



July 28, 2022

TO: [Redacted]
Acting Assistant Director Custody Management

FROM: [Redacted]
Lead Compliance Inspector
The Nakamoto Group, Inc.

SUBJECT: **Annual Inspection of the Folkston ICE Processing Center Annex**

The Nakamoto Group, Inc. performed an annual hybrid inspection for compliance with the ICE Performance-Based National Detention Standards (PBNDS) 2011 of the Folkston ICE Processing Center Annex in Folkston, Georgia during the period of July 26-28, 2022. This is a DIGSA facility.

The annual inspection was performed under the guidance of [Redacted] Lead Compliance Inspector. Team members were:

Subject Matter Field	Team Member
Safety	[Redacted]
Security	[Redacted]
Medical Care	[Redacted]
Detainee Rights	[Redacted]
Medical Care	[Redacted]

Type of Inspection

This is a scheduled annual inspection to determine overall compliance with the ICE PBNDS 2011 for Over 72-hour facilities. The facility received a rating of Meets Standards during the July 2021 annual inspection.

Inspection Summary

The Folkston ICE Processing Center Annex is currently accredited by:

- The American Correctional Association (ACA) - Yes
- The National Commission on Correctional Health Care (NCCHC) - No
- The Joint Commission (TJC) - No
- Prison Rape Elimination Act (PREA) - Yes

Standards Compliance

The following information is a summary of the standards that were reviewed and overall compliance that was determined as a result of the July 2021 and July 2022 PBNDS 2011 annual inspections:



<i>July 2021 Annual Inspection</i>	
Meets Standards	40
Does Not Meet Standards	0
Repeat Finding	0
Not Applicable	3

<i>July 2022 Annual Inspection</i>	
Meets Standards	40
Does Not Meet Standards	0
Repeat Finding	0
Not Applicable	3

The inspection team identified five (5) deficient components in the following four (4) standards:

Post Orders – 2

Staff-Detainee Communication – 1

Significant Self-Harm and Suicide Prevention and Intervention – 1

Visitation – 1

Facility Snapshot/Description

The Folkston ICE Processing Center Annex is located on the north side of Folkston, Georgia. The facility is owned and operated by [REDACTED]. The DIGSA facility is located adjacent to the parent Folkston ICE Processing Center-Main. The Annex is encircled by independent fencing. [REDACTED]

The facility was built in [REDACTED]. The complex is comprised of [REDACTED] separate [REDACTED]-story buildings; [REDACTED]. The secure outer perimeter of the compound is designed with two twelve-foot chain link fences with rows of razor ribbon affixed to the interior side of the exterior fence. The fences are equipped with a movement detection system (shaker fence) and microwave sensors. The facility is encircled by a perimeter road that is irregularly patrolled by an unarmed officer in a vehicle 24 hours a day. Surveillance cameras offer visibility around the entire perimeter, into the housing units, the common areas, and interior movement corridors. All exterior building doors and interior movement corridor doors are controlled by central control staff and are under constant camera surveillance through a 67 surveillance camera network that is monitored 24 hours a day.

[REDACTED] individual housing units are managed by direct supervision. Utility officers perform escort duties; all movement is escorted. The housing units are all [REDACTED]-tier designs configured into dormitory and [REDACTED]-bed cells. The housing units range in capacity from [REDACTED] beds. [REDACTED] housing units are used for general population and one unit serves as the special management unit (SMU); it contains [REDACTED] cells equipped with [REDACTED] beds. There were no ICE detainees in the SMU during the inspection. One housing unit currently serves as a COVID-19 quarantine/isolation unit where newly admitted detainees are housed until negative testing results/protocols are complete. During the inspection there were no active COVID-19 cases in the facility. The health care unit includes [REDACTED] rooms, with a total of [REDACTED] beds, used for treatment and/or observation.

The facility offers on-site non-contact general visitation on Saturdays, Sundays and holidays. Visits are ninety minutes in duration but are currently limited to one adult. Minors cannot currently partake in on-site non-contact visits due to a local public health ‘code red’ mandate which the facility is required to enforce. The mandate limits on-site visits to one adult. Off-site general video-visits are available through the housing unit tablets. This format is fee-based and no accommodation is currently in place to extend that privilege to indigent detainees. On-site contact and non-contact legal visits are permitted; they are unrestricted in frequency and duration.



Each housing unit has a common dayroom equipped with three televisions, telephone stations, a bank of electronic tablets, and fixed table/chair units for detainees to eat their meals, play games, and socialize. Information not included on the tablets, including consulate numbers, legal services postings, etc., is posted on the housing units' bulletin boards. Tablets are available to detainees at a ratio of one tablet for eight detainees. Tablets provide detainees the ability to retrieve the facility handbook in several languages, access commissary account balances, submit ICE/facility requests, retrieve program/activity schedules, send/receive personal emails, telephone services, participate in video-visits, play electronic games, and read books. Dayrooms are accessible from 6:00 a.m. to 12:00 p.m. (midnight) Monday through Friday, and from 6:00 a.m. to 2:00 a.m. on weekends and holidays. Detainees are provided daily indoor and outdoor recreation. The facility was observed to maintain an above average level of sanitation.

The inspectors conducted no less than 45 formal and/or informal detainee interviews during the inspection; fifteen interviews required the use of the Language Line Interpretation Service or bilingual inspectors. Length of stay in the facility for those interviewed ranged from twelve days to six months. All of the detainees stated they felt safe at the facility and had not been threatened or mistreated by staff or other detainees. The detainees were aware of OIG services. However, no detainee had tried to reach the hotline. Overall, the detainees were very content with their living conditions, the cleanliness of the facility, access to telephones, and responsiveness from facility staff. More than twenty detainees stated they rarely see an ICE/ERO representative in their housing unit. Inspectors checked logbooks for confirmation of unit visits. The logbook entries confirming visits by ICE officials were inconsistent. During one formal interview, the detainee asked if he could "see an ICE officer". Documentation in EARM confirmed that the detainee had not been seen by an ICE officer for twenty days. No additional documentation was provided to indicate the detainee had been seen. An ICE officer interviewed the detainee during the inspection. Follow-up was confirmed by the inspector.

Additional interview summaries include:

One detainee stated that he had a serious accident in the bathroom injuring his spine and was told "that he may be faced with a lifelong chronic condition". He further stated that although he had seen a facility doctor, he has been waiting for "weeks" to visit an off-site specialist which the facility's medical staff had promised to schedule. The medical SME followed up on the claim and found that on 07/07/2022, he was sent to an off-site specialist who prescribed medication; and he is also currently under the continued care of a physical therapist. Treatment plans are within standard guidelines.

A second detainee claimed that the "emergency button" in his cell was not working and he was worried that his cellmate, who has a chronic health condition, was in danger. The inspector asked the compliance auditor to follow up on the claim who immediately had maintenance staff check the call button for operability.

Six detainees each described a compliant and informative orientation to the facility conducted in English and Spanish; had received and read the local handbook; and although had not had any discussions with an assigned ICE officer, they knew how to contact ICE if they needed to because they had seen the ICE contact information postings in their housing unit.

Formal and informal interviews were conducted by another inspector. The following subjects were discussed during each detainee interview: Medical Care, Food Quality, Recreation, Personal Safety, Library, Staff Communications, Personal Hygiene, Cleaning Supplies, Religious Practices, Voluntary Work Program. There were no issues or concerns expressed regarding these services. Two of the five detainees stated that they had never seen an ICE officer on the housing unit. All the detainees stated that they feel safe at this facility and have good relations with facility staff. The detainees also stated that medical care "is acceptable and when submitting a request, they are seen within 24 hours". All of the detainees inter-



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viewed stated that food is good, and amounts served were adequate. All detainees were asked if they had any other issues or concerns, and all stated they did not.

Recreation time was satisfactory. Grievances were heard fairly and the results were provided promptly. Overall, the detainees were very content with their living conditions, cleanliness of the facility, and their treatment by staff and other detainees.

Medical, dental, and mental health services are provided by IHSC employees. Maintenance services are provided by The Geo Group, Inc. employees. Detainee telephone and tablet services are provided by Talton Communication. Kiosk services are provided by the Keefe Group. Detainees are not charged co-pays for medical, mental health, or dental care services.

Areas of Concern/Significant Observations

The facility is providing the following optimal levels of service as described in the standards in: 2.12 – Special Management Units (SMU), detainees in the SMU in disciplinary segregation status receive a daily recreation period of one hour per day, and SMU administrative segregation status detainees receive two hours of daily recreation per day; 2.15 – Use of Force and Restraints, use of force audiovisual records are retained by the facility for at least one year after litigation or any investigation has concluded or been resolved; 4.6 – Significant Self-Harm and Suicide Prevention and Intervention, prevention/treatment and therapeutic aftercare for suicidal detainees or detainees at risk for self-harm are within NCCHC standards; 4.7 – Terminal Illness, Advance Directives and Death, medical care for terminally ill detainees are within NCCHC standards; 5.4 - Recreation, special management unit (SMU) detainees in administrative segregation status are provided outdoor recreation daily for two hours, and SMU detainees in disciplinary segregation status are provided outdoor recreation daily for one hour; 5.6 - Telephone Access, the housing units are providing telephones at a ratio of one phone for every ten detainees; and 6.3 - Law Libraries and Legal Materials, detainees are provided law library access hours for more than fifteen hours per week.

This was a hybrid inspection in which two inspectors (Detainee Rights SME and QMC Medical SME) worked remotely. Remote inspectors were unable to personally observe practices and procedures within the facility and relied upon photographs and/or videos to validate the observation of many standards.

Recommended Rating and Justification

The Lead Compliance Inspector recommends that the facility receive a rating of Meets Standards unless unobserved practices and conditions are contrary to what was reported to the inspection team. The facility complies with the ICE Performance-Based National Detention Standards (PBNDS) 2011 for Over 72-hour facilities. No (0) standards were rated as Does Not Meet Standard and three (3) standards were Not Applicable (N/A). All remaining forty (40) standards were found to Meet Standards.

LCI Assurance Statement

The findings of compliance and non-compliance are accurately and completely documented on the G-324A Inspection Form and are supported by documentation in the inspection file. An out brief was conducted at the facility and in addition to the entire Nakamoto Group, Inc. Inspection Team (one SME via conference call) the following were present:


- ICE Officials – [REDACTED]



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- Facility Staff –



 Lead Compliance Inspector
Printed Name of LCI

July 28, 2022
Date

