

Office of Professional Responsibility

Pine Prairie ICE Processing Center Compliance Inspection 2025-001-038

April 8-10, 2025




U.S. Immigration
and Customs
Enforcement

COMPLIANCE INSPECTION
of the
PINE PRAIRIE ICE PROCESSING CENTER
Pine Prairie, Louisiana

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COMPLIANCE INSPECTION TEAM MEMBERS

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

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 Pine Prairie ICE Processing Center (PPIPC) in Pine Prairie, Louisiana, from April 8 to 10, 2025.¹ The facility opened in 2000 and is owned and operated by The Geo Group, Inc. (GEO). The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at PPIPC in 2016 under the oversight of ERO's Field Office Director in New Orleans (ERO New Orleans). The facility operates under the Performance-Based National Detention Standards (PBNDS) 2011 (Revised 2016).

[REDACTED] A facility administrator handles daily operations and manages support personnel. GEO provides food services and medical care, and Keefe Commissary provides commissary services at the facility. The facility was accredited by the American Correctional Association in November 2023 and the National Commission on Correctional Health Care in June 2020. In August 2024, PPIPC 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	[REDACTED]
Average ICE Population ³	[REDACTED]
Adult Male Population (as of April 8, 2025)	[REDACTED]
Adult Female Population (as of April 8, 2025)	[REDACTED]

During its last rated inspection, in Fiscal Year (FY) 2024, ODO found 8 deficiencies in the following areas: Admission and Release (1); Funds and Personal Property (1); Medical Care (2); Personal Hygiene (1); and Significant Self-harm and Suicide Prevention and Intervention (3).

¹ This facility holds male detainees with low, medium, 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 April 7, 2025.

³ *Ibid.*

⁴ The facility's detained population has increased since January 2025.

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.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.

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.

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

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

PBND 2011 (Revised 2016) Standards Inspected ^{6,7}	Deficiencies
Part 1 - Safety	
Emergency Plans	0
Environmental Health and Safety	0
Transportation (By Land)	0
Sub-Total	0
Part 2 - Security	
Admission and Release	0
Custody Classification System	0
Contraband	0
Funds and Personal Property	0
Hold Rooms in Detention Facilities	4
Key and Lock Control	0
Sexual Abuse and Assault Prevention and Intervention	0
Special Management Units	0
Staff-Detainee Communication	0
Tool Control	0
Use of Force and Restraints	0
Sub-Total	4
Part 3 - Order	
Disciplinary System	0
Sub-Total	0
Part 4 - Care	
Food Service	0
Medical Care	0
Significant Self-harm and Suicide Prevention and Intervention	0
Terminal Illness, Advance Directives and Death	0
Disability Identification, Assessment, and Accommodation	0
Sub-Total	0
Part 5 - Activities	
Recreation	0
Visitation	0
Sub-Total	0
Part 6 - Justice	

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

⁷ Beginning in FY 2024, ODO instituted a process of rotating all standards every other year. As a result, some standards may not be present in all inspections.

Detainee Handbook	0
Grievance System	0
Legal Rights Group Presentations	0
Sub-Total	0
Part 7 - Administration and Management	
Interviews and Tours	0
Staff Training	0
Sub-Total	0
Total Deficiencies	4

DETAINEE RELATIONS

ODO interviewed 12 detainees, who each voluntarily agreed to participate. ODO requested interviews from four additional detainees; however, all four detainees declined ODO's request for an interview. None of the detainees made allegations of discrimination, mistreatment, or abuse. All detainees reported satisfaction with facility services.

COMPLIANCE INSPECTION FINDINGS

SECURITY

HOLD ROOMS IN DETENTION FACILITIES (HRDF)

ODO interviewed the facility's intake lieutenant, observed the facility's holding room, and found the facility actively using detainee holding room Charlie-Delta as a holding cell, containing unauthorized bunks and other sleeping apparatus (**Deficiency HRDF-8⁸**).

ODO interviewed the facility's intake lieutenant, observed the facility's holding room, and found the following deficiencies:

- The facility has not maintained a detention log since January 2025 (**Deficiency HRDF-44⁹**);
- The facility did not maintain a detention log (manual or electronic) containing the required information: name, sex, age, A-number, nationality, reason for placement, time in, time out, and date and time of new age determination (**Deficiency HRDF-45¹⁰**); and

⁸ "Bunks, cots, beds and other sleeping apparatus are not permitted inside hold rooms." See ICE PBNDS 2011 (Revised 2016), Standard, Hold Rooms in Detention Facilities, Section (V)(A)(5).

⁹ "Each facility shall maintain a detention log (manual or electronic) into which the hold room officer shall immediately enter specific information on an ICE/ERO detainee's placement in a hold room." See ICE PBNDS 2011 (Revised 2016), Standard, Hold Rooms in Detention Facilities, Section (V)(D)(2).

¹⁰ "The detention log shall record each detainee's: ...

- a. name;
- b. sex;
- c. age;
- d. A-number;

- The facility did not maintain a detention log providing space to record mealtimes, visual checks, and security concerns (**Deficiency HRDF-46**¹¹).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 27 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 26 of those standards. ODO found 4 deficiencies in the 1 remaining standard. Since PPIPC's last rated inspection in April 2024, the facility's compliance with ICE PBNDS 2011 (Revised 2016) has trended upward. PPIPC went from 5 deficient standards and 8 deficiencies in April 2024, to 1 deficient standard and 4 deficiencies during this most recent full inspection. ODO received a completed uniform corrective action plan for its last inspection which likely resolved ODO's previously cited deficiencies. ODO recommends ERO New Orleans continue to work with the facility to resolve the deficiencies that remain outstanding in accordance with contractual obligations.

Compliance Inspection Results Compared	FY 2024 Full Inspection (PBNDS 2011) (Revised 2016)	FY 2025 Full Inspection (PBNDS 2011) (Revised 2016)
Standards Reviewed	28	27
Deficient Standards	5	1
Overall Number of Deficiencies	8	4
Priority Component Deficiencies	2	0
Repeat Deficiencies	0	0
Areas Of Concern	0	0
Corrective Actions	0	0
Facility Rating	Good	Superior

e. nationality;

f. reason for placement;

g. time in;

h. time out; and

i. date and time of new age determination." See ICE PBNDS 2011 (Revised 2016), Standard, Hold Rooms in Detention Facilities, Section (V)(D)(2)(a-i).

¹¹ "The log shall also provide space to record mealtimes, visual checks, security concerns (which may also necessitate an incident report) and comments." See ICE PBNDS 2011 (Revised 2016), Standard, Hold Rooms in Detention Facilities, Section (V)(D)(2).



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