



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

**Office of Detention Oversight
Unannounced Compliance Inspection**

**Enforcement and Removal Operations
ERO Washington Field Office**

**Immigration Centers of America (Farmville)
Farmville, Virginia**

September 27-29, 2022

UNANNOUNCED COMPLIANCE INSPECTION
of the
IMMIGRATION CENTERS OF AMERICA (FARMVILLE)
Farmville, Virginia

TABLE OF CONTENTS

FACILITY OVERVIEW	4
UNANNOUNCED COMPLIANCE INSPECTION PROCESS.....	5
FINDINGS BY PERFORMANCE-BASED NATIONAL DETENTION STANDARDS 2011 (2013 ERRATA) MAJOR CATEGORIES.....	6
DETAINEE RELATIONS	7
UNANNOUNCED COMPLIANCE INSPECTION FINDINGS.....	9
SECURITY	9
Staff-Detainee Communication.....	9
CARE	9
Personal Hygiene	9
CONCLUSION	9

COMPLIANCE INSPECTION TEAM MEMBERS



Team Lead	ODO
Inspections and Compliance Specialist	ODO
Inspections and Compliance Specialist	ODO
Contractor	Creative Corrections
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Contractor	Creative Corrections

FACILITY OVERVIEW

The U.S. Immigration and Customs Enforcement (ICE) Office of Professional Responsibility (OPR) Office of Detention Oversight (ODO) conducted an unannounced compliance inspection of the Immigration Centers of America (Farmville) (ICA) in Farmville, Virginia, from September 27 to 29, 2022.¹ The facility opened in 2010, and is owned by Immigration Centers of America-Farmville and operated by Immigration Centers of America-Farmville. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at ICA in 2010 under the oversight of ERO’s Field Office Director in Washington, DC (ERO Washington). The facility operates under the Performance-Based National Detention Standards (PBNDS) 2011 (2013 Errata).

ERO has assigned a detention services manager and deportation officers to the facility. A facility director of detention handles daily facility operations and manages ■ support personnel. Trinity Services provides food services, Sozo Healthcare provides medical care, and Keefe Commissary provides commissary services at the facility. The facility was accredited by the National Commission on Correctional Health Care in July 2020, and the American Correctional Association (ACA) in January 2022. In June 2021, ICA was audited for the Department of Homeland Security (DHS) Prison Rape Elimination Act (PREA) and was DHS PREA Certified.

Capacity and Population Statistics	Quantity
ICE Bed Capacity ²	■
Average ICE Population ³	■
Adult Male Population (as of September 27, 2022)	■
Adult Female Population (as of September 27, 2022)	■

During its last inspection, in Fiscal Year (FY) 2022, ODO found zero deficiencies.

¹ This facility holds male detainees with low, medium-low, medium-high, and high security classification levels for periods greater than 72 hours. Additionally, this inspection was a follow-up inspection to ODO’s inspection of ICA from March 29-31, 2022.

² Data Source: ERO Facility List as of September 19, 2022.

³ *Ibid.*

⁴ ICA’s FY 2021 average daily population was 61, which is why ODO scheduled and conducted 2 inspections of ICA in FY 2022.

UNANNOUNCED COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population (ADP) 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.⁵

ODO identifies violations of ICE detention standards, ICE policies, or operational procedures, as "deficiencies." ODO highlights instances when 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.

Beginning fiscal year (FY) 2022, ODO will conduct focused reviews of under 72-hour ICE detention facilities with an ADP of 1 or more detainees and over 72-hour ICE detention facilities with an ADP of 1-9 detainees. Additionally, ODO will conduct unannounced inspections of ICE detention facilities, regardless of ADP of detainees, as well as reviews of ICE special/emerging detention facilities/programs. As such, these facility inspections will result in an ODO Inspection Compliance Rating. ODO will conduct a complete review of several core standards, in accordance with the facility's new contractually required ICE National Detention Standards, which include but are not limited to Medical Care/Health Care, Medical Care (Women)/Health Care (Females), Hunger Strikes, Suicide Prevention, Food Service, Environmental Health and Safety, Emergency Plans, Use of Force and Restraints/Use of Physical Control Measures and Restraints, Special Management Units, Educational Policy (FRS (Family Residential Standard (FRS) only), Behavior Management (FRS only), Admission and Release, Classification, and Funds and Personal Property.

Upon completion of each unannounced compliance 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 its decision-making to better allocate resources across the agency's entire detention inventory.

⁵ ODO reviews the facility's compliance with selected standards in their entirety.

FINDINGS BY PERFORMANCE-BASED NATIONAL DETENTION STANDARDS 2011 (2013 ERRATA) MAJOR CATEGORIES

PBNDs 2011 (2013 Errata) Standards Inspected ^{6,7,8}	Deficiencies
Part 1 - Safety	
Emergency Plans	0
Environmental Health and Safety	0
Sub-Total	0
Part 2 - Security	
Admission and Release	0
Custody Classification System	0
Facility Security and Control	0
Funds and Personal Property	0
Special Management Units	0
Staff-Detainee Communication	2
Use of Force and Restraints	0
Sub-Total	2
Part 4 - Care	
Food Service	0
Hunger Strikes	0
Medical Care	0
Personal Hygiene	0
Significant Self-harm and Suicide Prevention and Intervention	0
Sub-Total	0
Part 5 - Activities	
Recreation	0
Telephone Access	0
Sub-Total	0
Part 6 - Justice	
Grievance System	0
Sub-Total	0
Total Deficiencies	2

⁶ For greater detail on ODO's findings, see the *Unannounced Compliance Inspection Findings* section of this report.

⁷ 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 standards.

⁸ Special reviews and unannounced inspections are both focused reviews and ODO will review a facility's compliance with at least 10 individual standards during each special review or unannounced inspection.

DETAINEE RELATIONS

ODO interviewed five detainees, who each voluntarily agreed to participate. All other detainees present at the facility declined ODO's interview. One detainee indicated he had been verbally sexually assaulted while in custody at ICA, and ODO immediately referred the detainee to facility staff for evaluation and investigation of the allegation. Most detainees reported satisfaction with facility services except for the concern listed below.

Food Service: One detainee stated food service staff do not provide him with non-lactose milk per his medical diet.

- Action Taken: ODO interviewed the health services administrator (HSA) who conducted a records review and confirmed the detainee had a medically approved lactose-free diet. ODO toured the kitchen and observed the detainee's tray had the medical diet notation. ODO interviewed the food service administrator (FSA) and found the facility does not have lactose-free milk but instead provided the detainee juice as a substitute. The FSA stated food service staff would not intentionally serve milk to this detainee and he can substitute oatmeal in place of dry cereal since the facility does not have lactose-free milk. The FSA followed-up with the detainee and informed him of his option to substitute oatmeal in place of dry cereal.

Medical Care: One detainee stated he was not receiving pill call timely and requested a delivery time change.

- Action Taken: ODO interviewed the HSA who conducted a records review and found the detainee arrived on August 22, 2022, and a registered nurse (RN) conducted an initial exam and referred the detainee for mental health services. On August 23, 2022, a licensed professional counselor examined the detainee and referred him to a psychiatrist on the same day, and the psychiatrist prescribed Trazodone, 100mg, and Latuda, 20 mg., taken daily for 90 days. The detainee and psychiatrist agreed upon a pill call time of 9:00 p.m. The record did not contain any requests to modify pill call time. On September 28, 2022, the HSA interviewed the detainee and found that the detainee wanted to change his medication to an earlier pill call time but said he did not know how to request it. Upon notification of the request, the HSA contacted the psychiatrist and received verbal permission to change dosage time to the detainee's requested time of 6:00 p.m.

Medical Care: One detainee stated the facility medical staff did not provide him with a medical diet for breakfast, which caused him constipation issues.

- Action Taken: ODO interviewed the facility's HSA who conducted a medical records review and found the detainee arrived on August 22, 2022, and an RN completed his initial evaluation on the same day with no allergies or special dietary requests reported. On September 3, 2022, an RN completed the detainees 14-day physical evaluation and noted no issues or required care. On September 22, 2022, the detainee made a sick call request to exchange oatmeal for cereal, because he was unable to go to the bathroom after eating oatmeal. On September 23, 2022, an RN examined the detainee who reported no pain but

did report going to the bathroom on and off for 15 days, stating oatmeal made it worse, and cereal made it better. The detainee reported painful bowel movements when constipated. The RN examined the detainee's abdomen and reviewed his vitals and found everything to be within normal limits and found the detainee was in no acute distress. The RN prescribed fiber laxative powder, for 5 days, as needed, and instructed the detainee to stay adequately hydrated. The RN also informed the detainee of the side effects of the medication and to return to sick call if conditions worsened. The HSA reviewed the pill call chart and found the detainee took a total of 5 out of 10 doses. On September 28, 2022, an RN examined the detainee following ODO's interview with the detainee. The RN completed an allergy assessment and found no indications of allergies to oatmeal and recorded the detainee had a bowel movement on the same day. The RN notified the detainee that he did not require a medical diet and prescribed him Colace (stool softener) for 7 days, twice daily, as needed. The RN instructed the detainee to submit additional sick call requests, as needed.

Sexual Abuse and Assault Prevention and Intervention: One detainee stated he was experiencing verbal sexual abuse at the facility.

- Action Taken: ODO immediately concluded the interview and notified the facility's Prison Rape Elimination Act (PREA) coordinator. A facility staff member immediately took the detainee to the facility's medical unit for evaluation. Medical staff found the detainee's vitals were normal, and he stated no one had ever touched him in any sexual way. On September 27, 2022, a facility investigator interviewed the detainee concerning his complaint. The detainee stated, on approximately September 20, 2022, another detainee told him he looks good when he shaves his head and keeps his beard. The detainee stated he thought the other detainee was joking but felt the comment was inappropriate due to past trauma experienced as a child and sexual abuse he experienced at a previous facility. The detainee described the other detainee as respectable and requested to remain in his current housing unit. The detainee stated no one had ever sexually assaulted or harassed him at this facility. The investigator determined this event was not a reportable PREA incident. The detainee stated he needed help with past trauma. Facility medical staff referred him to a facility licensed professional counselor, with an appointment scheduled for the afternoon of September 27, 2022. ODO contacted ERO Washington and found the detainees previous facility reported the alleged incident at their facility to the Joint Intake Center, which was determined to be unsubstantiated.

UNANNOUNCED COMPLIANCE INSPECTION FINDINGS

SECURITY

STAFF-DETAINEE COMMUNICATION (SDC)

ODO toured nine housing units and observed the facility did not post contact information for the ERO Washington field office in the detainee living areas nor did they post the scheduled hours and days detainees could contact ERO Washington staff (**Deficiency SDC-4⁹**).

ODO reviewed [REDACTED] detainee detention files of detainees who submitted requests to ICE during the review period and found [REDACTED] out of [REDACTED] files did not contain copies of the completed requests (**Deficiency SDC-20¹⁰**).

CARE

PERSONAL HYGIENE (PH)

ODO observed and found the facility housed [REDACTED] detainees during the inspection; however, if the facility housed detainees at their maximum capacity of 690 detainees, the facility would not provide washbasins at a maximum ration of 1 washbasin to 12 detainees. ODO noted this as an **Area of Concern**.

ODO observed and found the facility housed [REDACTED] detainees during the inspection; however, if the facility housed detainees at their maximum capacity of 690 detainees, the facility would not provide showers at a maximum ration of 1 shower to 12 detainees. ODO noted this as an **Area of Concern**.

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 17 standards under PBNDS 2011 (2013 Errata) and found the facility in compliance with 16 of those standards. ODO found two deficiencies in the remaining one standard. ODO commends facility staff members for their responsiveness during this inspection. ODO recommends ERO work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations. A uniform corrective action plan was not required for ODO's last inspection of ICA, which occurred in March 2022.

⁹ "The local supplement to the detainee handbook shall include contact information for the ICE/ERO Field Office and the scheduled hours and days that ICE/ERO staff is available to be contacted by detainees at the facility. The same information shall be posted in the living areas (or "pods") of the facilities." *See* ICE PBNDS 2011 (2013 Errata), Standard, Staff-Detainee Communication, Section (V)(A).

¹⁰ "A copy of each completed detainee request shall be filed in the detainee's detention file and be retained there for three years at minimum." *See* ICE PBNDS 2011 (2013 Errata), Standard, Staff-Detainee Communication, Section (V)(B)(2).

Compliance Inspection Results Compared	First FY 2022 (PBNS 2011) (2013 Errata)	Second FY 2022 (PBNS 2011) (2013 Errata)
Standards Reviewed	23	17
Deficient Standards	0	1
Overall Number of Deficiencies	0	2
Repeat Deficiencies	0	0
Areas Of Concern	2	2
Corrective Actions	0	0
Facility Rating	Superior	Superior