

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

# Office of Detention Oversight Follow-Up Compliance Inspection

# Enforcement and Removal Operations ERO Washington Field Office

# Immigration Centers of America (Farmville) Farmville, Virginia

August 16-19, 2021

### FOLLOW-UP COMPLIANCE INSPECTION of the IMMIGRATION CENTERS OF AMERICA (FARMVILLE) Farmville, Virginia

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## FOLLOW-UP COMPLIANCE INSPECTION TEAM MEMBERS



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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 follow-up inspection of the Immigration Centers of America (Farmville) (ICAF) in Farmville, Virginia, from August 16 to 20, 2021.<sup>1</sup> This inspection focused on the standards found deficient during ODO's last inspection of ICAF from January 4 to 7, 2021. The facility opened in 2010 and is owned and operated by Immigration Centers of America. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at ICAF 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 a detention services manager and deportation officers assigned to the facility. A director of detention handles daily facility operations and manages support personnel. Trinity Services Group provides food services, Armor Correctional Health Care 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 December 2016 and the American Correctional Association in August 2018. In January 2021, ICAF 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>2</sup>	
Average ICE Population <sup>3</sup>	
Adult Male Population (as of August 16, 2021)	
Adult Female Population (as of August 16, 2021)	

During its last inspection, in March 2021, ODO found 12 deficiencies in the following areas: Admission and Release (2); Facility Security and Control (1); Funds and Personal Property (1); Use of Force and Restraints (2); Medical Care (1); Religious Practices (2); Telephone Access (1); and Grievance System (2)

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

<sup>&</sup>lt;sup>2</sup> Data Source: ERO Facility List as of August 16, 2021.

<sup>&</sup>lt;sup>3</sup> Ibid.

# FOLLOW-UP COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population of 10 or more detainees, 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. In FY 2021, to meet congressional requirements, ODO began conducting follow-up inspections at all ICE ERO detention facilities, which ODO inspected earlier in the FY.

While follow-up inspections are intended to focus on previously identified deficiencies, ODO will conduct a complete review of several core standards, which include but are not limited to Medical Care, Hunger Strikes, Suicide Prevention, Food Service, Environmental Health and Safety, Emergency Plans, Use of Force and Restraints/Use of Physical Control Measures and Restraints, Admission and Release, Classification, and Funds and Personal Property. ODO may decide to conduct a second full inspection of a facility in the same FY based on additional information obtained prior to ODO's arrival on-site. Factors ODO will consider when deciding to conduct a second full inspection will include the total number of deficiencies cited during the first inspection, the number of deficient standards found during the first inspection, the completion status of the first inspection's UCAP, and other information ODO obtains from internal and external sources ahead of the follow-up compliance inspection. Conditions found during the inspection may also lead ODO to assess new areas and identify new deficiencies or areas of concern should facility practices run contrary to ICE standards. Any areas found non-compliant during both inspections are annotated as "Repeat Deficiencies" in this report.

ODO was unable to conduct an on-site inspection of this facility, as a result of the COVID-19 pandemic, and instead, conducted a remote inspection of the facility. During this remote inspection, ODO interviewed facility staff, ERO field office staff, and detainees, reviewed files and detention records, and was able to assess compliance for at least 90 percent or more of the ICE national detention standards reviewed during the inspection.

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

PBNDS 2011 Standards Inspected <sup>4</sup>	Deficiencies
Part 1 - Safety	•
Emergency Plans	0
Environmental Health and Safety	0
Sub-Total	0
Part 2 - Security	
Admission and Release	0
Special Management Units	0
Use of Force and Restraints	0
Custody Classification System	0
Facility Security and Control	0
Funds and Personal Property	2
Sub-Total	2
Part 4 - Care	
Food Service	0
Hunger Strikes	0
Medical Care	0
Significant Self-harm and Suicide Prevention and Intervention	0
Sub-Total	0
Part 6 - Justice	
Grievance System	0
Sub-Total	0
Total Deficiencies	2

<sup>&</sup>lt;sup>4</sup> For greater detail on ODO's findings, see the *Follow-up Inspection Findings* section of this report.

# **DETAINEE RELATIONS**

ODO interviewed four detainees, who each voluntarily agreed to participate. The remaining eight detainees declined ODO's offer for an interview. None of the detainees made allegations of discrimination, mistreatment, or abuse. Most detainees reported satisfaction with facility services except for the concerns listed below. ODO attempted to conduct detainee interviews via video teleconference; however, the ERO field office and facility were not able to accommodate this request due to technology issues. As such, the detainee interviews were conducted via telephone.

*Admission and Release:* Three detainees stated they did not receive an ICE National Detainee Handbook when they arrived at the facility.

• <u>Action Taken</u>: ODO interviewed facility staff, reviewed the facility's admission and release policy, and determined the facility has procedures in place to ensure detainees are issued both the ICE National Detainee Handbook and a facility detainee handbook during the admissions orientation process. The facility provided copies of the detainees' property issue sheets, which indicated they received an ICE National Detainee Handbook during their admission to the facility. On August 17, 2021, the facility advised ODO they re-issued all three detainees an ICE National Detainee Handbook.

*Food Service:* One detainee stated his concern regarding the rotten food and small portions served at the facility.

• <u>Action Taken</u>: ODO interviewed the food service manager and reviewed the facility's food service policy and procedures. ODO confirmed the facility's procedures to check the quality and quantity of food served to the detainees. These procedures also indicate stock rotation (First-in/First-out) to ensure the use of the freshest stock available and daily food inspections by the staff. The food service manager stated the food service department adheres to a nutritionist-approved menu that includes the quantities per servings for each meal. ODO reviewed the facility's menus showing signature approval by a nutritionist. ODO was not on-site for this inspection and therefore unable to sample the food served.

*Law Libraries and Legal Materials:* One detainee stated the facility is not consistent in announcing when the library is opened and weeks may pass before gaining access to legal materials.

• <u>Action Taken</u>: ODO interviewed the law library staff, reviewed the facility's law library policy, and determined the facility has equipped each dorm with a computer that has the Lexus Nexus law library software. The facility confirmed that the law library is closed to detainees at this time due to COVID-19 and no library schedule is posted. However, the facility permits all detainees to use the law library computer in the housing units at any time before lights-out. The law library officer responds to requests for law library information and provides copies. On August 17, 2021, the facility staff

spoke with the detainee to assist the detainee with accessing legal materials.

### FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

#### **SECURITY**

#### FUNDS AND PERSONAL PROPERTY (FPP)

ODO reviewed the facility's FPP policy and the facility handbook, interviewed the FPP supervisor, and found the facility handbook does not inform detainees that upon request, the facility and/or ERO Washington will provide them with an ICE/ERO-certified copy of their requested identity document(s) (e.g., passport, birth certificate), from their non-resident file (**Deficiency FPP-16**<sup>5</sup>).

ODO reviewed the facility's FPP policy, copies of the facility's fund log, interviewed the FPP supervisor, and found both the on-coming and the off-going supervisors do not simultaneously conduct an audit of detainee funds, property envelopes and large valuables where physical custody of, or access to such items occurs with facility shift changes (**Deficiency FPP-100**<sup>6</sup>).

## CONCLUSION

During this inspection, ODO assessed the facility's compliance with 13 standards under PBNDS 2011 (2013 Errata) and found the facility in compliance with 12 of those standards. ODO found two deficiencies in the remaining standard. ODO commends facility staff members for their responsiveness during this inspection. ODO recommends ERO Washington work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations. ODO received the uniform corrective action plan for ODO's last inspection of ICAF on May 10, 2021.

Compliance Inspection Results Compared	FY 2021 (PBNDS 2011)	FY 2021 (PBNDS 2011) Errata 2013
Standards Reviewed	20	13
Deficient Standards	8	1
Overall Number of Deficiencies	12	2
Repeat Deficiencies	0	0
Areas Of Concern	0	0
Corrective Actions	2	0

<sup>&</sup>lt;sup>5</sup> "The detainee handbook or equivalent shall notify the detainees of facility policies and procedures related to personal property, including: ...

that, upon request, they shall be provided an ICE/ERO-certified copy of any identity document (e.g., passport, birth certificate), which shall then be placed in their A-files." See ICE PBNDS 2011 (2013 Errata), Standard, Funds and Personal Property, Section (V)(C)(2).

<sup>&</sup>lt;sup>6</sup> "Both on-coming and off-going supervisors shall simultaneously conduct an audit of detainee funds, property envelopes and large valuables where physical custody of, or access to such items changes with facility shift changes." *See* ICE PBNDS 2011 (2013 Errata), Standard, Funds and Personal Property, Section (V)(J).