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U.S. 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 New Orleans Field Office

Jackson Parish Correctional Center Jonesboro, Louisiana

April 26-30, 2021

FOLLOW-UP COMPLIANCE INSPECTION of the JACKSON PARISH CORRECTIONAL CENTER

Jonesboro, Louisiana

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FOLLOW-UP COMPLIANCE INSPECTION TEAM MEMBERS



Acting Team Lead Assistant Team Lead Contractor Contractor Contractor Contractor ODO ODO Creative Corrections Creative Corrections Creative Corrections

FACILITY OVERVIEW

The U.S. Immigration and Customs Enforcement (ICE) Office of Professional Responsibility Office of Detention Oversight (ODO) conducted a follow-up compliance inspection of the Jackson Parish Correctional Center (JPCC) in Jonesboro, Louisiana, from April 26 to 30, 2021. This inspection focused on the standards found deficient during ODO's last inspection of JPCC from November 30 to December 3, 2020. The facility opened in 2007 and is owned and operated by LaSalle Management. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at JPCC in 2019 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 (Errata 2013).

ERO has assigned deportation officers and a detention services manager to the facility. A JPCC warden handles daily facility operations and manages personnel. JPCC provides food services, LaSalle Management provides medical care, and Correct Commissary provides commissary services at the facility. The facility does not hold any national accreditations from any outside entities.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity ²	1034
Average ICE Detainee Population ³	
Male Detainee Population (as of April 26, 2021)	
Female Detainee Population (as of April 26, 2021)	

During its last inspection, in November 2020, ODO found four deficiencies in the following areas: Funds and Property (2); Medical Care (1); and Significant Self-Harm and Suicide Prevention and Intervention (1).

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

² Data Source: ERO Facility List Report as of April 26, 2021.

³ 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 2011 (ERRATA 2013) MAJOR CATEGORIES

PBNDS 2011 (Errata 2013) Standards Inspected ⁴	Deficiencies	
Part 1 – Safety		
Emergency Plans	0	
Environmental Health and Safety	0	
Sub-Total	0	
Part 2 – Security		
Admission and Release	2	
Custody Classification System	0	
Funds and Personal Property	1	
Special Management Units	2	
Use of Force and Restraints	0	
Sub-Total	5	
Part 4 – Care		
Food Service	0	
Hunger Strikes	0	
Medical Care	0	
Medical Care Women	0	
Significant Self-Harm and Suicide Prevention and Intervention	0	
Sub-Total	0	
Total Deficiencies	5	

⁴ For greater detail on ODO's findings, see the Follow-Up Compliance Inspection Findings section of this report.

DETAINEE RELATIONS

ODO interviewed 12 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, nor abuse. Most detainees reported satisfaction with facility services except for the concerns listed below. ODO conducted detainee interviews via video teleconference.

Environmental Health and Safety: Three detainees stated several bunks within the housing units are rusted and unsafe for use.

Action Taken: ODO interviewed the supervisory detention and deportation officer (SDDO) assigned to the facility, who said the warden knew of the concern and ordered the materials for corrective action. On May 12, 2021, ODO followed up with the SDDO, who said rust removal and painting had been completed in housing units B and C. The SDDO also stated that work continues for the remaining housing units and he would inform ODO of project completion.

Staff-Detainee Communication: Four detainees stated they have limited or no contact with ERO New Orleans officers assigned to the facility.

• <u>Action Taken</u>: ODO interviewed the SDDO, reviewed facility logs, and found assigned ERO New Orleans officers conduct liaison visits on Mondays and Thursdays to discuss case issues and other concerns with each detainee.

Staff-Detainee Communication: One detainee stated she does not know how to report sexual assault or abuse, nor is the information available in Spanish.

• <u>Action Taken</u>: ODO interviewed the SDDO, who said the detainee received a Spanish version of the facility detainee handbook and instruction on locating throughout the facility multilingual postings to report sexual assault. Additionally, ODO verified the facility orientation video included detainee sexual assault reporting procedures.

FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

SECURITY

ADMISSION AND RELEASE (AR)

ODO reviewed the facility AR program and found ERO New Orleans has not approved the facility's orientation process (**Deficiency AR-61**⁵).

ODO reviewed the facility AR procedures and found ERO New Orleans has not approved the

⁵ "All facilities shall have a method to provide ICE/ERO detainees an orientation to the facility as soon as practicable, in a language or manner that detainees can understand. Orientation procedures in CDFs and IGSAs must be approved in advance by the local ICE/ERO Field Office." *See* ICE PBNDS 2011 (ERRATA 2013), Standard, Admission and Release, Section (V)(B)(8)(F).

facility's release procedures (Deficiency AR-796).

FUNDS AND PERSONAL PROPERTY (FPP)

ODO reviewed the facility detainee handbook and found no procedure informing detainees how to claim property upon their release, transfer, or removal (**Deficiency FPP-18**⁷).

SPECIAL MANAGEMENT UNITS (SMU)

ODO reviewed 12 detainee files and found the facility did not provide the detainee with a copy of their disciplinary segregation (DS) order in 2 out of 12 detainee files (**Deficiency SMU-66**8).

ODO reviewed 12 detainee files and found 2 out of 12 detainee files did not document the date nor time the facility released the detainees from DS (**Deficiency SMU-71**⁹).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 12 standards under PBNDS 2011 (Errata 2013) and found the facility in compliance with 9 of those standards. ODO found five deficiencies in the remaining three standards. ODO commends facility staff for its responsiveness during this inspection. ODO recommends ERO work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations.

Compliance Inspection Results Compared	First FY 2021 (PBNDS 2011) (Revised 2016)	Second FY 2021 (PBNDS 2011) (Errata 2013)
Standards Reviewed	21	12
Deficient Standards	3	3
Overall Number of Deficiencies	4	5
Repeat Deficiencies	1	0
Areas of Concern	0	0
Corrective Actions	0	0

⁶ "ICE/ERO shall approve all facility release procedures." See ICE PBNDS 2011 (ERRATA 2013), Standard, Admission and Release, Section (V)(B)(8)(H).

⁷ "The procedure for claiming property upon release, transfer, or removal." See ICE PBNDS 2011 (ERRATA 2013), Standard, Funds & Personal Property, Section (V)(C)(4).

⁸ "The completed disciplinary segregation order shall be immediately provided to the detainee in a language or manner the detainee can understand, unless delivery would jeopardize the safe, secure, or orderly operation of the facility." *See* ICE PBNDS 2011 (ERRATA 2013), Standard, Special Management Unit (Disciplinary Segregation), Section (V)(B)(2)(b).

⁹ "When the detainee is released from the SMU, the releasing officer shall indicate the date and time of release on the disciplinary segregation order. The completed order shall then be forwarded to the Chief of Security for inclusion in the detainee's detention file." *See* ICE PBNDS 2011 (ERRATA 2013), Standard, Special Management Unit (Disciplinary Segregation), Section (V)(B)(2)(c).