

September 23, 2021

TO:

Acting Assistant Director Custody Management

FROM:

Lead Compliance Inspector The Nakamoto Group, Inc.

SUBJECT: Annual Inspection of the LaSalle Ice Processing Center

The Nakamoto Group, Inc. performed an annual inspection for compliance with the ICE Performance Based National Detention Standards (PBNDS 2011) of the LaSalle ICE Processing Center in Jena, Louisiana during the period of September 21-23, 2021. This is a DIGSA.

The inspection was performed under the guidance of Lead Compliance Inspector. Team Members were:

Subject Matter Field	Team Member
Detainee Rights	
Security	
Medical Care	
Medical Care	
Safety	

# **Type of Inspection**

This is a scheduled annual inspection which is performed to determine overall compliance with the ICE PBNDS 2011 for Over 72 hour facilities. The facility received a rating of Meets Standards during the October 2020 inspection.

## Inspection Summary

The LaSalle ICE Processing Center is currently accredited by:

- The American Correctional Association (ACA) Yes
- The National Commission on Correctional Health Care (NCCHC) Yes
- 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 2020 and 2021 compliance annual inspections:



2020 Annual Inspection	
Meets Standards	41
Does Not Meet Standards	0
Repeat Finding	0
Not Applicable	1

2021 Annual Inspection	
Meets Standards	41
Does Not Meet Standards	0
Repeat Finding	0
Not Applicable	2

There were no deficient components identified during this inspection.

#### Facility Snapshot/Description

The LaSalle ICE Processing Center is located in Jena, Louisiana. The facility is owned and operated by The Geo Group, Inc. During the inspection the facility was housing male and female ICE detainees of all classification levels. Detainees are classified by facility staff using the information provided by ICE prior to their arrival.

The main facility is inside the secure perimeter and there are three additional buildings outside the secure perimeter. The main facility is surrounded by two sixteen-foot high chain link fences supplemented with razor ribbon top and bottom. Surveillance cameras offer visibility of the entire perimeter and interior movement corridors. The facility is equipped with a surveillance camera network which is monitored 24 hours a day by central control officers. All exterior building doors and interior security gates/doors are under constant camera surveillance and controlled by central control staff. The facility has several outdoor recreation areas for detainee use including two soccer fields covered in artificial turf. There is a variety of fixed exercise equipment. The housing units are equipped with hot water dispensers, televisions, a microwave, video games, and various board games and puzzles. An optimal number of telephones are also provided along with electronic tablets which may also be used for video calls.

There are five housing units divided into sub-sections for a total of fourteen separated living areas.

Several housing units were on cohort

status during the inspection due to the detainees being under various stages of quarantine for COVID-19. There were three detainees who had tested positive for COVID-19; two male and one female.

A total of twenty detainees were interviewed in a confidential setting including two detainees housed in the SMU; and sixteen were interviewed informally. None of the detainees voiced any concerns regarding their treatment or care by facility staff. There were no complaints regarding food service or medical care and all felt safe at the facility. Detainees were aware of the law library but only two reported using it. Detainees stated that LexisNexis is also available on the tablets. Detainees are permitted an optimal fifteen hours per week in the law library. One detainee stated that the roof was leaking in her housing unit. The inspector followed-up on the complaint and determined that there was water dripping; however, it was condensation from the air conditioner and that a bucket had been placed under the drip. Staff stated that due to the high humidity in the area there are times that they have to deal with the condensation and they make every effort to avoid any water on the floors. Several detainees voiced frustration over the lack of information from ICE regarding their case. The detainees stated ICE officers respond to their requests but provide little information regarding their status. Detainees were asked if they were aware of the Office of



Inspector General (OIG). The one detainee who replied in the negative was provided the information about the availability and the procedures.

Inspectors noted that facility practices meet optimal compliance in the following eight standards: 2.1 Admission and Release; 4.3 Medical Care; 4.4 Medical Care Women; 4.6 Significant Self-Harm and Suicide Prevention; 4.7 Terminal Illness, Advance Directives and Death; 5.4 Recreation; 5.6 Telephone Access; and 6.3 Law Libraries and Legal Materials.

Food Service is provided by The GEO Group, Inc employees. Detainee telephone services and electronic tablets are provided by Talton Communication. Medical services are provided by IHSC personnel. Detainees are not charged co-pay fees for medical, dental, or mental health services.

## Areas of Concern/Significant Observations

There were no areas of concern identified during this inspection. There were no components rated Does Not Meet Standard. This inspection was conducted as a hybrid with one inspector working remotely. The remote inspector was unable to personally observe practices and procedures within the facility and relied upon telephonic interviews, documentation provided by the facility, and on-site inspector observation.

# Recommended Rating and Justification

The Lead Compliance Inspector recommends that the facility receive a rating of Meets Standards. The facility complies with the ICE Performance Based National Detention Standards (PBNDS 2011) for Over 72 hour facilities unless unobserved practices and conditions are contrary to what was reported to the inspector working remotely. No (0) standards were rated Does Not Meet Standards, and two (2) standards were Not Applicable (N/A). All remaining forty-one (41) standards were found to Meet Standards.

### LCI Assurance Statement

Printed Name of LCI

The findings of compliance and non-compliance are accurately and completely documented on the G-324 Inspection Form and are supported by documentation in the inspection file. An out brief was conducted with the facility. In addition to the on-site Nakamoto Group Inspection Team and one inspector working remotely, the following participated:

•	ICE Officials –		
•	Facility Staff –		
	HIGG GA C		
•	IHSC Staff –		
id C	Compliance Inspector	September 23, 2021	

Date