



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
Unannounced Compliance Inspection
2024-004-281**

**Enforcement and Removal Operations
ERO Atlanta Field Office**

**Folkston ICE Processing Center
Folkston, Georgia**

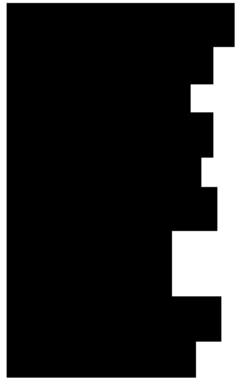
January 30-February 1, 2024

UNANNOUNCED COMPLIANCE INSPECTION
of the
FOLKSTON ICE PROCESSING CENTER
Folkston, Georgia

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COMPLIANCE INSPECTION TEAM MEMBERS



Acting Team Lead	ODO
Senior Inspections and Compliance Specialist	ODO
Senior Inspections and Compliance Specialist	ODO
Senior Inspections and Compliance Specialist	ODO
Inspections and Compliance Specialist	ODO
Contractor	Creative Corrections
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 an unannounced compliance inspection of the Folkston ICE Processing Center (FIPC) in Folkston, Georgia, from January 30 to February 1, 2024.¹ The facility opened in 2017 and is owned and operated by The GEO Group, Inc. (GEO). The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at FIPC in 2017 under the oversight of ERO’s Field Office Director in Atlanta (ERO Atlanta). The facility operates under the Performance-Based National Detention Standards (PBNDS) 2011 (Revised 2016).

[REDACTED]

[REDACTED] A facility administrator handles daily operations and manages [REDACTED] support personnel. GEO provides food service and medical care, and Keefe Commissary provides commissary services at the facility. ICE Health Service Corp (IHSC) provides medical care for the FIPC Annex. The facility was accredited by the National Commission on Correctional Health Care in October 2021 and American Correctional Association in January 2022. In April 2022, FIPC 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 January 30, 2024)	[REDACTED]
Adult Female Population (as of January 30, 2024)	[REDACTED]

During its last full inspection, in Fiscal Year (FY) 2023, ODO found 6 deficiencies in the following areas: Disability Identification, Assessment, and Accommodation (1); Food Service (2); Key and Lock Control (1); and Staff-Detainee Communication (2).

¹ This facility holds male 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 January 29, 2024.

³ *Ibid.*

UNANNOUNCED COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population (ADP) 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.

In FY 2022, ODO began conducting special reviews of under 72-hour ICE detention facilities with an ADP of 1 or more detainees and over 72-hour ICE detention facilities with an ADP of 1 to 9 detainees. Additionally, ODO began conducting unannounced inspections of ICE detention facilities, regardless of ADP of detainees, as well as reviews of ICE special/emerging detention facilities/programs. As such, these facility inspections will result in an ODO Inspection Compliance Rating; however, for facilities that are not contractually obligated to an ICE NDS, those ratings will be for ERO’s informational purposes. ODO will conduct a complete review of several core standards, in accordance with the facility’s contractually required ICE NDS or in accordance with the ICE NDS listed in the current ERO Custody Management Division Authorized Facility List for facilities that are not contractually obligated to an ICE NDS, which may include but are not limited to Medical Care/Health Care, Medical Care (Women)/Health Care (Females), Significant Self-harm and Suicide Prevention and Intervention, Hunger Strikes, Food Service, Environmental Health and Safety, Special Management Units (SMU) or Hold Rooms (if the facility does not have an SMU), Use of Force and Restraints/Use of Physical Control Measures, and Sexual Abuse and Assault Prevention and Intervention.

Upon completion of each special review or unannounced 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 uniform corrective action plans (UCAPs); 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 PERFORMANCE-BASED NATIONAL DETENTION STANDARDS 2011 (REVISED 2016) MAJOR CATEGORIES

PBNDs 2011 (Revised 2016) Standards Inspected ^{5,6,7}	Deficiencies
Part 1 - Safety	
Emergency Plans	0
Environmental Health and Safety	0
Sub-Total	0
Part 2 - Security	
Admission and Release	0
Custody Classification System	0
Facility Security and Control	0
Funds and Personal Property	0
Population Counts	0
Post Orders	0
Searches of Detainees	0
Sexual Abuse and Assault Prevention and Intervention	0
Special Management Units	0
Staff-Detainee Communication	1
Use of Force and Restraints	0
Sub-Total	1
Part 4 - Care	
Food Service	0
Hunger Strikes	0
Medical Care	0
Personal Hygiene	0
Significant Self-harm and Suicide Prevention and Intervention	0
Sub-Total	0
Part 5 - Activities	
Correspondence and Other Mail	0
Trips for Non-Medical Emergencies	0
Marriage Requests	0
Religious Practices	0
Telephone Access	0
Voluntary Work Program	0

⁵ For greater detail on ODO’s findings, see the *Unannounced 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 standards may not be present in all inspections.

⁷ During an unannounced inspection, ODO will review a facility’s compliance with at least 10 individual standards; however, unannounced full inspections will include a review of the same standards as announced full inspections.

Sub-Total	0
Part 6 - Justice	
Grievance System	0
Law Libraries and Legal Material	0
Sub-Total	0
Part 7 - Administration and Management	
Detention Files	0
Detainee Transfers	0
Sub-Total	0
Total Deficiencies	1

DETAINEE RELATIONS

ODO interviewed 35 detainees, who each voluntarily agreed to participate. One detainee made an allegation of sexual harassment, and ODO immediately referred the complaint to ERO Atlanta and facility staff. Most detainees reported satisfaction with facility services except for the concern listed below.

Sexual Abuse and Assault Prevention and Intervention: One transgender detainee alleged several detainees sexually harassed her.

- Action Taken:** During the ODO interview on January 30, 2024, a transgender detainee stated she was a victim of sexual harassment by four other detainees. The detainee alleged the four detainees touched her inappropriately. The detainee informed ODO she reported the incident to facility staff after the transfer of all four detainees from the facility. On the same day, ODO notified the FIPC administrator and ERO Atlanta staff of the allegation and confirmed the detainee previously reported the incident. ODO verified ERO Atlanta subsequently reported the allegation to the ICE Joint Intake Center (Case # 2024SIR0004733). ODO interviewed the FIPC PREA coordinator who stated FIPC staff immediately initiated Sexual Abuse and Assault Prevention and Intervention (SAAPI) protocols, offered the detainee the ICE SAAPI pamphlet, performed a medical and mental evaluation, and notified the Charlton County Sheriff's Department. Facility staff offered the detainee victim services and ensured she knew how to complete and submit a medical request form for future mental health services as needed. Additionally, the FIPC PREA coordinator informed ODO of the investigation's ongoing status and confirmed the detainee's satisfaction with personal safety at the facility since the departure of the four detainees.

UNANNOUNCED COMPLIANCE INSPECTION FINDINGS

SECURITY

STAFF-DETAINEE COMMUNICATION (SDC)

ODO interviewed an ERO Atlanta SDDO, reviewed [REDACTED] electronic detainee requests, and found in [REDACTED] out of [REDACTED] requests, Atlanta ERO staff did not respond within 3 business days of receipt of the electronic request (**Deficiency SDC-16**⁸). **This is a repeat deficiency.**

CONCLUSION

During this unannounced compliance inspection, ODO assessed the facility's compliance with 28 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 27 of those standards. ODO found one deficiency in the remaining standard. Since FIPC's last full inspection in January 2023, the facility has trended upward. FIPC went from 4 deficient standards and 6 deficiencies in January 2023 to 1 deficient standard and 1 deficiency during this most recent full inspection, which includes a repeat deficiency. ODO received the facility's completed UCAP for its last full inspection in June 2023 full inspection. The facility's improved performance likely resulted from the staff's completion of UCAPs for ODO's last 2 inspections; however, the actions taken did not prevent a repeat deficiency in the SDC standard from the first full inspection in January 2023. ODO recommends ERO Atlanta continue to work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations.

Compliance Inspection Results Compared	FY 2023 Full Inspection (PBNDS 2011) (Revised 2016)	FY 2024 Full Inspection (PBNDS 2011) (Revised 2016)
Standards Reviewed	25	28
Deficient Standards	4	1
Overall Number of Deficiencies	6	1
Priority Component Deficiencies	0	0
Repeat Deficiencies	1	1
Areas Of Concern	0	0
Corrective Actions	0	0
Facility Rating	Acceptable/Adequate	Good ⁹

⁸ "In Facilities with ICE/ERO Onsite Presence; The ICE/ERO staff member receiving the request shall normally respond in person or in writing as soon as possible and practicable, but no later than within three (3) business days of receipt." See ICE PBNDS 2011 "Revised 2016", Standard, Staff-Detainee Communication, Section (V)(B)(1)(a).

⁹ ODO revised its rating systems at the end of FY 2023, and beginning in FY 2024, facilities rated as "Superior" will have no or very minimal deficiencies and will have no repeat or priority component deficiencies.