



**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  
Compliance Inspection**

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

**Central Louisiana ICE Processing Center  
Jena, Louisiana**

**January 10-12, 2023**

**COMPLIANCE INSPECTION**  
**of the**  
**CENTRAL LOUISIANA ICE PROCESSING CENTER**  
Jena, Louisiana

**TABLE OF CONTENTS**

<b>FACILITY OVERVIEW .....</b>	<b>4</b>
<b>COMPLIANCE INSPECTION PROCESS .....</b>	<b>5</b>
<b>FINDINGS BY PERFORMANCE-BASED NATIONAL DETENTION STANDARDS 2011 (REVISED 2016) MAJOR CATEGORIES.....</b>	<b>6</b>
<b>DETAINEE RELATIONS .....</b>	<b>7</b>
<b>COMPLIANCE INSPECTION FINDINGS .....</b>	<b>8</b>
<b>CARE .....</b>	<b>8</b>
<b>FOOD SERVICE .....</b>	<b>8</b>
<b>CONCLUSION .....</b>	<b>8</b>

## COMPLIANCE INSPECTION TEAM MEMBERS



Team Lead	ODO
Inspections and Compliance Specialist	ODO
Inspections and Compliance Specialist	ODO
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 Central Louisiana ICE Processing Center<sup>1</sup> (CLIPC) in Jena, Louisiana, from January 10 to 12, 2023.<sup>2</sup> The facility opened in 2007 and is owned and operated by The GEO Group, Inc. (GEO). The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at CLIPC in 2007 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).

ERO has deportation officers and a detention service manager assigned to the facility. A facility administrator handles daily facility operations and manages █████ support personnel. GEO provides food services, STG International provides medical care, and Keefe Commissary provides commissary services at the facility. The facility was accredited by the American Correctional Association in January 2018. In November 2017, CLIPC 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 <sup>3</sup>	█████
Average ICE Population <sup>4</sup>	█████
Adult Male Population (as of January 10, 2023)	█████
Adult Female Population (as of January 10, 2023)	█████

During its last inspection, in Fiscal Year (FY) 2022, ODO found six deficiencies in the following areas: Facility Security and Control (2); Funds and Personal Property (1); Hunger Strikes (1); Significant Self-harm and Suicide Prevention and Intervention (1); and Staff-Detainee Communication (1).

<sup>1</sup> Pursuant to a contract modification dated October 19, 2022, The LaSalle Detention Center, also known as the LaSalle ICE Processing Center (Jena), changed its name to the Central Louisiana ICE Processing Center.

<sup>2</sup> This facility holds male and female detainees with low, medium-low, medium-high, and high security classification levels for periods greater than 72 hours.

<sup>3</sup> Data Source: ERO Facility List as of December 27, 2022.

<sup>4</sup> *Ibid.*

## COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population greater than 10, and where detainees are housed for over 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>5</sup>

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.

---

<sup>5</sup> ODO reviews the facility’s compliance with selected standards in their entirety.

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

PBNDs 2011 (Revised 2016) Standards Inspected <sup>6,7</sup>	Deficiencies
<b>Part 1 - Safety</b>	
Emergency Plans	0
Environmental Health and Safety	0
Transportation (by Land)	0
<b>Sub-Total</b>	<b>0</b>
<b>Part 2 - Security</b>	
Admission and Release	0
Custody Classification System	0
Contraband	0
Funds and Personal Property	0
Hold Rooms in Detention Facilities	0
Key and Lock Control	0
Sexual Abuse and Assault Prevention and Intervention	0
Special Management Units	0
Tool Control	0
Use of Force and Restraints	0
<b>Sub-Total</b>	<b>0</b>
<b>Part 3 - Order</b>	
Disciplinary System	0
<b>Sub-Total</b>	<b>0</b>
<b>Part 4 - Care</b>	
Food Service	2
Medical Care	0
Medical Care (Women)	0
Significant Self-harm and Suicide Prevention and Intervention	0
Terminal Illness, Advance Directives and Death	0
Disability Identification, Assessment, and Accommodation	0
<b>Sub-Total</b>	<b>2</b>
<b>Part 5 - Activities</b>	
Correspondence and Other Mail	0
Recreation	0

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

<sup>7</sup> 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.

Visitation	0
<b>Sub-Total</b>	<b>0</b>
<b>Part 6 - Justice</b>	
Detainee Handbook	0
<b>Sub-Total</b>	<b>0</b>
<b>Part 7 - Administration and Management</b>	
Staff Training	0
<b>Sub-Total</b>	<b>0</b>
<b>Total Deficiencies</b>	<b>2</b>

## DETAINEE RELATIONS

ODO interviewed 24 detainees, who each voluntarily agreed to participate. One detainee made an allegation of detainee-on-detainee sexual abuse, which is detailed below. Most detainees reported satisfaction with facility services except for the concerns listed below.

*Medical Care:* One detainee stated he submitted a medical request for bleeding gums in December 2022 and medical staff said he would have to wait a year for a dental cleaning.

- Action Taken: ODO interviewed the CLIPC health services administrator, reviewed the detainee’s medical record, and confirmed there was no documented record of the detainee reporting bleeding gums after arriving at the facility on July 20, 2022. On November 28, 2022, an CLIPC dentist examined the detainee, advised him to rinse his mouth with saline water, and scheduled him for a dental cleaning on June 21, 2023. On January 12, 2023, medical staff called on the detainee for a dental appointment, but the detainee refused. The dentist also went so far as to go the housing unit to speak with the detainee, but the detainee refused to speak with her. The dentist documented the detainee refused treatment and refused to sign the refusal form in the detainee’s medical file.

*Sexual Abuse and Assault Prevention and Intervention:* One transgender female detainee stated another detainee sexually assaulted her on or about September 15, 2022.

- Action Taken: ODO interviewed the CLIPC facility administrator, reviewed the CLIPC Sexual Abuse and Assault Prevention and Intervention (SAAPI) report, and confirmed the detainee reported the alleged incident to CLIPC staff on September 15, 2022. Additionally, the facility reported the incident to ERO New Orleans and to the Joint Intak Center the same day, and placed the alleged suspect in administrative segregation pending an investigation. ODO found the detainee had already been on protective custody since August 9, 2022, at her request. CLIPC staff escorted the detainee to the facility’s medical department for a mental health assessment and initiated an internal investigation. Afterward, the facility returned the detainee to protective custody. The facility investigator found the SAAPI incident to be unsubstantiated. CLIPC staff re-interviewed the detainee on January 11, 2023,

transferred her to another housing unit, and continued to keep her in protective custody as per her request.

*Staff-Detainee Communication:* Two detainees requested to speak with ERO New Orleans staff in reference to their cases.

- Action Taken: ODO interviewed the ERO New Orleans assistant field office director and reviewed the ERO detainee request log. One detainee had not submitted a detainee request to ERO New Orleans. On January 10, 2023, ERO New Orleans staff educated the detainee on how to submit a detainee request and then provided information about his case. ODO confirmed ERO New Orleans received 14 requests from the other detainee and responded to all of them within 3 days of receipt. On January 13, 2023, ERO New Orleans staff spoke with the detainee and provided him information about his case.

## COMPLIANCE INSPECTION FINDINGS

### CARE

#### FOOD SERVICE (FS)

ODO inspected dishwasher in the kitchen and found an inoperable pressure gauge in the water line, which prevented the dishwasher from maintaining a final rinse water pressure between 15 and 25 pounds per square inch (**Deficiency FS-365<sup>8</sup>**).

ODO inspected the food grinder in the kitchen and found the device was not equipped with an anti-restart device (**Deficiency FS-402<sup>9</sup>**).

### CONCLUSION

During this inspection, ODO assessed the facility's compliance with 25 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 24 of those standards. ODO found two deficiencies in the remaining standard. Since CLIPC's last full inspection in January 2022, the facility has shown steady improvement. CLIPC went from 7 deficient standards and 14 deficiencies in January 2022 to 1 deficient standard and 2 deficiencies during this most recent inspection. However, the standard ODO found deficient was the food service standard, which CLIPC did not have deficiencies in last year. The facility's improved performance was a result of

---

<sup>8</sup> "The pressure of the final rinse water must be between 15 and 25 pounds per square inch (psi) in the water line immediately adjacent to the final-rinse control valve." See ICE PBNDS 2011 (Revised 2016), Standard, Food Service, Section (V)(J)(7)(g)(1).

<sup>9</sup> "General Safety Guidelines: ...

c. Machines shall be guarded in compliance with OSHA standards: 4) Meat saws, slicers and grinders shall be equipped with anti-restart devices."

See ICE PBNDS 2011 (Revised 2016), Standard, Food Service, Section (V)(J)(12)(c)(4).



completing a uniform corrective action plan for ODO’s last inspection of CLIPC in July 2022. ODO recommends ERO continue to work with the facility to resolve the remaining deficiencies in accordance with contractual obligations.

<b>Compliance Inspection Results Compared</b>	<b>FY 2022 Full Inspection (PBNS 2011) (Revised 2016)</b>	<b>FY 2023 Full Inspection (PBNS 2011) (Revised 2016)</b>
Standards Reviewed	24	25
Deficient Standards	7	1
Overall Number of Deficiencies	14	2
Priority Component Deficiencies	N/A	0
Repeat Deficiencies	0	0
Areas Of Concern	0	0
Corrective Actions	5	0
Facility Rating	Superior	Superior