



**U.S. Department of Homeland Security**  
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  
Follow-Up Compliance Inspection**

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

**Pine Prairie ICE Processing Center  
Pine Prairie, Louisiana**

**August 2-6, 2021**

**FOLLOW-UP COMPLIANCE INSPECTION  
of the  
PINE PRAIRIE ICE PROCESSING CENTER  
Pine Prairie, Louisiana**

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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 compliance inspection of the Pine Prairie ICE Processing Center (PPIPC) in Pine Prairie, Louisiana, from August 2 to 6, 2021.<sup>1</sup> This inspection focused on the standards found deficient during ODO’s last inspection of PPIPC from February 22 to 25, 2021. The facility opened in 2016 and is owned and operated by The GEO Group Inc. (GEO). The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at PPIPC in 2016 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 assigned deportation officers and a detention services manager to the facility. A PPIPC facility administrator handles daily facility operations and manages ██████ personnel. GEO provides food services and medical care, and Keefe Commissary Network provides commissary services. The facility was accredited by the American Correctional Association in November 2019 and the National Commission on Correctional Health Care in June 2020. In March 2018, PPIPC was audited by the Department of Homeland Security (DHS) Prison Rape Elimination Act (PREA) and was DHS PREA certified.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity <sup>2</sup>	██████
Average ICE Detainee Population <sup>3</sup>	██████
Male Detainee Population (as of August 2, 2021)	██████
Female Detainee Population (as of August 2, 2021)	██████

During its last inspection, in Fiscal Year (FY) 2021, ODO found three deficiencies in the following areas: Environmental Health and Safety (1); and Telephone Access (2).

<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 August 2, 2021.

<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 2011 (REVISED 2016)  
MAJOR CATEGORIES**

<b>PBNDS 2011 (Revised 2016) Standards Inspected<sup>4</sup></b>	<b>Deficiencies</b>
<b>Part 1 – Safety</b>	
Emergency Plans	0
Environmental Health and Safety	0
<b>Sub-Total</b>	<b>0</b>
<b>Part 2 – Security</b>	
Admission and Release	0
Custody Classification System	0
Funds and Personal Property	1
Special Management Units	0
Use of Force and Restraints	1
<b>Sub-Total</b>	<b>2</b>
<b>Part 4 – Care</b>	
Food Service	0
Hunger Strikes	0
Medical Care	0
Significant Self-harm and Suicide Prevention and Intervention	0
<b>Sub-Total</b>	<b>0</b>
<b>Part 5 – Activities</b>	
Telephone Access	0
<b>Sub-Total</b>	<b>0</b>
<b>Total Deficiencies</b>	<b>2</b>

<sup>4</sup> 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, or abuse. All detainees reported satisfaction with facility services. ODO conducted the detainee interviews via video teleconference.

## FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

### SECURITY

#### FUNDS AND PERSONAL PROPERTY (FPP)

ODO interviewed the chief of security and found the facility required detainees to purchase their own locks in the commissary to secure their personal property in the housing areas (**Deficiency FPP-40<sup>5</sup>**).

#### USE OF FORCE AND RESTRAINTS (UOFR)

ODO reviewed the facility's UOF policy, the UOF packet and video recording for the one calculated UOF incident, which occurred since ODO's last inspection of PPIPC, interviewed the chief of security, and found no documentation in which the facility administrator authorized the calculated UOF (**Deficiency UOFR-66<sup>6</sup>**). On August 3, 2021, PPIPC modified their UOF policy to include, "A calculated use of force needs to be authorized in advance by the facility administrator (or designee)."

## CONCLUSION

During this inspection, ODO assessed the facility's compliance with 12 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 10 of those standards. ODO found two deficiencies in the remaining two standards. ODO commends facility staff members for their responsiveness during this inspection. ODO recommends ERO New Orleans work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations. ERO provided ODO with the uniform corrective action plan for ODO's last inspection of PPIPC on June 27, 2021.

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<sup>5</sup> "Every housing area shall have lockers or other securable space for storing detainees' authorized personal property." See ICE PBNDS 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(E).

<sup>6</sup> "A calculated use of force needs to be authorized in advance by the facility administrator (or designee)." See ICE PBNDS 2011 (Revised 2016), Standard, Use of Force and Restraints, Section (V)(I).

<b>Compliance Inspection Results Compared</b>	<b>First FY 2021 (PBNS 2011) (Revised 2016)</b>	<b>Second FY 2021 (PBNS 2011) (Revised 2016)</b>
Standards Reviewed	19	12
Deficient Standards	2	2
Overall Number of Deficiencies	3	2
Repeat Deficiencies	0	0
Areas of Concern	0	0
Corrective Actions	2	0