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**Office of Detention Oversight
Compliance Inspection
2024-001-244**

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

**Pickens County Detention Center
Carrollton, Alabama**

November 28-30, 2023

COMPLIANCE INSPECTION
of the
PICKENS COUNTY DETENTION CENTER
Carrollton, Alabama

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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 Pickens County Detention Center (PCDC) in Carrollton, Alabama, from November 28 to 30, 2023.¹ The facility opened in 1999 and is owned by the Pickens County Commission and operated by the Pickens County Sheriff. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at PCDC in 2020 under the oversight of ERO’s Field Office Director (FOD) in New Orleans (ERO New Orleans). The facility operates under the National Detention Standards (NDS) 2019.

[REDACTED] A sheriff handles daily operations and manages [REDACTED] support personnel. Sysco provides food services, Quality Correctional Health provides medical care, and Kimbel provides commissary services at the facility. The facility does not hold any accreditations from any outside entities.

Capacity and Population Statistics	Quantity
ICE Bed Capacity ²	[REDACTED]
Average ICE Population ³	[REDACTED]
Adult Male Population (as of November 28, 2023)	[REDACTED]
Adult Female Population (as of November 28, 2023)	[REDACTED]

This was ODO’s first compliance inspection of the Pickens County Detention Center.

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

² Data Source: ERO Custody Management Division Authorized Facility List as of November 27, 2023.

³ *Ibid.*

COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population of 10 or more, and where detainees are housed for over 72 hours, to assess compliance with ICE national detention standards. While these inspections focus on facility compliance with detention standards that directly affect detainee life, health, safety, and/or well-being, in FY 2024 ODO added additional standards to the scope of each full inspection to ensure ODO inspects every standard at each facility at least once every other year.⁴

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.

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.

⁴ ODO reviews the facility’s compliance with selected standards in their entirety.

FINDINGS BY NATIONAL DETENTION STANDARDS 2019 MAJOR CATEGORIES

NDS 2019 Standards Inspected ^{5,6}	Deficiencies
Part 1 - Safety	
Environmental Health and Safety	0
Sub-Total	0
Part 2 - Security	
Admission and Release	0
Custody Classification System	3
Facility Security and Control	8
Funds and Personal Property	5
Post Orders	3
Searches of Detainees	1
Use of Force and Restraints	1
Special Management Units	0
Staff-Detainee Communication	0
Sexual Abuse and Assault Prevention and Intervention	1
Sub-Total	22
Part 4 - Care	
Food Service	2
Hunger Strikes	1
Medical Care	0
Personal Hygiene	0
Significant Self-Harm and Suicide Prevention and Intervention	0
Sub-Total	3
Part 5 - Activities	
Correspondence and Other Mail	0
Religious Practices	0
Telephone Access	1
Visitation ⁷	1
Voluntary Work Program	0
Sub-Total	2
Part 6 - Justice	
Grievance System	1
Law Libraries and Legal Materials	0

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

⁶ Beginning in FY 2024, ODO instituted a process of rotating all standards every other year. As a result, some standard components may not be present in all standards.

⁷ Visitation standard was not reviewed in its entirety as part of the standard rotation process for FY24; only addressed as a sub-standard requirement under the facility security and control standard (II)(C)(2)(a).

Sub-Total	1
Part 7 - Administration and Management	
Detention Files	1
Detainee Transfers	0
Sub-Total	1
Total Deficiencies	29

DETAINEE RELATIONS

ODO interviewed seven detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. All seven detainees reported satisfaction with facility services.

COMPLIANCE INSPECTION FINDINGS

SECURITY

CUSTODY CLASSIFICATION SYSTEM (CCS)

ODO interviewed the facility supervisor, reviewed training records and found the facility did not train two classification officers in the facility's classification process (**Deficiency CCS-3**⁸).

ODO interviewed the facility supervisor and found the facility classification system did not include procedures by which newly arriving detainees could appeal their classification level (**Deficiency CCS-28**⁹).

ODO reviewed the facility detainee handbook, dated April 2023, and found the handbook did not include all facility classification levels, applicable restrictions, nor the procedures by which a detainee may appeal his or her classification (**Deficiency CCS-30**¹⁰).

FACILITY SECURITY AND CONTROL (FSC)

ODO reviewed the facility FSC program and facility detainee handbook, interviewed the facility supervisor, and found the following deficiencies:

⁸ "The classification system shall ensure: ...

2. All officers assigned to classification duties shall be trained in the facility's classification process. The initial classification process and initial housing assignment should be completed within 12 hours of admission to the facility."

See ICE NDS 2019, Standard, Custody Classification System, Section (II)(A)(2).

⁹ "All facility classification systems shall include procedures by which new arrivals can appeal their classification levels." See ICE NDS 2019, Standard, Custody Classification System, Section (II)(G).

¹⁰ "The facility shall include a classification section in its detainee handbook which will include the following: ...

1. An explanation of the classification levels, with the conditions and restrictions applicable to each.
2. The procedures by which a detainee may appeal his or her classification."

See ICE NDS 2019, Standard, Custody Classification System, Section (II)(H)(1-2).

- No comprehensive staffing analysis and staffing plan to determine and meet the facility’s detainee supervision needs (**Deficiency FSC-4¹¹**).
- No annual review of the facility staffing analysis and staffing plan (**Deficiency FSC-5¹²**).
- The facility did not maintain documentation of cell and/or area searches (**Deficiency FSC-11¹³**);
- The facility did not maintain a separate log for legal visitors (**Deficiency FSC-16¹⁴**).
- No purpose of visit nor time of departure in visitor logbook (**Deficiency FSC-17¹⁵**).
- The facility did not maintain tool control inventory records (**Deficiency FSC-24¹⁶**).
- Repair and maintenance workers do not submit to an inspection and inventory of all tools, toolboxes, and equipment that could be used as weapons before entering and leaving the facility (**Deficiency FSC-25¹⁷**); and
- No rules nor procedures in the detainee handbook for counts and contraband (**Deficiency FSC-34¹⁸**).

FUNDS AND PERSONAL PROPERTY (FPP)

ODO reviewed the facility FPP program and facility detainee handbook, interviewed the facility supervisor, and found the following deficiencies:

- No written procedure for inventory nor audit of detainee funds, valuables, and personal

¹¹ “The facility shall develop and document comprehensive detainee supervision guidelines, as well as a comprehensive staffing analysis and staffing plan, to determine and meet the facility’s detainee supervision needs; these shall be reviewed and updated at least annually.” See ICE NDS 2019, Standard, Facility Security and Control, Section (II)(A).

¹² “The facility shall develop and document comprehensive detainee supervision guidelines, as well as a comprehensive staffing analysis and staffing plan, to determine and meet the facility’s detainee supervision needs; these shall be reviewed and updated at least annually.” See ICE NDS 2019, Standard, Facility Security and Control, Section (II)(A).

¹³ “Each housing unit, including the Special Management Unit (SMU), will document cell and area searches including the date, time, and findings, including location(s) where contraband is found, type(s) of contraband, and the searching officers’ names.” See ICE NDS 2019, Standard, Facility Security and Control, Section (II)(B)(1).

¹⁴ “The post officer will maintain the visitor logbook. Logbook entries of persons visiting detainees will be completed in accordance with Standard 5.5 ‘Visitation.’” See ICE NDS 2019, Standard, Facility Security and Control, Section (II)(C)(2)(a). “The facility shall maintain a log of all general visitors, and a separate log of legal visitors as described below. The visitation logs shall comply with local policy and procedures.” See ICE NDS 2019, Standard, Visitation, Section (II)(C).

¹⁵ “Every entry in the logbook will identify the person visiting; the person or department visited; date and time of visitor’s arrival; purpose of visit; and time of departure.” See ICE NDS 2019, Standard, Facility Security and Control, Section (II)(C)(2)(b).

¹⁶ “The facility administrator shall designate the person responsible for developing and implementing tool-control procedures, along with an inventory and an inspection system to ensure accountability. These inventories shall be kept current and readily available.” See ICE NDS 2019, Standard, Facility Security and Control, Section (II)(F).

¹⁷ “All visitors who are not ICE/ERO officials or facility employees, including repair and maintenance workers, shall submit to an inspection and inventory of all tools, toolboxes, and equipment that could be used as weapons before entering and leaving the facility.” See ICE NDS 2019, Standard, Facility Security and Control, Section (II)(G).

¹⁸ “The facility handbook shall notify detainees in a language or manner they understand of the facility’s rules and procedures governing pertinent security issues, e.g., counts and contraband.” See ICE NDS 2019, Standard, Facility Security and Control, Section (II)(J).

- property (**Deficiency FPP-18**¹⁹).
- No quarterly inventory of detainee baggage nor other non-valuable property (**Deficiency FPP-19**²⁰).
 - No date, time, nor name of the officer on quarterly inventory logs (**Deficiency FPP-20**²¹).
 - No written procedures for returning funds, valuables, and personal property to a detainee being transferred or released (**Deficiency FPP-22**²²). **This is a priority component;** and
 - No detainee notification of facility policies and procedures concerning property (**Deficiency FPP-34**²³).

POST ORDERS (PO)

ODO interviewed facility leadership, reviewed POs, and found the following deficiencies:

- The facility designee did not sign seven out of seven housing-unit orders (**Deficiency PO-4**²⁴).
- No facility staff signed nor dated seven out of seven POs to indicate they read and understood the PO provisions prior to assuming post (**Deficiency PO-7**²⁵); and
- The facility did not clearly state in one out of seven POs, to consider any staff member taken hostage to be under duress (**Deficiency PO-11**²⁶).

SEARCHES OF DETAINEES (SD)

ODO interviewed facility leadership, reviewed the SD program, and found the facility did not have

¹⁹ “Each facility shall have a written procedure for inventory and audit of detainee funds, valuables, and personal property.” *See* ICE NDS 2019, Standard, Funds and Personal Property, Section (II)(D).

²⁰ “An inventory of detainee baggage and other non-valuable property will be conducted by the facility administrator or designee at least once each quarter.” *See* ICE NDS 2019, Standard, Funds and Personal Property, Section (II)(D).

²¹ “The facility’s logs will indicate the date, time, and name of the officer(s) conducting the inventory.” *See* ICE NDS 2019, Standard, Funds and Personal Property, Section (II)(D).

²² “Each facility shall have a written procedure for returning funds, valuables, and personal property to a detainee being transferred or released.” *See* ICE NDS 2019, Standard, Funds and Personal Property, Section (II)(E).

²³ “The facility handbook shall notify detainees of facility policies and procedures concerning personal property, including:

1. Which items they may retain in their possession.
2. That, upon request, they will be provided a copy of any identity document (passport, birth certificate, etc.) placed in their A-files or detention files.
3. The rules for storing or mailing property not allowed in their possession.
4. The procedures for claiming property upon release, transfer, or removal; and
5. The procedures for filing a claim for lost or damaged property?”

See ICE NDS 2019, Standard, Funds and Personal Property, Section (II)(H) (1-5).

²⁴ “The facility administrator or designee shall review and sign housing-unit orders.” *See* ICE NDS 2019, Standard, Post Orders, Section (II)(B).

²⁵ “Prior to assuming a post, officers will sign and date the post order to indicate having read and understood its provisions.” *See* ICE NDS 2019, Standard, Post Orders, Section (II)(B).

²⁶ “Post orders for armed posts, and for posts that control access to the institution perimeter, shall clearly state that any staff member who is taken hostage is considered to be under duress.” *See* ICE NDS 2019, Standard, Post Orders, Section (II)(D).

POs for closely observing a detainee in a dry cell status (**Deficiency SD-52**²⁷).

USE OF FORCE AND RESTRAINTS (UOFR)

ODO reviewed the facility UOF policy, interviewed the jail administrator, and found no written procedures to govern the mandatory after-action review for UOF incidents (whether calculated or immediate) nor for the application of restraints (**Deficiency UOFR-94**²⁸).

ODO interviewed facility leadership, reviewed the UOF policy, and found the facility did not have handheld cameras available for use during UOF incidents. However, the facility did not have any UOF incidents during the review period, and ODO noted this as an **Area of Concern**.

SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION (SAAPI)

ODO reviewed the facility SAAPI program and found no requirement to cooperate with all ICE/ERO audits and other methods for ICE to monitor facility compliance with sexual abuse and assault policies and standards (**Deficiency SAAPI-13**²⁹).

CARE

FOOD SERVICE (FS)

ODO reviewed facility FS policy, interviewed the food service administrator (FSA), and found a registered dietician did not conduct a nutritional analysis on the master-cycle menu (**Deficiency FS-32**³⁰). **This is a priority component.**

ODO reviewed facility FS policy, interviewed the FSA, and found a dietician had not certified the facility's menus (**Deficiency FS-33**³¹). **This is a priority component.**

HUNGER STRIKES (HS)

ODO reviewed [REDACTED] correctional worker training files and found in [REDACTED] out of [REDACTED] files, no initial

²⁷ “The facility shall have post orders for closely observing a detainee in dry cell status.” *See* ICE NDS 2019, Standard, Searches of Detainees, Section (II)(D)(5).

²⁸ “Written procedures shall govern the mandatory after-action review for use-of-force incidents (whether calculated or immediate), and for the application of restraints.” *See* ICE NDS 2019, Standard, Use of Force and Restraints, Section (II)(K).

²⁹ “The facility shall have written policy and procedures for a Sexual Abuse and Assault Prevention and Intervention Program. This policy must mandate zero tolerance toward all forms of sexual abuse and assault, outline the facility's approach to preventing, detecting, and responding to such conduct, and include, at a minimum: ...

7. The facility's requirement to cooperate with all ICE/ERO audits and monitoring of facility compliance with sexual abuse and assault policies and standards.”

See ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(A) (6-7).

³⁰ “A registered dietitian shall conduct an annual complete nutritional analysis of every master-cycle menu planned by the FSA.” *See* ICE NDS 2019, Standard, Food Service, Section (II)(D)(2).

³¹ “Menus must be certified by the dietitian before implementation.” *See* ICE NDS 2019, Standard, Food Service, Section (II)(D)(2).

nor subsequent annual training to recognize the signs of a hunger strike (**Deficiency HS-1**³²).

ACTIVITIES

TELEPHONE ACCESS (TA)

ODO observed the telephones the facility provided for detainee use, interviewed the jail administrator and found the facility did not maintain an operable teletypewriter, telecommunications device for the deaf, nor other type of captioned telephone for disabled detainee use (**Deficiency TA-43**³³).

VISITATION (V)

ODO reviewed FSC program and found the facility does not maintain a separate log of legal visitors (**Deficiency V-7**³⁴).

JUSTICE

GRIEVANCE SYSTEM (GS)

ODO reviewed the facility detainee handbook and found the grievance section did not state staff cannot harass, discipline, punish, nor otherwise retaliate against any detainee filing a grievance (**Deficiency GS-34**³⁵).

ADMINISTRATION AND MANAGEMENT

DETENTION FILES (DF)

ODO reviewed 11 DFs and found in 7 out of 11 files, no classification levels of the detainees (**Deficiency DF-1**³⁶).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 25 standards under NDS 2019

³² "All staff shall be trained initially and annually thereafter to recognize the signs of a hunger strike." *See* ICE NDS 2019, Standard, Hunger Strikes, Section (II)(A).

³³ "Consistent with Standard 4.7 'Disability Identification, Assessment, and Accommodation,' the facility shall provide equal access to telephone services for individuals with disabilities." *See* ICE NDS 2019, Standard, Telephone Access, Section (II)(L).

³⁴ The facility shall maintain a log of all general visitors, and a separate log of legal visitors." *See* ICE NDS 2019, Standard, Visitation, Section (II)(C).

³⁵ "The grievance section of the facility handbook will provide notice of the following: ...

4. Notice that staff may not harass, discipline, punish, or otherwise retaliate against any detainee for filing a grievance."

See ICE NDS 2019, Standard, Grievance System, Section (II)(H)(1-4).

³⁶ "The file will contain the classification level and any copies of receipts for items issued to/surrendered by the detainee." *See* ICE NDS 2019, Standard, Detention Files, Section (II)(A).

and found the facility in compliance with 12 of those standards. ODO found 29 deficiencies in the remaining 13 standards. This was ODO’s first inspection of PCDC; therefore, ODO performed no trend analysis of this facility. The two deficiencies found in FS, one in FPP are priority component deficiencies. Prior to this inspection, the facility’s last known oversight inspection was an ERO Operational Review Self-Assessment, which occurred on December 15, 2021. ODO recommends ERO New Orleans continue to work with the facility to resolve deficiencies that remain outstanding in accordance with contractual obligations.

Compliance Inspection Results Compared	No Previous ODO Inspection	FY 2024 Full Inspection (NDS 2019)
Standards Reviewed	N/A	25
Deficient Standards	N/A	13
Overall Number of Deficiencies	N/A	29
Priority Component Deficiencies	N/A	3
Repeat Deficiencies	N/A	N/A
Areas Of Concern	N/A	1
Corrective Actions	N/A	0
Facility Rating	N/A	Acceptable/Adequate