

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
Follow-Up Compliance Inspection

Enforcement and Removal Operations
ERO Atlanta Field Office

Folkston ICE Processing Center and Annex
Folkston, Georgia

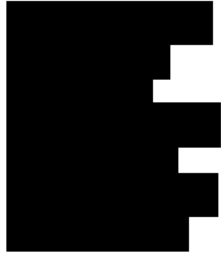
July 19-23, 2021

FOLLOW-UP COMPLIANCE INSPECTION
of the
FOLKSTON ICE PROCESSING CENTER AND ANNEX
Folkston, Georgia

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FOLLOW-UP COMPLIANCE INSPECTION TEAM MEMBERS



Team Lead
Acting Team Lead
Assistant Team Lead
Contractor
Contractor
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Contractor

ODO
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Creative Corrections
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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 Folkston ICE Processing Center (FIPC) and Annex in Folkston, Georgia, from July 19 to 23, 2021.¹ This inspection focused on the standards found deficient during ODO's last inspection of FIPC from January 4 to 8, 2021. The facility opened in 2016 and is owned and operated by The GEO Group, Inc. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at FIPC in 2017 under the oversight of ERO's Field Office Director in Atlanta (ERO Atlanta). The facility operates under the Performance-Based National Detention Standards (PBNDS) 2011 (Revised 2016).

ERO has assigned deportation officers and a detention services manager to the facility. An FIPC administrator handles daily facility operations and manages █████ support personnel. The GEO Group Inc. provides food services and medical care, and Keefe Commissary Group provides commissary services at the facility. The facility was accredited by the American Correctional Association in January 2019 and by the National Commission on Correctional Health Care in August 2019. In April 2019, FIPC was audited by the Department of Homeland Security (DHS) Prison Rape Elimination Act (PREA) and was DHS PREA Certified.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity ²	█████
Average ICE Detainee Population ³	█████
Male Detainee Population (as of July 19, 2021)	█████
Female Detainee Population (as of July 19, 2021)	█████

During its last inspection, in Fiscal Year (FY) 2021, ODO found 14 deficiencies in the following areas: Admission and Release (1); Emergency Plans (6); Facility Security and Control (1); Hunger Strikes (1); Medical Care (4); and Significant Self-Harm and Suicide Prevention and Intervention (1).

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

² Data Source: ERO Facility List dated July 19, 2021.

³ *Ibid.*

FOLLOW-UP COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population of 10 or more detainees, 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. In FY 2021, to meet congressional requirements, ODO began conducting follow-up inspections at all ICE ERO detention facilities, which ODO inspected earlier in the FY.

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 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 inspections are annotated as "Repeat Deficiencies" in this report.

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.

**FINDINGS BY PERFORMANCE-BASED NATIONAL
DETENTION STANDARDS 2011 (REVISED 2016)
MAJOR CATEGORIES**

PBNDS 2011 (Revised 2016) Standards Inspected⁴	Deficiencies
Part 1 – Safety	
Emergency Plans	0
Environmental Health and Safety	0
Sub-Total	0
Part 2 – Security	
Admission and Release	2
Custody Classification System	0
Facility Security and Control	0
Funds and Personal Property	3
Special Management Units	0
Use of Force and Restraints	0
Sub-Total	5
Part 4 – Care	
Food Service	0
Hunger Strikes	0
Medical Care	0
Significant Self-harm and Suicide Prevention and Intervention	0
Sub-Total	0
Total Deficiencies	5

⁴ For greater detail on ODO's findings, see the *Follow-Up Compliance Inspection Findings* section of this report.

DETAINEE RELATIONS

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

FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

SECURITY

ADMISSION AND RELEASE (AR)

ODO reviewed [REDACTED] detainee detention files and found [REDACTED] of the files contained the Order to Detain Form (Form I-203) accompanying the detainee upon arrival. Specifically, [REDACTED] files did not have the I-203 and 11 out of 12 files contained an I-203 dated 3 to 4 weeks after each detainee's arrival (**Deficiency AR-54⁵**).

ODO reviewed [REDACTED] detainee release files and found [REDACTED] of the detainee release files contained the Order to Release Form (Form I-203a) (**Deficiency AR-80⁶**).

FUNDS AND PERSONAL PROPERTY (FPP)

ODO reviewed the facility's FPP program, interviewed the lieutenant, and found the facility did not maintain a logbook for personal property (other than funds and valuables) listing the detainee's name, noncitizen number, I-77 number, security tie-strap number, property description, date issued, and date returned (**Deficiency FPP-98⁷**).

ODO reviewed three property inventory audits for January 2021, March 2021, and June 2021, and found the facility did not record the time for any of the audits conducted. Specifically, [REDACTED] did not indicate the inventory's date, nor the [REDACTED] of the officers conducting the inventory (**Deficiency FPP-124⁸**).

Due to the facility not maintaining a personal property logbook nor inventory sheets for other than funds and valuables, the transactions were not reflected (**Deficiency FPP-136⁹**).

⁵ "An Order to Detain or an Order to Release the detainee (Form I-203 or I-203a), bearing the appropriate ICE/ERO Authorizing Official signature, must accompany each newly arriving detainee." *See* ICE PBNDS 2011 (Revised 2016), Standard, Admission and Release, Section (V)(E).

⁶ "A detainee's out-processing begins when release processing staff receive the Form I-203, "Order to Detain or Release," signed by an authorizing official." *See* ICE PBNDS 2011 (Revised 2016), Standard, Admission and Release, Section (V)(H)(1).

⁷ "A logbook shall be maintained listing detainee name, A-number or facility detainee number, I-77 number, security tie-strap number, property description, and date returned." *See* ICE PBNDS 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(I).

⁸ "The facility's inventory audit shall indicate the inventory's date and time, and the name of the officer(s) conducting the inventory." *See* ICE PBNDS 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(J).

⁹ "The property log and inventory sheets shall reflect the transaction." *See* ICE PBNDS 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(K).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 12 standards under PBNS 2011 (Revised 2016) and found the facility in compliance with 10 of those standards. ODO found five deficiencies in the remaining two standards. ODO commends facility staff members for their responsiveness during this inspection. ODO recommends ERO Atlanta work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations. ERO provided ODO with the uniform corrective action plan for ODO's last inspection of FIPC on May 5, 2021.

Compliance Inspection Results Compared	First FY 2021 (PBNS 2011) (Revised 2016)	Second FY 2021 (PBNS 2011) (Revised 2016)
Standards Reviewed	20	12
Deficient Standards	6	2
Overall Number of Deficiencies	14	5
Repeat Deficiencies	4	0
Areas of Concern	0	0
Corrective Actions	0	0