location  
 DDO/ Washington DC  
 Name of Team Member / Title / Duty Location  
 DDO/ Washington DC

**F. CDF/IGSA Information Only**

Contract Number  
 N/A  
 Basic Rates per Man-Day  
 Other Charges: (If None, Indicate N/A)  
 ; ; ;  
 Estimated Man-days Per Year

**G. Accreditation Certificates**

List all State or National Accreditation[s] received:  
 NCCHC and JCAHO (Both in 2005)  
 Check box if facility has no accreditation[s]

**H. Problems / Complaints (Copies must be attached)**

The Facility is under Court Order or Class Action Finding  
 Court Order  Class Action Order  
 The Facility has Significant Litigation Pending  
 Major Litigation  Life/Safety Issues  
 Check if None.

**I. Facility History**

Date Built  
 1933  
 Date Last Remodeled or Upgraded  
 0/6/2005  
 Date New Construction / Bedspace Added  
 N/A  
 Future Construction Planned  
 Yes  No Date:  
 Current Bedspace  
 467  
 Future Bedspace (# New Beds only)  
 Number: N/A Date:

**J. Total Facility Population**

Total Facility Intake for previous 12 months  
 6,677 (July 2006 through June 2007)  
 Total ICE Mandays for Previous 12 months  
 187,210

**K. Classification Level (ICE SPCs and CDFs Only)**

	L-1	L-2	L-3
Adult Male	48	106	259
Adult Female	59	25	29

**L. Facility Capacity**

	Rated	Operational	Emergency
Adult Male	320	252	454
Adult Female	130	130	130

Facility holds Juveniles Offenders 16 and older as Adults

**M. Average Daily Population**

	ICE	USMS	Other
Adult Male	410	N/A	N/A
Adult Female	115	N/A	N/A

**N. Facility Staffing Level**

Security:  
 Support:  
 30



### Significant Incident Summary Worksheet

For ICE to complete its review of your facility, the following information must be completed prior to the scheduled review dates. The information on this form should contain data for the past twelve months in the boxes provided. The information on this form is used in conjunction with the ICE Detention Standards in assessing your Detention Operations against the needs of the ICE and its detained population. This form should be filled out by the facility prior to the start of any inspection. Failure to complete this section will result in a delay in processing this report and the possible reduction or removal of ICE' detainees at your facility.

<i>Incidents</i>	<i>Description</i>	Jan – Mar	Apr – Jun	Jul – Sept	Oct – Dec
Assault: Offenders on Offenders <sup>1</sup>	Types (Sexual <sup>2</sup> , Physical, etc.)	Physical	Physical	Physical	Physical
	With Weapon	0	0	0	0
	Without Weapon	16	21	25	19
Assault: Detainee on Staff	Types (Sexual Physical, etc.)	N/A	Physical	Physical	Physical
	With Weapon	0	0	0	0
	Without Weapon	0	1	2	1
Number of Forced Moves, incl. Forced Cell moves <sup>3</sup>		0	0	0	0
Disturbances <sup>4</sup>		0	0	0	0
Number of Times Chemical Agents Used		0	0	1	0
Number of Times Special Reaction Team Deployed/Used		0	0	0	0
# Times Four/Five Point Restraints applied/used	Number/Reason (M=Medical, V=Violent Behavior, O=Other)	0	0	0	0
	Type (C=Chair, B=Bed, BB=Board, O=Other)	N/A	N/A	N/A	N/A
Offender / Detainee Medical Referrals as a result of injuries sustained.		11	13	15	9
Escapes	Attempted	0	0	0	0
	Actual	0	0	0	0
Grievances:	# Received	4	4	12	6
	# Resolved in favor of Offender/Detainee	1	1	0	0
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)	N/A	N/A	N/A	N/A
	Number	0	0	0	0
Psychiatric / Medical Referrals	# Medical Cases referred for Outside Care	10	11	10	18
	# Psychiatric Cases referred for Outside Care	6	14	12	21

<sup>1</sup> Any attempted physical contact or physical contact that involves two or more offenders

<sup>2</sup> Oral, anal or vaginal penetration or attempted penetration involving at least 2 parties, whether it is consenting or non-consenting

<sup>3</sup> Routine transportation of detainees/offenders is not considered "forced"

<sup>4</sup> Any incident that involves four or more detainees/offenders, includes gang fights, organized multiple hunger strikes, work stoppages, hostage situations, major fires, or other large scale incidents.

### DHS/ICE Detention Standards Review Summary Report

1. Acceptable 2. Deficient 3. At Risk 4. Repeat Finding 5. Not Applicable

#### Legal Access Standards

	1.	2.	3.	4.
1. Access to Legal Materials	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Group Presentations on Legal Rights	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Visitation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Telephone Access	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Detainee Services

5. Admission and Release	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Classification System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Correspondence and Other Mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Detainee Handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Food Service	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
10. Funds and Personal Property	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Detainee Grievance Procedures	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Issuance and Exchange of Clothing, Bedding, and Towels	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Marriage Requests	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Non-Medical Emergency Escorted Trip	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Recreation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Religious Practices	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Voluntary Work Program	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Health Services

18. Hunger Strikes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Medical Care	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
20. Suicide Prevention and Intervention	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Terminal Illness, Advanced Directives and Death	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Security and Control

22. Contraband	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Detention Files	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24. Disciplinary Policy	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25. Emergency Plans	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26. Environmental Health and Safety	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
27. Hold Rooms in Detention Facilities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
28. Key and Lock Control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
29. Population Counts	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
30. Post Orders	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
31. Security Inspections	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Special Management Units (Administrative Segregation)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
33. Special Management Units (Disciplinary Segregation)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
34. Tool Control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Transportation (Land management)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
36. Use of Force	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
37. Staff/Detainee Communication (Added August 2003)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
38. Detainee Transfer (Added September 2004)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

All findings (Deficient and At-Risk) require written comment describing the finding and what is necessary to meet compliance.

**RIC Review Assurance Statement**

By signing below, the Reviewer-In-Charge (RIC) certifies that all findings of noncompliance with policy or inadequate controls contained in the Inspection Report are supported by evidence that is sufficient and reliable. Furthermore, findings of noteworthy accomplishments are supported by sufficient and reliable evidence. Within the scope of the review, the facility is operating in accordance with applicable law and policy, and property and resources are efficiently used and adequately safeguarded, except for the deficiencies noted in the report.

Reviewer-In-Charge: (Print Name) b6, b7c	Signature b6, b7c
Title & Duty Location DDO/ Washington DC	Date 9/5/07

Team Members	
Print Name, Title, & Duty Location b6, b7c DDO/ Washington DC	Print Name, Title, & Duty Location b6, b7c PHS
Print Name, Title, & Duty Location b6, b7c DDO/ Washington DC	Print Name, Title, & Duty Location

**Recommended Rating:**

- Superior
- Good
- Acceptable
- Deficient
- At-Risk

Comments: It is the recommendation of the RIC that the facility receive a rating of "At-Risk." The facility received at At-Risk ratings in the overall Medical Care to detainees and Food Service. Staff Detainee Communication and Environmental Health and Safety were both rated as Deficient. The standards identified are serious life safety issues, which need to be corrected and monitored on a regular basis.

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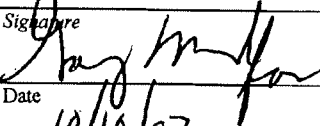
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## HEADQUARTERS EXECUTIVE REVIEW

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### Review Authority

The signature below constitutes review of this report and acceptance by the Review Authority. OIC/CEO will have 30 days from receipt of this report to respond to all findings and recommendations.

HQDRO EXECUTIVE REVIEW: (Please Print Name)	Signature
John P. Torres	
Title	Date
Director	10/10/07

- Final Rating:
- Superior
  - Good
  - Acceptable
  - Deficient
  - At-Risk

Comments: It is the recommendation of the RIC that the facility receive a rating of "At-Risk." The facility received At-Risk ratings in the overall Medical Care provided to detainees and Food Service. Staff Detainee Communication and Environmental Health and Safety were both rated as Deficient. The standards identified are serious life safety issues, which need to be corrected and monitored on a regular basis.



U.S. Immigration  
and Customs  
Enforcement

MEMORANDUM FOR: James Hayes  
Field Office Director  
Los Angeles Field Office

FROM: John P. Torres  
Director

SUBJECT: San Pedro Service Processing Center Annual Review

The annual review of the San Pedro Service Processing conducted on August 28-30, 2007 in San Pedro, California has been received. A final rating of **At-Risk** has been assigned.

The rating was based on the Reviewer-in-Charge (RIC) Summary Memorandum and supporting documentation. The Field Office Director must remedy the deficiencies in the RIC Memorandum, and initiate the following actions in accordance with the Detention Management Control Program (DMCP):

- 1) The Field Office Director, Detention and Removal Operations, shall notify the facility **within** five business days of receipt of this memorandum. Notification shall include copies of the Form G-324A, *Detention Facility Review Form*, the G-324A Worksheet, RIC Summary Memorandum, and a copy of this memorandum.
- 2) The Field Office Director is responsible for ensuring that the facility responds to all findings and a Plan of Action is submitted to the Review Authority (RA) within 30 days.
- 3) The RA will advise the Field Office Director once the Plan of Action is approved.
- 4) Once a Plan of Action is approved, the Field Office Director shall schedule and follow-up on the above noted deficiencies within 90 days.

Subject: San Pedro Service Processing Annual Review  
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Should you or your staff have any questions regarding this matter, please contact  
[REDACTED] Detention and Deportation Officer, Detention Management Division at  
(202) [REDACTED]

cc: Official File

ICE: HQDRO: [REDACTED] 2-2943:09/13/07

[REDACTED]  
b2-high