



U.S. Department of Homeland Security
U.S. Immigration and Customs Enforcement
Office of Professional Responsibility
Inspections and Detention Oversight Division
Washington, DC 20536-5501

**Office of Detention Oversight
Compliance Inspection**

**Enforcement and Removal Operations
ERO New Orleans Field Office**

**Richwood Correctional Center
Monroe, Louisiana**

October 18-21, 2021

COMPLIANCE INSPECTION
of the
RICHWOOD CORRECTIONAL CENTER
Monroe, Louisiana

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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 compliance inspection of the Richwood Correctional Center (RCC) in Monroe, Louisiana, from October 18 to 21, 2021.¹ The facility opened in 1998 and is owned and operated by LaSalle Corrections. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at RCC in 2018 under the oversight of ERO’s Field Office Director in New Orleans (ERO New Orleans). The facility operates under the Performance-Based National Detention Standards (PBNDS) 2011 (Revised 2016).

ERO has not assigned deportation officers; however, they have assigned a detention services manager to the facility. An RCC warden handles daily facility operations and manages support personnel. Robertson Produce, Flowers Baking, Correct Commissary, Sysco, and Reinhardt provide food services, Correct Med provides medical care, and Correct Commissary provides commissary services at the facility. The facility does not hold any accreditations from any outside entities.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity ²	█
Average ICE Detainee Population ³	█
Male Detainee Population (as of October 18, 2021)	█
Female Detainee Population (as of October 18, 2021)	█

During its last inspection, in Fiscal Year (FY) 2021, ODO found nine deficiencies in the following areas: Admission and Release (4); Custody Classification System (1); Funds and Personal Property (3); and Environmental Health and Safety (1).

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

² Data Source: ERO Facility List Report as of September 27, 2021.

³ *Ibid.*

COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population greater than 10, and where detainees are housed for longer than 72 hours, to assess compliance with ICE national detention standards. These inspections focus solely on facility compliance with detention standards that directly affect detainee life, health, safety, and/or well-being.⁴

ODO identifies violations of ICE detention standards, ICE policies, or operational procedures as “deficiencies.” ODO also highlights instances in which 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.

ODO was unable to conduct an on-site inspection of this facility, as a result of the COVID-19 pandemic, and instead, conducted a remote inspection of the facility. During this remote inspection, ODO interviewed facility staff, ERO field office staff, and detainees, reviewed files and detention records, and was able to assess compliance for at least 90 percent or more of the ICE national detention standards reviewed during the inspection.

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	1
Sub-Total	1
Part 2 – Security	
Admission and Release	0
Custody Classification System	0
Funds and Personal Property	1
Post Orders	0
Searches of Detainees	0
Sexual Abuse and Assault Prevention and Intervention	0
Special Management Units	0
Use of Force and Restraints	0
Sub-Total	1
Part 4 – Care	
Food Service	0
Hunger Strikes	0
Medical Care	2
Medical Care (Women)	1
Personal Hygiene	1
Significant Self-harm and Suicide Prevention and Intervention	1
Sub-Total	5
Part 5 – Activities	
Correspondence and Other Mail	1
Trips for Non-Medical Emergencies	0
Marriage Requests	0
Voluntary Work Program	0
Sub-Total	1
Part 6 – Justice	
Legal Rights Group Presentations	0

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

⁶ Beginning in FY 2022, ODO instituted a process of rotating all standards on a 3-year basis. As a result, some standard components may not be present in all inspections.

Sub-Total	0
Part 7 – Administration and Management	
Detention Files	0
Interviews and Tours	0
Detainee Transfers	0
Sub-Total	0
Total Deficiencies	8

DETAINEE RELATIONS

ODO interviewed 12 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. All detainees reported satisfaction with facility services. ODO conducted the detainee interviews via video teleconference.

COMPLIANCE INSPECTION FINDINGS

SAFETY

ENVIRONMENTAL HEALTH AND SAFETY (EHS)

ODO interviewed the fire safety officer, reviewed the number of toilets, sinks, and showers in the facility, and found the facility does not provide an adequate toilet ratio of one toilet for every eight female detainees according to the American Correctional Association. Specifically, Dormitory C contained 5 toilets and housed █ female detainees and Dormitory D contained 5 toilets and housed █ female detainees (**Deficiency EHS-1⁷**).

SECURITY

FUNDS AND PERSONAL PROPERTY (FPP)

ODO reviewed █ detainee detention files and found in █ files, facility staff did not document the general condition of the detainees' property on the personal property inventory forms (**FPP-88⁸**). **This is a repeat deficiency.**

⁷ “Environmental health conditions shall be maintained at a level that meets recognized standards of hygiene, including those from the:

a. American Correctional Association.” See ICE PBNDS 2011 (Revised 2016), Standard, Environmental Health and Safety, Section (V)(A)(1)(a).

⁸ “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).

CARE

MEDICAL CARE (MC)

ODO reviewed ■ health care credential files and found in ■ files, the facility did not verify that health care staff are licensed, certified, credentialed, and/or registered in compliance with applicable state and federal requirements (**Deficiency MC-101**⁹).

ODO interviewed the facility's health services administrator, who stated the facility does not maintain copies of all health care licenses or credentials onsite and readily available for review (**Deficiency MC-102**¹⁰).

MEDICAL CARE (WOMEN) (MCW)

ODO reviewed the facility's initial health assessment form for female detainees and found the form does not inquire about the following:

- if the detainee is currently nursing (breastfeeding);
- use of contraception;
- menstrual cycle;
- history of breast and gynecological problems;
- family history of breast and gynecological problems; and
- any history of physical or sexual victimization and when the incident occurred (**Deficiency MCW-9**¹¹).

PERSONAL HYGIENE (PH)

ODO interviewed the personal hygiene sergeant, reviewed the number of toilets, sinks, and showers in the facility, and found the facility does not provide an adequate toilet ratio of one toilet for every eight female detainees according to the American Correctional Association. Specifically, Dormitory C contained 5 toilets and housed ■ female detainees and Dormitory D contained 5 toilets and housed ■ female detainees (**Deficiency PH-32**¹²).

⁹ "All health care staff must be verifiably licensed, certified, credentialed, and/or registered in compliance with applicable state and federal requirements." See ICE PBNDS 2011 (Revised 2016), Standard, Medical Care, Section (V)(I).

¹⁰ "Copies of the documents must be maintained on site and readily available for review." See ICE PBNDS 2011 (Revised 2016), Standard, Medical Care, Section (V)(I).

¹¹ "In addition to the criteria listed on the health assessment form, the evaluation shall inquire about the following: ...
b. if the detainee is currently nursing (breastfeeding);
c. use of contraception;
e. menstrual cycle;
f. history of breast and gynecological problems;
g. family history of breast and gynecological problems; and
h. any history of physical or sexual victimization and when the incident occurred."

See ICE PBNDS 2011 (Revised 2016), Standard, Personal Hygiene, Section (V)(B)(2)(b)(c)(e)(f)(g) and (h).

¹² "Detainees shall be provided:

1. An adequate number of toilets, 24 hours per day, which can be used without staff assistance when detainees are confined to their cells or sleeping areas." See ICE PBNDS 2011 (Revised 2016), Standard, Personal Hygiene, Section (V)(E)(1).

SIGNIFICANT SELF HARM AND SUICIDE PREVENTION AND INTERVENTION (SSHSPI)

ODO reviewed 11 suicide watch logs for detainees placed on continuous monitoring and found in 1 out of 11 logs the facility did not document monitoring every 15 minutes. Specifically, on September 8, 2021, the facility logged 2 observations between 16 and 27 minutes (**Deficiency SSHSPI-34¹³**).

ACTIVITIES

CORRESPONDENCE AND OTHER MAIL (COM)

ODO reviewed the facility detainee handbook and found the handbook did not notify detainees that identity documents, such as passports, birth certificates, etc., in a detainee's possession are contraband and ICE/ERO may use as evidence against the detainee or for other purposes authorized by law (**Deficiency COM-22¹⁴**).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 24 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 17 of those standards. ODO found eight deficiencies in the remaining seven standards. ODO commends facility staff for their responsiveness during this inspection. ODO recommends ERO New Orleans work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations. ODO has not received the uniform corrective action plan for ODO's last inspection of RCC in April 2021.

Compliance Inspection Results Compared	FY 2021 (PBNDS 2011) (Revised 2016)	FY 2022 (PBNDS 2011) (Revised 2016)
Standards Reviewed	12	24
Deficient Standards	4	7
Overall Number of Deficiencies	9	8
Repeat Deficiencies	1	1
Areas of Concern	0	0
Corrective Actions	2	0
Facility Rating	N/A	Superior

¹³ "The qualified mental health professional may place the detainee in a special isolation room designed for evaluation and treatment with continuous monitoring that 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).

¹⁴ "The facility shall notify detainees of its rules on correspondence and other mail through the detainee handbook, or supplement, provided to each detainee upon admittance. At a minimum, the notification shall specify: ...

8. That identity documents, such as passports, birth certificates, etc., in a detainee's possession are contraband and may be used by ICE/ERO as evidence against the detainee or for other purposes authorized by law." See ICE PBNDS 2011 (Revised 2016), Standard, Correspondence and Other Mail, Section (V)(C)(8).