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U.S. Immigration and Customs Enforcement  
Office of Professional Responsibility  
Inspections and Detention Oversight Division  
Washington, DC 20536-5501

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**Office of Detention Oversight  
Compliance Inspection**

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

**Bossier Parish Correctional Center  
Plain Dealing, Louisiana**

**October 22-24, 2019**

**COMPLIANCE INSPECTION**  
**of the**  
**BOSSIER PARISH CORRECTIONAL CENTER**  
Plain Dealing, Louisiana

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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 Bossier Parish Correctional Center (BPCC) in Plain Dealing, Louisiana, from October 22 to 24, 2019.<sup>1</sup> The facility opened in 2018, is owned by Bossier Parish, and is operated by Bossier Parish Sheriff's Office. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at BPCC in 2019 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) 2000.

ERO has not assigned Deportation Officers (DOs) or a Detention Services Manager (DSM) to the facility. The BPCC warden handles daily facility operations and is supported by █ personnel. Sysco provides food services and Ochsner Medical Center provides medical care at the facility. The facility is accredited by the National Commission on Correctional Health Care.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity <sup>2</sup>	75
Average ICE Detainee Population <sup>3</sup>	131
Male Detainee Population (as of 10/2/2019)	294
Female Detainee Population (as of 10/2/2019)	N/A

This is ODO's first inspection at the BPCC.

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

<sup>2</sup> Data Source: ERO Facility List Report as of October 2, 2019.

<sup>3</sup> *Ibid.*

## COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population greater than ten, 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.<sup>4</sup>

ODO identifies violations of ICE detention standards, ICE policies, or operational procedures as “deficiencies.” ODO also highlights instances in which 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.

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<sup>4</sup> ODO reviews the facility’s compliance with selected standards in their entirety.

## FINDINGS BY NATIONAL DETENTION STANDARDS 2000 MAJOR CATEGORIES

NDS 2000 Standards Inspected <sup>5</sup>	Deficiencies
<b>Part 1 – Detainee Services</b>	
Access to Legal Material	1
Admission and Release	2
Detainee Classification System	1
Detainee Grievance System	2
Food Service	13
Funds and Personal Property	3
Recreation	2
Religious Practices	4
Staff-Detainee Communication	9
Telephone Access	2
Visitation	7
<b>Sub-Total</b>	<b>46</b>
<b>Part 2 – Security and Control</b>	
Environmental Health and Safety	6
Special Management Unit (Administrative Segregation)	3
Special Management Unit (Disciplinary Segregation)	2
Use of Force	3
<b>Sub-Total</b>	<b>14</b>
<b>Part 3 – Health Services</b>	
Medical Care	3
Suicide Prevention and Intervention	0
<b>Sub-Total</b>	<b>3</b>
<b>Total Deficiencies</b>	<b>63</b>

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

## DETAINEE RELATIONS

ODO interviewed 15 detainees, each of whom voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. Most detainees reported satisfaction with facility services except for the concerns listed below.

*Staff-Detainee Communication:* Several detainees stated that they rarely see ERO officers in the housing units and when they do, it is not according to the posted scheduled visits.

- Action Taken: ODO reviewed and found discrepancies between the ERO visitation schedules posted in the detainee housing units and the ERO sign-in logs in the housing units. ODO addressed this concern with the Assistant Field Office Director (AFOD) and noted it as a deficiency under the *Staff-Detainee Communication* section of this report.

*Staff-Detainee Communication:* One detainee stated that ERO and facility staff were not responsive in helping him obtain his passport or informing him of how his account funds would be returned to him upon release.

- Action Taken: ODO spoke with the detainee's case officer and learned that the case officer informed the detainee that his passport was pending with his consulate and that he would regularly update the detainee with the status, as appropriate. Additionally, ODO learned that a DO informed the detainee that he would receive his account funds in cash.

*Access to Legal Material:* One detainee complained that his scheduled law library time sometimes overlaps with his work assignment in the kitchen and that he receives reduced pay when he is late to work as a result.

- Action Taken: ODO reviewed the facility's law library schedule, confirmed that the schedule occasionally overlaps with the detainee's work schedule, and addressed the issue with facility leadership. The facility adjusted the detainee's work assignment to provide reasonable access to the law library and issued the detainee back-pay to cover the instances when his pay was reduced.

*Environmental Health and Safety:* Four detainees stated that the showers in the housing units lack a consistent flow of hot water.

- Action Taken: ODO inspected the water temperature in the showers and found that the temperatures were below standard requirements. ODO spoke with maintenance department staff, who stated that they have made several repairs to the water heater; however, the issue is ongoing.

*Medical Care:* One detainee stated that during his annual dental appointment, the dentist did not clean his teeth or fill his cavity.

- Action Taken: ODO reviewed the detainee's dental records and spoke with facility medical staff. ODO learned that on April 2, 2019, the detainee received a complete

dental assessment, including X-rays. The dentist prepared a treatment plan, which included fillings for three cavities and a cleaning. ODO confirmed that the detainee is on a waiting list for the follow-up treatment.

*Religious Practices:* One detainee stated that he is Moorish and has not received prayer materials nor is he permitted to pray with other detainees of the same religion.

- Action Taken: ODO spoke with the facility staff and learned that the detainee cannot comingle with the other detainees due to security concerns. Additionally, ODO learned that the facility is researching prayer materials to provide the detainee.

# COMPLIANCE INSPECTION FINDINGS

## DETAINEE SERVICES

### ACCESS TO LEGAL MATERIAL (ALM)

ODO reviewed the facility detainee handbook and found that it does not provide detainees with the procedures for either requesting legal reference materials not maintained in the law library or for notifying a designated employee that library material is missing or damaged; additionally, the rules and procedures governing access to legal materials were not posted in the law library (**Deficiency ALM-1<sup>6</sup>**).

### ADMISSION AND RELEASE (A&R)

ODO learned that, while detainees are issued basic hygiene items during the admission process, non-indigent detainees are required to use the commissary to replenish hygiene items (**Deficiency A&R-1<sup>7</sup>**).

ODO reviewed 30 detainee detention files and found that none of them contained an Order to Detain or Release (Form I-203 or 203a) (**Deficiency A&R-2<sup>8</sup>**).

### DETAINEE CLASSIFICATION SYSTEM (DCS)

ODO interviewed the booking sergeant and learned that BPCC generally only receives a completed Record of Persons and Property Transferred (Form I-216) and Record of Deportable/Inadmissible Alien (Form I-213) for arriving detainees; however, these forms do not provide sufficient detail on the detainee's risk assessment for BPCC to make an informed classification determination (**Deficiency DCS-1<sup>9</sup>**).

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<sup>6</sup> "The detainee handbook or equivalent, provides detainees with the rules and procedures governing access to legal materials, including the following information: . . .

5. the procedure for requesting legal reference materials not maintained in the law library; and

6. the procedure for notifying a designated employee that library material is missing or damaged.

These policies and procedures shall also be posted in the law library." *See* ICE NDS 2000, Standard, Access to Legal Material, Section (III)(Q).

<sup>7</sup> "Staff shall provide male and female detainees with the items of personal hygiene appropriate for, respectively, men and women. They will replenish supplies as needed." *See* ICE NDS 2000, Standard, Admission and Release, Section (III)(G).

<sup>8</sup> "An order to detain or release (Form I-203 or I-203a) bearing the appropriate official signature shall accompany the newly arriving detainee. IGSA facilities shall forward the detainee's A-file or temporary work file to the INS office with jurisdiction. Staff shall prepare specific documents in conjunction with each new arrival to facilitate timely processing, classification, medical screening, accounting of personal effects, and reporting of statistical data." *See* ICE NDS 2000, Standard, Admission and Release, Section (III)(H).

<sup>9</sup> "All detainees are classified upon arrival, before being admitted in the general population. INS will provide CDFs and IGSA facilities with the data they need from each detainee's file to complete the classification process." *See* ICE NDS 2000, Standard, Detainee Classification System, Section (III)(A)(1).

## DETAINEE GRIEVANCE PROCEDURES (DGP)

ODO reviewed the grievance section of the facility's detainee handbook and found that the grievance procedures do not allow any detainee dissatisfied with the facility's response to his/her grievance to communicate directly with ERO (**Deficiency DGP-1<sup>10</sup>**).

ODO also found that the facility's detainee handbook does not provide detainees with notice of the procedures for contacting ERO to appeal the decision of the Officer in Charge (OIC) of the facility (**Deficiency DGP-2<sup>11</sup>**).

## FOOD SERVICE (FS)

ODO found that the facility has not employed a cook supervisor (CS) or equivalent to assist the food service administrator (FSA) in the daily management of the food service operations (**Deficiency FS-1<sup>12</sup>**).

ODO interviewed the FSA and learned that the facility training officer has not provided food service workers with training on the ICE NDS (**Deficiency FS-2<sup>13</sup>**).

ODO found that the facility does not provide orientation and training to newly assigned food service workers on the rules and procedures of the food service department (**Deficiency FS-3<sup>14</sup>**).

ODO observed food service operations and found that a cook foreman (CF) or equivalent does not inspect food service workers at the start of each work period for potential signs of illness, skin disease, diarrhea, or infected cuts or boils (**Deficiency FS-4<sup>15</sup>**).

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<sup>10</sup> "CDFs and IGSA facilities must allow any INS detainee dissatisfied with the facility's response to his/her grievance to communicate directly with INS." *See* ICE NDS 2000, Standard, Detainee Grievance Procedures, Section (III)(C).

<sup>11</sup> "The grievance section of the detainee handbook will provide notice of the following: ...

4. The procedures for contacting the INS to appeal the decision of the OIC of a CDF or an IGSA facility."

*See* ICE NDS 2000, Standard, Detainee Grievance Procedures, Section (III)(G)(4).

<sup>12</sup> "The CS or equivalent is responsible for assisting the FSA in the daily management of food service operations, especially the sanitation program and proper food preparation and presentation. The CS is also responsible for developing the food service work force, including staff and detainees." *See* ICE NDS 2000, Standard, Food Service, Section (III)(A)(2).

<sup>13</sup> "The facility training officer will devise and provide appropriate training to all food service personnel in detainee custodial issues. Among other things, this training will cover INS's detention standards." *See* ICE NDS 2000, Standard, Food Service, Section (III)(B)(1).

<sup>14</sup> "To ensure a quality food service program and instill good work habits, each CS shall instruct newly assigned detainee workers in the rules and procedures of the food service department. During the orientation and training session(s), the CS will explain and demonstrate safe work practices and methods and will identify the safety features of individual products/pieces of equipment." *See* ICE NDS 2000, Standard, Food Service, Section (III)(B)(12).

<sup>15</sup> "The CF or equivalent will inspect all detainee food service workers daily at the start of each work period. Detainees who exhibit signs of illness, skin disease, diarrhea (admitted or suspected), or infected cuts or boils shall be removed from the work assignment and immediately referred to Health Services for determination of duty fitness. The detainees shall return to work only after the FSA has received written clearance from Health Services staff." *See* ICE NDS 2000, Standard, Food Service, Section (III)(H)(4).

ODO observed food service workers handling food without wearing plastic gloves (**Deficiency FS-5<sup>16</sup>**).

Additionally, ODO observed and learned from the FSA that the facility does not issue food service workers clean white uniforms and that food service personnel do not consistently wear rubber-soled safety shoes while working in the food preparation area or on the serving line (**Deficiency FS-6<sup>17</sup>**).

ODO found that the facility does not provide a common-fare or religious diet menu(s) and does not employ a chaplain to verify religious diet requests (**Deficiency FS-7<sup>18</sup>**).

ODO also found that, while menu items are changed when necessary, the changes are not documented and forwarded to the FSA (**Deficiency FS-8<sup>19</sup>**).

ODO inspected the dry storage area and observed food items on pallets not stored sufficiently far from the walls to facilitate pest control measures (**Deficiency FS-9<sup>20</sup>**); additionally, food items were not stored at least 18 inches below the sprinkler deflectors (**Deficiency FS-10<sup>21</sup>**).

*Corrective Action:* Prior to the completion of the inspection, the facility initiated corrected action by moving food items away from the walls and top shelf to provide sufficient clearance (**C-1**).

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<sup>16</sup> “Servers must wear plastic gloves whenever direct contact with a food or beverage is possible. They must use tongs, forks, spoons, ladles, or other such utensils to serve any food or beverage; serving with hands along, with no utensil, is strictly prohibited.” See ICE NDS 2000, Standard, Food Service, Section (III)(C)(2)(c).

<sup>17</sup> “Personal Hygiene of Staff and Detainees: ...

- d. Detainee food service workers shall be provided with and use clean white uniforms while working in a food preparation area or on the serving line.
- e. Approved rubber soled safety shoes shall be provided and used by all food service personnel working in food service.”

See ICE NDS 2000, Standard, Food Service, Section (III)(H)(2)(d) and (e).

<sup>18</sup> “The INS requires all facilities to provide detainees requesting a religious diet reasonable and equitable opportunity to observe their religious dietary practice within the constraints of budget limitations and the security and orderly running of the facility through a common fare menu. The detainee will provide a written statement articulating the religious motivation for participation in the common fare program. Detainees whose religious beliefs require adherence to particular dietary laws will be referred to the Chaplain. After verifying the religious dietary requirement by reviewing files and/or consulting with local religious representatives, the Chaplain will issue specific written instructions. Special diets will be kept simple, as much like the food served on the main line as possible....Common fare is intended to accommodate detainees whose religious dietary needs cannot be met on the main line. The common-fare menu is based on a 14-day cycle, with special menus for the 10 Federal holidays. The menus must be certified as exceeding minimum daily nutritional requirements.” See ICE NDS 2000, Standard, Food Service, Section (III)(E)(1)(2).

<sup>19</sup> “The CS or equivalent has the authority to change menu items when necessary. Every such change/substitution must be documented and forwarded to the FSA. The CS shall exercise this menu-changing authority as infrequently as possible.” See ICE NDS 2000, Standard, Food Service, Section (III)(Food Preparation)(1).

<sup>20</sup> “Store all products at least six inches from the floor and sufficiently far from walls to facilitate pest-control measures.” See ICE NDS 2000, Standard, Food Service, Section (III)(J)(3)(d).

<sup>21</sup> “All facilities shall meet the following environmental standards: ...

- e. Eighteen-inch clearance (minimum) underneath sprinkler deflectors.”

See ICE NDS 2000, Standard, Food Service, Section (III)(H)(5)(e).

ODO learned from the FSA that the facility does not maintain a 15-day food supply (**Deficiency FS-11<sup>22</sup>**).

ODO observed hazardous chemicals not securely stored under the sinks (**Deficiency FS-12<sup>23</sup>**).

ODO tested the water temperature in the restroom adjacent to the kitchen and determined that the sink did not maintain a supply of hot water; additionally, no signs were displayed directing all personnel to wash their hands (**Deficiency FS-13<sup>24</sup>**).

## **FUNDS AND PERSONAL PROPERTY (F&PP)**

ODO interviewed the booking sergeant and learned that the facility does not have a written procedure for inventory and receipt of detainee funds and valuables (**Deficiency F&PP-1<sup>25</sup>**); additionally, the facility does not conduct audits of detainee funds, valuables, and personal property (**Deficiency F&PP-2<sup>26</sup>**).

ODO also learned that the facility does not report and turn over detainee abandoned property to ERO, rather they destroy the property after 90 days (**Deficiency F&PP-3<sup>27</sup>**).

## **RECREATION (R)**

ODO reviewed recreation logs and found that detainees do not consistently receive at least one hour of outdoor recreation daily (**Deficiency R-1<sup>28</sup>**).

ODO interviewed the BPCC warden and learned that the facility has not employed an individual responsible for the development and oversight of the recreation program (**Deficiency R-2<sup>29</sup>**).

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<sup>22</sup> “Determining inventory levels and properly receiving, storing, and issuing goods are critical to controlling costs and maintaining quality. While the FSA shall base inventory levels on facility needs, each facility will at all times stock a 15 day-minimum food supply. Inventory levels are established, monitored, and periodically adjusted to correct excesses or shortages.” *See* ICE NDS 2000, Standard, Food Service, Section (III)(J)(4).

<sup>23</sup> “All toxic, flammable, and caustic materials shall be segregated from food products and stored in a locked and labeled cabinet or room.” *See* ICE NDS 2000, Standard, Food Service, Section (III)(H)(11)(c)(1).

<sup>24</sup> “Lavatories:

a. ...Toilet facilities, including rooms and fixtures, shall be kept clean and in good repair. Signs shall be prominently displayed directing all personnel to wash hands after using the toilet.

b. Lavatories shall have readily available hot and cold water....”

*See* ICE NDS 2000, Standard, Food Service, Section (III)(H)(9)(a)(b).

<sup>25</sup> “Each facility shall have a written standard procedure for inventory and receipt of detainee funds and valuables.” *See* ICE NDS 2000, Standard, Funds and Personal Property, Section (III)(D).

<sup>26</sup> “Each facility shall have a written procedure for inventory and audit of detainee funds, valuables, and personal property.” *See* ICE NDS 2000, Standard, Funds and Personal Property, Section (III)(F).

<sup>27</sup> “All CDFs and IGSA facilities shall report and turn over to INS all detainee abandoned property.” *See* ICE NDS 2000, Standard, Funds and Personal Property, Section (III)(I).

<sup>28</sup> “If outdoor recreation is available at the facility, each detainee shall have access for at least one hour daily, at a reasonable time of day, five days a week, weather permitting.” *See* ICE NDS 2000, Standard, Recreation, Section (III)(B)(1).

<sup>29</sup> “All facilities shall have an individual responsible for the development and oversight of the recreation program.” *See* ICE NDS 2000, Standard, Recreation, Section (III)(F).

## RELIGIOUS PRACTICES (RP)

The facility has not employed a chaplain or designated an individual responsible for managing religious activities (**Deficiency RP-1**<sup>30</sup>).

Additionally, while detainees are permitted to engage in religious activities in the housing unit, the facility does not have a designated space for religious activities (**Deficiency RP-2**<sup>31</sup>).

The food service department has not developed procedures for accommodating, within reason, detainees' religious dietary requirements (**Deficiency RP-3**<sup>32</sup>). Nor does the facility have a policy in place to facilitate the observance of important "holy days" (**Deficiency RP-4**<sup>33</sup>).

## STAFF-DETAINEE COMMUNICATION (SDC)

The facility does not have a policy and procedures to ensure and document that the ICE OIC, Assistant OIC, and designated department heads conduct regular unannounced visits to the facility's living and activity areas, to encourage informal communication between staff and detainees and informally observe living and working conditions (**Deficiency SDC-1**<sup>34</sup>). Likewise, ODO interviewed ERO officers responsible for conducting scheduled visits with detainees and learned that they are not familiar with ICE detention standards and do not report all violations to the local Field Office Director (**Deficiency SDC-2**<sup>35</sup>).

ODO reviewed the facility's policy pertaining to SDC and found that it does not include procedures to route detainee requests to the appropriate ICE official (**Deficiency SDC-3**<sup>36</sup>).

ODO reviewed detainee request logs and determined that the facility does not forward detainee requests to the local ERO field office within 72 hours, nor does the local ERO field office respond to the request within 72 hours of receipt. Additionally, ODO found that the facility does not have procedures in place for an expedited review and response to detainee requests that are serious in

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<sup>30</sup> "The Chaplain or designated individual is responsible for managing religious activities in the facility." *See* ICE NDS 2000, Standard, Religious Practices, Section (III)(D).

<sup>31</sup> "All facilities shall designate space for religious activities." *See* ICE NDS 2000, Standard, Religious Practices, Section (III)(E).

<sup>32</sup> "The food service department will implement procedures for accommodating, within reason, detainees' religious dietary requirements." *See* ICE NDS 2000, Standard, Religious Practices, Section (III)(M).

<sup>33</sup> "A policy consistent with maintaining safety, security and the orderly operation of the facility shall be in place to facilitate the observance of important 'holy days.'" *See* ICE NDS 2000, Standard, Religious Practices, Section (III)(I).

<sup>34</sup> "Policy and procedures shall be in place to ensure and document that the ICE Officer in Charge (OIC), the Assistant Officer in Charge (AOIC) and designated department heads conduct regular unannounced (not scheduled) visits to the facility's living and activity areas to encourage informal communication between staff and detainees and informally observing living and working conditions...." *See* ICE NDS 2000, Standard, Staff-Detainee Communication, Section (III)(A)(1).

<sup>35</sup> "The purpose for these scheduled weekly visits is to address detainees' personal concerns and to monitor living conditions. Facility or District deportation staff in the jurisdiction where these facilities are located shall conduct these scheduled visits. The visiting officer should be familiar with the ICE detention standards and report all violations to the Field Director." *See* ICE NDS 2000, Standard, Staff-Detainee Communication, Section (III)(A)(2).

<sup>36</sup> "All facilities that house ICE detainees must have written procedures to route detainee requests to the appropriate ICE official." *See* ICE NDS 2000, Standard, Staff-Detainee Communication, Section (III)(B).

nature (**Deficiency SDC-4**<sup>37</sup>).

ODO also found that detainee request logs do not specify the officer who logged the request or the dates the request was forwarded to ICE and returned (**Deficiency SDC-5**<sup>38</sup>).

ODO reviewed the detention files of 30 detainees who had filed a request prior to the inspection and found that none of the files included the completed detainee request (**Deficiency SDC-6**<sup>39</sup>).

ODO found that, while the facility maintains the detainee handbook on kiosks in the housing units, the facility does not provide each detainee with a copy of the handbook (**Deficiency SDC-7**<sup>40</sup>). Additionally, the detainee handbook does not state that detainees have the opportunity to submit written questions, requests, or concerns to ICE staff or the procedures for doing so, including the availability of assistance in preparing the request (**SDC-8**<sup>41</sup>). The handbook also does not include DHS OIG hotline information, nor is this information posted in the housing units (**Deficiency SDC-9**<sup>42</sup>).

## TELEPHONE ACCESS (TA)

ODO found that facility staff do not regularly inspect detainee telephones, and do not promptly report out-of-order telephones to the repair service and ensure that required repairs are completed quickly (**Deficiency TA-1**<sup>43</sup>).



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<sup>37</sup> “In IGSA facilities without ICE on-site presence: The detainee requests shall be forwarded to the ICE office of jurisdiction within 72 hours and answered as soon as possible and practicable, but not later than within 72 hours from receiving the request. If it is apparent that the request is serious in nature, procedures shall be in place for an expedited review and response to the detainee’s request.” See ICE NDS 2000, Standard, Staff-Detainee Communication, Section (III)(B)(1)(b).

<sup>38</sup> “All requests shall be recorded in a logbook specifically designed for that purpose. The log, at a minimum, shall contain: ...

e. officer logging the request.

In IGSA’s, the date the request was forwarded to ICE and the date it was returned shall also be recorded.” See ICE NDS 2000, Standard, Staff-Detainee Communication, Section (III)(B)(2)(e).

<sup>39</sup> “All completed Detainee Requests will be filed in the detainee’s detention file and will remain in the detainee’s detention file for at least three years.” See ICE NDS 2000, Standard, Staff-Detainee Communication, Section (III)(B)(2).

<sup>40</sup> “The facility shall provide each detainee, upon admittance, a copy of the detainee handbook or equivalent.” See ICE NDS 2000, Standard, Staff-Detainee Communication, Section (III)(B)(3).

<sup>41</sup> “The handbook shall state that the detainee has the opportunity to submit written questions, requests, or concerns to ICE staff and the procedures for doing so, including the availability of assistance in preparing the request.” See ICE NDS 2000, Standard, Staff-Detainee Communication, Section (III)(B)(3).

<sup>42</sup> “The OIG Hotline information is to be included in the detainee handbooks in each of the aforementioned locations. Each Field Office Director shall ensure that the attached document regarding the OIG Hotline is conspicuously posted in all units housing ICE detainees. This applies to all Service Processing Centers, Contract Detention Facilities, and Inter-Governmental Service Agreement facilities.” See **Change Notice National Detention Standards—Staff-Detainee Communication Standard**, dated June 15, 2007.

<sup>43</sup> “The facility shall maintain detainee telephones in proper working order. Appropriate facility staff shall inspect the telephones regularly (*daily in SPCs/CDFs*), promptly report out-of-order telephones to the repair service and ensure that required repairs are completed quickly.” See ICE NDS 2000, Standard, Telephone Access, Section (III)(D).

[REDACTED] (Deficiency TA-2<sup>44</sup>).

## VISITATION (V)

ODO reviewed the facility's visitation policy and found that the facility limits visitation to 15-30 minutes, rather than to a minimum of 30 minutes (Deficiency V-1<sup>45</sup>).

ODO also found that the visitation policy does not specify Notice of Entry of Appearance as Attorney or Accredited Representative (Form G-28) requirements, identification and search of legal representatives; identification of visitors; materials provided to detainees by legal representatives; confidential group legal meetings, and detainee sign-ups (Deficiency V-2<sup>46</sup>).

ODO found that the facility does not maintain a separate log for legal visitors (Deficiency V-3<sup>47</sup>).

ODO found that, while the facility has established written procedures to allow legal service providers and legal assistants to telephone the facility in advance of a visit to determine whether a particular individual is detained in the facility, the procedures do not specify that the request must be made to the ERO office with jurisdiction over the facility (Deficiency V-4<sup>48</sup>).

ODO found that the facility has not established a written procedure to provide for the exchange of documents between a legal representative and a detainee (Deficiency V-5<sup>49</sup>).

ODO found that the facility has not developed a procedure to address law enforcement officials

<sup>44</sup> [REDACTED]

<sup>45</sup> "The facility's written rules shall specify time limits for visits: 30 minutes minimum, under normal conditions...INS encourages more generous limits when possible, especially for family members traveling significant distances to visit." See ICE NDS 2000, Standard, Visitation, Section (III)(H)(1).

<sup>46</sup> "The facility's written legal visitation policy shall be available upon request. The site-specific policy shall specify visitation hours, procedures and standards, including, but not limited to, telephone inquiries; dress code; legal assistants working under the supervision of an attorney; pre-representational meetings; Form G-28 requirements; identification and search of legal representatives; identification of visitors; materials provided to detainees by legal representatives; confidential group legal meetings; and detainee sign-up." See ICE NDS 2000, Standard, Visitation, Section (III)(I)(16).

<sup>47</sup> "A separate log shall record all legal visitors, including those denied access to the detainee. The log shall include the reason(s) for denying access." See ICE NDS 2000, Standard, Visitation, Section (III)(C).

<sup>48</sup> "Each facility shall establish a written procedure to allow legal service providers and legal assistants to telephone the facility in advance of a visit to determine whether a particular individual is detained in that facility. The request must be made to the on-site INS staff or, where there is no resident staff, to the INS office with jurisdiction over the facility...Once an attorney-client relationship has been established, the legal representative shall complete and submit a Form G-28, available in the legal visitors' reception area. Staff shall collect completed forms and forward them to INS" See ICE NDS 2000, Standard, Visitation, Section (III)(I)(6)(8).

<sup>49</sup> "The facility's written legal visitation procedures must provide for the exchange of documents between detainee and legal representative (or legal assistant) even when contact visitation rooms are unavailable. Documents or other written material provided to a detainee during a visit a legal representative shall be inspected, but not read." See ICE NDS 2000, Standard, Visitation, Section (III)(I)(10).

requesting interviews with detainees (**Deficiency V-6**<sup>50</sup>).

ODO found that the facility has not established a policy or procedures governing whether and, if so, under what circumstances animals may accompany human visitors onto or into facility property (**Deficiency V-7**<sup>51</sup>).

## **SECURITY AND CONTROL**

### **ENVIRONMENTAL HEALTH AND SAFETY (EH&S)**

ODO reviewed the facility's Material Safety Data Sheets (MSDSs) and found that the MSDSs did not include instructions on the safe handling, storage, and disposal of hazardous substances (**Deficiency EH&S-1**<sup>52</sup>).

ODO found that the Maintenance Supervisor or designee has not compiled a master index of all hazardous substances in the facility, nor forwarded a copy to the local fire department (**Deficiency EH&S-2**<sup>53</sup>).

ODO observed spray bottles containing hazardous materials in the laundry and commissary areas that were not properly labeled (**Deficiency EH&S-3**<sup>54</sup>).

ODO found that the facility has not developed a fire prevention, control, and evacuation plan (**Deficiency EH&S-4**<sup>55</sup>); additionally, ODO interviewed the warden and learned that the facility

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<sup>50</sup> "Facility visitation procedures shall cover law enforcement officials requesting interviews with detainees." *See* ICE NDS 2000, Standard, Visitation, Section (III)(O)(1).

<sup>51</sup> "Each facility shall establish and disseminate a policy and implementing procedures governing whether and, if so, under what circumstances animals may accompany human visitors onto or into facility property." *See* ICE NDS 2000, Standard Visitation, Section (III)(O)(4).

<sup>52</sup> "Every area using hazardous substances will maintain a self-contained file of corresponding Material Safety Data Sheets (MSDSs). The MSDSs provide vital information on individual hazardous substances, including instructions on safe handling, storage, and disposal, prohibited interactions, etc. Staff and detainees will have ready and continuous access to the MSDSs for the substances with which they are working while in the work area." *See* ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(B).

<sup>53</sup> "The Maintenance Supervisor or designate will compile a master index of all hazardous substances in the facility, including locations, along with a master file of MSDS's. He/she will maintain this information in the safety office (or equivalent), with a copy to the local fire department. Documentation of the semi-annual reviews will be maintained in the MSDS master file. The master index will also include a comprehensive, up-to-date list of emergency phone numbers (fire department, poison control center, etc.)." *See* ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(C).

<sup>54</sup> "The OIC will individually assign the following responsibilities associated with the labeling procedure: ...

2. Requiring use of properly labeled containers for hazardous materials, including any and all miscellaneous containers into which employees might transfer the material;
3. Teaching staff the meaning of the classification code and the MSDS, including the safe handling procedures for each material; and impressing on staff the need to ensure containers are properly labeled; and
4. Placing correct labels on all smaller containers when only the larger shipping container bears the manufacturer-affixed label."

*See* ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(J)(2-4).

<sup>55</sup> "Every institution will develop a fire prevention, control, and evacuation plan to include, among other things, the following:

- a. Control of ignition sources;
- b. Control of combustible and flammable fuel load sources;

does not conduct and document [REDACTED] fire drills (**Deficiency EH&S-5<sup>56</sup>**).

ODO observed facility exit diagrams that did not provide “You Are Here” markers or emergency equipment locations (**Deficiency EH&S-6<sup>57</sup>**).

### **SPECIAL MANAGEMENT UNIT (ADMINISTRATIVE SEGREGATION) (SMU AS)**

ODO found that the facility does not maintain a permanent SMU log (**Deficiency SMU AS-1<sup>58</sup>**).

ODO reviewed the detention files of six detainees placed in the SMU on AS during the year preceding the inspection and found that a written AS order had not been completed and approved by a supervisory BPCC officer (**Deficiency SMU AS-2<sup>59</sup>**).

ODO found that supervisory officers do not conduct a review, within 72 hours of a detainee’s placement in AS, to determine whether segregation is still warranted (**Deficiency SMU AS-3<sup>60</sup>**).

### **SPECIAL MANAGEMENT UNIT (DISCIPLINARY SEGREGATION) (SMU DS)**

ODO found that the facility does not maintain a permanent SMU log (**Deficiency SMU DS-1<sup>61</sup>**).

ODO reviewed the detention file of one detainee placed in the SMU on DS during the year preceding the inspection and found that a written DS order had not been completed and approved

- c. Provisions for occupant protection from fire and smoke;
- d. Inspection, testing, and maintenance of fire protection equipment, in accordance with NFPA codes, etc.;
- e. [REDACTED] fire inspections;
- f. Installing fire protection equipment throughout the facility, in accordance with *NFPA 10, Standard for Portable Fire Extinguishers*;
- g. Accessibility, current floor plans (buildings and rooms); prominently posted evacuation maps/plans; exit signs and directional arrows for traffic flow; with a copy of each revision filed with the local fire department;
- h. Conspicuously posted exit diagram conspicuously posted for and in each area.”

See ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(L)(3)(a-h).

<sup>56</sup> “[REDACTED] fire drills will be conducted and documented separately in each department.” See ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(L)(4).

<sup>57</sup> “In addition to a general area diagram, the following information must be provided on existing signs: ...

- b. “You Are Here” markers;
- c. Emergency equipment locations.”

See ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(L)(5)(b)(c).

<sup>58</sup> “A permanent log will be maintained in the SMU. The log will record all activities concerning the SMU detainees, e.g., meals served, recreation, visitors, etc. CDFs and IGSA facilities shall use the I-888 or a comparable form for the same purpose.” See ICE NDS 2000, Standard, Special Management Unit (Administrative Segregation), Section (III)(E)(1) and (2).

<sup>59</sup> “A written order shall be completed and approved by a supervisory officer before a detainee is placed in administrative segregation, except when exigent circumstances make this impracticable. In such cases, an order shall be prepared as soon as possible. A copy of the order shall be given to the detainee within 24 hours, unless delivery would jeopardize the safety, security, or orderly operation of the facility.” See ICE NDS 2000, Standard, Special Management Unit (Administrative Segregation), Section (III)(B).

<sup>60</sup> “All facilities shall implement written procedures for the regular review of all administrative detention cases, consistent with the procedures specified below.” See ICE NDS 2000, Standard, Special Management Unit (Administrative Segregation), Section (III)(C).

<sup>61</sup> “A permanent log will be maintained in the SMU. The log will not all activities concerning the SMU detainees, e.g., meals served, recreation, visitors, etc.” See ICE NDS 2000, Standard, Special Management Unit (Disciplinary Segregation), Section (III)(E)(1).

by the chair of the facility's disciplinary committee (**Deficiency SMU DS-2**<sup>62</sup>).

### USE OF FORCE (UOF)

ODO found that the OIC has not designated responsibility for maintaining and testing video cameras and other video equipment (**Deficiency UOF-1**<sup>63</sup>).

ODO reviewed the documentation of three calculated UOF incidents and found that for all three incidents, the facility relied on the video monitoring system and did not videotape the incidents (**Deficiency UOF-2**<sup>64</sup>).

ODO found that the facility had not established written procedures to govern UOF reviews, whether calculated or immediate (**Deficiency UOF-3**<sup>65</sup>).

*Corrective Action:* Prior to the completion of the inspection, the facility established written procedures to govern UOF reviews, which the ERO New Orleans Supervisory Detention and Deportation Officer (SDDO) approved (**C-2**).

ODO found that the facility used [REDACTED],<sup>66</sup> which had not been approved by ERO (Deficiency UOF-4<sup>67</sup>).

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<sup>62</sup> "A written order shall be completed and signed by the chair of the Institutional Disciplinary Committee panel before a detainee is placed in disciplinary segregation. A copy of the order shall be given to the detainee within 24 hours, unless delivery would jeopardize safety, security, or the orderly operation of the facility." See ICE NDS 2000, Standard, Special Management Unit (Disciplinary Segregation), Section (III)(B).

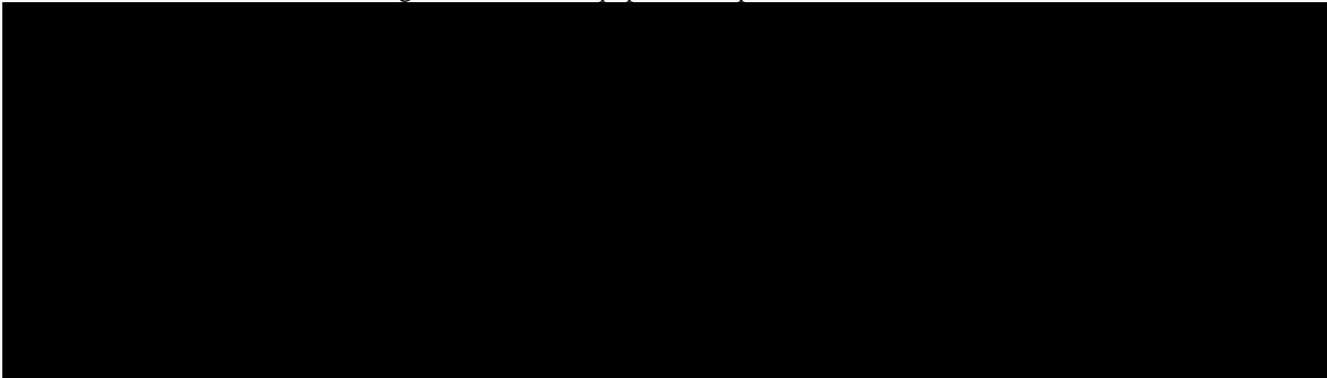
<sup>63</sup> "The OIC shall designate responsibility for maintaining the video camera(s) and other video equipment. This shall include regularly scheduled testing to ensure all parts, including batteries, are in working order; and keeping back-up supplies on hand (batteries, tapes, lens-cleaners, etc.). This responsibility shall be incorporated into one or more post orders." See ICE NDS 2000, Standard, Use of Force, Section (III)(A)(4)(I).

<sup>64</sup> "Staff shall immediately obtain and record with a video camera any use-of-force incident, unless such a delay in bringing the situation under control would constitute a serious hazard to the detainee a serious hazard to the detainee, staff, or others, or would result in a major disturbance or serious property damage. Calculated use of force shall be videotaped in accordance with section III.A.4...." See ICE NDS 2000, Standard, Use of Force, Section (III)(J)(3).

<sup>65</sup> "Written procedures shall govern the use-of-force incident review, whether calculated or immediate, and the application of restraints. The review is to assess the reasonableness of the actions taken (force proportional to the detainee's actions), etc. IGSA will pattern their incident review process after INS. INS shall review and approve all After Action Review procedures." See ICE NDS 2000, Standard, Use of Force, Section (III)(K).

<sup>66</sup> An elongated elastic body-restraining device.

<sup>67</sup> "Deviations from the following list of restraint equipment are prohibited:



*Corrective Action:* Prior to the completion of the inspection, the facility removed the prohibited [REDACTED] and provided them to the Bossier Parish Sheriff's Training Academy (C-3).

## **HEALTH SERVICES**

### **MEDICAL CARE (MC)**

ODO reviewed the facility's medical staffing plan, which consists of [REDACTED] full-time registered nurses (RNs)—including the Health Service Administrator (HSA), [REDACTED] licensed practical nurse (LPN), [REDACTED] medical records technician, a part-time psychologist, and a part-time paramedic services contract, and determined that the staffing plan is not large enough to provide or perform basic care and treatment for all detainees (**Deficiency MC-1<sup>68</sup>**).

ODO reviewed 30 medical records and interviewed the HSA and learned that the facility does not conduct a health appraisal and physical examination on each detainee within 14 days of arrival at the facility (**Deficiency MC-2<sup>69</sup>**).

ODO also learned that, since there is no on-site dentist, the RNs and LPN conduct the initial dental screening on each detainee within 14 days of arrival at the facility (**Deficiency MC-3<sup>70</sup>**).

ODO notes as an **Area of Concern** that the facility does not have a system in place to monitor and provide treatment to detainees with chronic conditions.

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<sup>68</sup> "Every facility will provide its detainee population with initial medical screening, cost-effective primary medical care, and emergency care. The OIC will also arrange for specialized health care, mental health care, and hospitalization within the local community. All facilities will employ, at a minimum, a medical staff large enough to perform basic exams and treatments for all detainees." See ICE NDS 2000, Standard, Medical Care, Section (III)(A).

<sup>69</sup> "The health care provider of each facility will conduct a health appraisal and physical examination on each detainee within 14 days of arrival at the facility." See ICE NDS 2000, Standard, Medical Care, Section (III)(D).

<sup>70</sup> "An initial dental screening exam should be performed within 14 days of the detainee's arrival. If no on-site dentist is available, the initial dental screening may be performed by a physician, physician's assistant or nurse practitioner." See ICE NDS 2000, Standard, Medical Care, Section (III)(E).

## CONCLUSION

During this inspection, ODO assessed the facility's compliance with 17 standards under NDS 2000 and found the facility in compliance with only one of those standards. ODO found 63 deficiencies in the remaining 16 standards. ODO notes there were three instances in which staff initiated immediate corrective action.

ODO noted 13 deficiencies in the *Food Service* standard. Of concern, the facility has not employed a cook supervisor to assist in the oversight of food service operations. The absence of this position impacts the training of food service personnel, kitchen cleanliness and hygiene, and compliance with religious diet requests.

Additionally, ODO noted nine deficiencies in the *Staff-Detainee Communication* Standard. Of concern, ERO staff were not familiar with the procedures necessary to facilitate formal and informal contact with detainees. The absence of on-site ERO staff further exasperates the issue and does not provide detainees with regular access to ERO staff. Frequent interaction with detainees is necessary to help address questions concerning the immigration removal process and to assess the living and working conditions at the facility.

ODO recommends ERO work with the facility to remedy any outstanding deficiencies, as applicable and in accordance with contractual obligations.

<b>Compliance Inspection Results Compared</b>	<b>FY 2020 (NDS 2000)</b>
Standards Reviewed	17
Deficient Standards	16
Overall Number of Deficiencies	63
Deficient Priority Components	0
Repeat Deficiencies	N/A
Corrective Actions	3