

**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

Enforcement and Removal Operations ERO New Orleans Field Office

Richwood Correctional Center Monroe, Louisiana

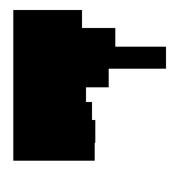
October 18-20, 2022

## UNANNOUNCED COMPLIANCE INSPECTION of the RICHWOOD CORRECTIONAL CENTER Monroe, Louisiana

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# **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 an unannounced compliance inspection of the Richwood Correctional Center (RCC) in Monroe, Louisiana, from October 18 to 20, 2022.<sup>1</sup> The facility opened in 1998 and is owned by LaSalle Corrections and operated by LaSalle Management. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at RCC in 2019 under the oversight of ERO's Field Office Director (FOD) 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 to the facility. A warden handles daily facility operations and manages support personnel. Correct Commissary provides food services, Correct Med provides medical care, and Correct Commissary provides commissary services at the facility. The facility was accredited by the National Commission on Correctional Health Care in June 2022. In March 2022, RCC 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 October 18, 2022)	
Adult Female Population (as of October 18, 2022)	

During its last inspection, in Fiscal Year (FY) 2022, ODO found eight deficiencies in the following areas: Admission and Release (1); Environmental Health and Safety (2); Food Service (2); and Personal Hygiene (3).

<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 October 17, 2022.

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

# **UNANNOUNCED COMPLIANCE INSPECTION PROCESS**

ODO conducts oversight inspections of ICE detention facilities with an average daily population (ADP) greater than 10, 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.<sup>4</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.

Beginning fiscal year (FY) 2022, ODO will conduct focused 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 1-9 detainees. Additionally, ODO will conduct 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. ODO will conduct a complete review of several core standards, in accordance with the facility's new contractually required ICE National Detention Standards, which include but are not limited to Medical Care/Health Care, Medical Care (Women)/Health Care (Females), Hunger Strikes, Suicide Prevention, Food Service, Environmental Health and Safety, Emergency Plans, Use of Force and Restraints/Use of Physical Control Measures and Restraints, Special Management Units, Educational Policy (FRS only), Behavior Management (FRS only), Admission and Release, Classification, and Funds and Personal Property.

Upon completion of each unannounced compliance 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 its decision-making to better allocate resources across the agency's entire detention inventory.

<sup>&</sup>lt;sup>4</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>5,6,7</sup>	Deficiencies
Part 1 - Safety	
Emergency Plans	0
Environmental Health and Safety	1
Transportation (By Land)	19
Sub-Total	20
Part 2 - Security	-
Admission and Release	1
Custody Classification System	0
Contraband	1
Funds and Personal Property	1
Key and Lock Control	1
Sexual Abuse and Assault Prevention and Intervention	0
Special Management Units	5
Tool Control	1
Use of Force and Restraints	0
Sub-Total	10
Part 3 - Order	
Disciplinary System	0
Sub-Total	0
Part 4 - Care	
Food Service	5
Medical Care	0
Significant Self-harm and Suicide Prevention and Intervention	0
Terminal Illness, Advance Directives and Death	0
Disability Identification, Assessment, and Accommodation	0
Sub-Total	5
Part 5 - Activities	
Correspondence and Other Mail	0
Recreation	0
Visitation	0
Sub-Total	0

<sup>&</sup>lt;sup>5</sup> For greater detail on ODO's findings, see the *Unannounced Compliance Inspection Findings* section of this report. <sup>6</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.

<sup>&</sup>lt;sup>7</sup> Special reviews and unannounced inspections are both focused reviews, and ODO will review a facility's compliance with at least 10 individual standards during each special review or unannounced inspection.

Part 6 - Justice		
Detainee Handbook	0	
Sub-Total	0	
Part 7 - Administration and Management		
Staff Training	0	
Sub-Total	0	
Total Deficiencies	35	

# **DETAINEE RELATIONS**

ODO interviewed 29 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. Most detainees reported satisfaction with facility services except for the concerns listed below.

*Medical Care:* One detainee stated the facility did not properly treat his pain from ruptured spinal disks.

Action Taken: ODO requested a review of the detainee's medical record by the health • services administrator (HSA) and found the detainee did not report a history of back pain during his intake screening and his comprehensive medical assessment in August 2022. On September 28, 2022, the detainee submitted a sick call request regarding neck and back pain due to a ruptured spinal disk. The facility's medical staff examined him, prescribed Naproxen (500 mg), and scheduled a follow-up visit for October 6, 2022. During the follow-up visit, the detainee rated his pain a 5 on a scale from 1-to-10. On October 13, 2022, RCC completed an X-ray examination of the detainee's lumbar spine and confirmed dextroscoliosis at the T6 level but no evidence of ruptured On October 17, 2022, during another examination, a nurse practitioner discs. prescribed Cyclobenzaprine, a muscle relaxant, and Naproxen for the detainee's treatment. The detainee requested an MRI for his back, but the provider denied the request due to no significant abnormalities observed in the X-ray. On October 17, 2022, the detainee received copies of his medical records from RCC upon his request.

*Medical Care:* One detainee stated concern for his declining mental health due to the length of his ICE detention but has not asked to see a mental health provider.

• <u>Action Taken</u>: On October 19, 2022, upon completion of ODO's interview with the detainee, ODO informed the facility and ERO New Orleans staff of the detainee's comments about his mental state. On October 25, 2022, the facility's mental health counselor assessed the detainee and noted the detainee had no suicidal nor homicidal intentions. The counselor prescribed relaxation and stress management skills and educated the detainee on journaling to process grief and stress. The detainee has been in ICE custody since June 6, 2022, and arrived at the RCC on November 4, 2022. As of November 20, 2022, the detainee is housed at the Winn Correctional Center.

*Personal Hygiene:* One detainee stated the facility has not replaced his wash towels in over 3 weeks.

• <u>Action Taken</u>: ODO followed up with the facility staff member who spoke to the detainee about RCC laundry policy in his native language. He explained the laundry schedule for towels and white clothing and also provided clean towels to the detainee. The detainee acknowledged understanding of the schedule.

*Staff-Detainee Communication:* One detainee stated the detention center has not given him his release papers.

• <u>Action Taken</u>: On October 19, 2022, ODO addressed the detainee's complaint with ERO New Orleans staff, who confirmed the detainee's date of release as October 20, 2022. On October 20, 2022, ODO confirmed with ERO New Orleans staff the detainee received a copy of his release papers and RCC released him.

# UNANNOUNCED COMPLIANCE INSPECTION FINDINGS

# **SAFETY**

## ENVIRONMENTAL HEALTH AND SAFETY (EHS)

ODO toured RCC and found facility staff did not maintain a high standard of facility sanitation and general cleanliness. Specifically, ODO observed a heavy accumulation of dirt, hair, lint, rust, and stains on the floors, corners, baseboards, and walls of a lavatory and shower located adjacent to housing unit 7 (Deficiency EHS-11<sup>8</sup>).

## TRANSPORTATION (BY LAND) (TBL)

ODO reviewed RCC TBL program policies and procedures and transportation post orders, interviewed facility staff, and found the following deficiencies:

• No written procedures indicating or addressing the transport of detainees whose disabilities or special needs precluded prolonged travel. Specifically, the facility transportation policy states reasonable accommodations shall be made for detainees with physical disabilities and/or special needs in accordance with security and safety needs and all applicable laws and regulations. However, neither the policy nor post orders mention specific details or provide written guidance regarding detainees whose

<sup>&</sup>lt;sup>8</sup> "The facility administrator shall ensure that staff and detainees maintain a high standard of facility sanitation and general cleanliness. When possible, the use of non-toxic cleaning supplies is recommended." *See* ICE PBNDS 2011 (Revised 2016), Standard, Environmental Health and Safety, Section (V)(A)(3).

disabilities or special needs preclude prolonged travel (Deficiency TBL-11<sup>9</sup>);

- No posted written guidelines for tracing procedures. Specifically, the facility transportation supervisor confirmed a tracing procedure for the facility and explained it in detail, but the facility does not have written guidelines (Deficiency TBL-122<sup>10</sup>);
- No documented record of mealtimes, number of meals, and types of meals. Specifically, the facility transportation supervisor confirmed RCC provides meals, but the transportation staff does not record the distribution, types, or time the meals are served (**Deficiency TBL-138**<sup>11</sup>);
- No documentation of a detainee's refusal of a meal. Specifically, the facility transportation supervisor confirmed RCC providing meals, but the transportation staff does not record when a detainee refuses or does not want the meal (Deficiency TBL-139<sup>12</sup>);
- No monitoring by the food service administrator of the condition and routine cleansing and sterilization of drinking-water containers, basins, latrines, etc., in vehicles. Specifically, the transportation administrator performs these functions and not the food service administrator (**Deficiency TBL-146**<sup>13</sup>);
- No written procedures requiring the transportation crew to prepare a written report of escapes and attempted escapes (**Deficiency TBL-198**<sup>14</sup>);
- No written procedures requiring the transportation crew to notify ERO New Orleans of a hostage situation. Specifically, the facility transportation policy states the transportation crew will notify the closest law enforcement agency, not ERO New Orleans (Deficiency TBL-199<sup>15</sup>);
- No written procedures requiring the transportation crew to notify ERO New Orleans of a hostage situation. Specifically, the facility transportation policy states the transportation crew will relay the information to the office and not ICE/ERO

<sup>14</sup> "The written procedures shall cover the following scenarios ...

<sup>&</sup>lt;sup>9</sup> "The facility administrator shall develop and implement written policy, procedures and guidelines for the transportation of detainees, including, at a minimum: ...

<sup>5.</sup> Procedures and necessary equipment in the event of: ...

f. Transport of detainees whose disabilities or special needs preclude prolonged travel."

See ICE PBNDS 2011 (Revised 2016), Standard, Transportation (by Land), Section (V)(A)(5)(f).

<sup>&</sup>lt;sup>10</sup> "Each office shall develop and post written guidelines for tracing procedures to locate an overdue vehicle." *See* ICE PBNDS 2011 (Revised 2016), Standard, Transportation (by Land), Section (V)(K)(1).

<sup>&</sup>lt;sup>11</sup> "Mealtimes, the number of meals, and the types of meals provided shall be recorded." *See* ICE PBNDS 2011 (Revised 2016), Standard, Transportation (by Land), Section (V)(L).

<sup>&</sup>lt;sup>12</sup> "Mealtimes, the number of meals, and the types of meals provided shall be recorded." *See* ICE PBNDS 2011 (Revised 2016), Standard, Transportation (by Land), Section (V)(L).

<sup>&</sup>lt;sup>13</sup> "The food service administrator shall monitor the condition and routine cleansing and sterilizing of drinking-water containers, basins, latrines, etc., in vehicles to ensure compliance with standard "4.1 Food Service." *See* ICE PBNDS 2011 (Revised 2016), Standard, Transportation (by Land), Section (V)(L).

<sup>2.</sup> Escape ... The vehicle crew shall prepare a fully documented written report of the escape and/or attempted escape." *See* ICE PBNDS 2011 (Revised 2016), Standard, Transportation (by Land), Section (V)(S)(2).

<sup>&</sup>lt;sup>15</sup> "The written procedures shall cover the following scenarios ...

<sup>3.</sup> Hostages ... If a hostage situation occurs on board the vehicle, at least one assigned transportation staff member shall secure the vehicle perimeter while another notifies the closest ICE/ERO office of the situation." *See* ICE PBNDS 2011 (Revised 2016), Standard, Transportation (by Land), Section (V)(S)(3).

#### (Deficiency TBL-200<sup>16</sup>);

- No written procedures indicating or stating a hostage situation effectively ends a transportation assignment. Specifically, the facility transportation policy states the transportation crew will receive instructions on how and where to proceed after resolution of the hostage situation (Deficiency TBL-204<sup>17</sup>);
- No written procedures requiring a transportation crew to write an incident report regarding a hostage situation. Specifically, the facility transportation policy states the transportation crew will receive instructions on how and where to proceed after resolution of the hostage situation (Deficiency TBL-206<sup>18</sup>);
- No written procedures requiring the closest ICE/ERO office to prepare procurement paperwork and arrange for hospitalization, security, etc. Specifically, the facility transportation policy states the closest office will perform these tasks and not ERO New Orleans (Deficiency TBL-210<sup>19</sup>);
- No requirement for procedures to follow standard '4.7 Terminal Illness, Advance Directives and Death' should a detainee die in transit. Specifically, the facility transportation policy states the transportation officers will follow procedures specified by policy and not the procedures specified in standard '4.7 Terminal Illness, Advance Directives and Death.' (Deficiency TBL-211<sup>20</sup>);
- No written procedures regarding the closest ICE/ERO office coordinating with other agencies, including the coroner, required to attend the removal a of a body from a vehicle. Specifically, the facility transportation policy states the facility will coordinate with other agencies, including the coroner, required to attend the removal of a body from a vehicle (Deficiency TBL-212<sup>21</sup>);
- No written procedures regarding transportation staff to report an accident to ERO New

<sup>17</sup> "The written procedures shall cover the following scenarios ...

 $<sup>^{16}</sup>$  "The written procedures shall cover the following scenarios  $\ldots$ 

<sup>3.</sup> Hostages ... The assigned transportation staff shall make every effort to determine who is involved and whether they are armed, relaying this information to the ICE/ERO office and local law enforcement agencies." *See* ICE PBNDS 2011 (Revised 2016), Standard, Transportation (by Land), Section (V)(S)(3).

<sup>3.</sup> Hostages ... Because of the need to interview witnesses, examine the crime scene, etc., a hostage situation shall effectively end a transportation assignment." *See* ICE PBNDS 2011 (Revised 2016), Standard, Transportation (by Land), Section (V)(S)(3).

<sup>&</sup>lt;sup>18</sup> "The written procedures shall cover the following scenarios ...

<sup>3.</sup> Hostages ... The vehicle crew's incident report shall note participants, witnesses and action taken." See ICE PBNDS 2011 (Revised 2016), Standard, Transportation (by Land), Section (V)(S)(3).

<sup>&</sup>lt;sup>19</sup> "The written procedures shall cover the following scenarios ...

<sup>4.</sup> Illness ... The closest ICE/ERO office shall prepare procurement paperwork and make arrangements for hospitalization, security, etc." *See* ICE PBNDS 2011 (Revised 2016), Standard, Transportation (by Land), Section (V)(S)(4).

<sup>&</sup>lt;sup>20</sup> "The written procedures shall cover the following scenarios ...

<sup>5.</sup> Death ... If a detainee dies while in transit, assigned transportation staff shall notify the originating or receiving office as soon as possible and shall follow procedures specified in standard '4.7 Terminal Illness, Advance Directives and Death.'" *See* ICE PBNDS 2011 (Revised 2016), Standard, Transportation (by Land), Section (V)(S)(5).

<sup>&</sup>lt;sup>21</sup> "The written procedures shall cover the following scenarios ...

<sup>5.</sup> Death ... The closest ICE/ERO office shall coordinate with other agencies, including the coroner, required to be on the scene when the body is removed from the vehicle." *See* ICE PBNDS 2011 (Revised 2016), Standard, Transportation (by Land), Section (V)(S)(5).

Orleans. Specifically, the facility transportation policy states the transportation officer must report an accident to local law enforcement, the originating facility, and the immediate supervisor (**Deficiency TBL-225**<sup>22</sup>);

- No written procedures regarding transportation staff to obtain a police report. Specifically, the facility transportation policy does not state nor indicate obtaining a police report by anyone, including the transportation officer, immediate supervisor, or ERO New Orleans (Deficiency TBL-226<sup>23</sup>);
- Written procedures require the transportation officer to record witnesses' names, addresses, and phone numbers, but no written guidance on what type of form should be used to record the information. Specifically, facility transportation policy does not indicate nor mention using Form SF-94 to record witnesses' names, addresses, and phone numbers (**Deficiency TBL-227**<sup>24</sup>);
- No written procedures for the assigned transportation staff to discuss the issue of responsibility for the accident with only their chain of command. Specifically, facility transportation policy provides no guidance on the transportation staff discussing the issue of responsibility for the accident. Neither the policy nor post orders indicate who should be involved in the discussion (Deficiency TBL-228<sup>25</sup>);
- No written procedures indicating or stating the assigned transportation staff to report the accident to FOD nor designee and prepare the required forms. Specifically, facility transportation policy provides no guidance on staff reporting an accident to FOD. The policy states the transportation officer must report the accident to the local law enforcement agency, the originating facility, and the immediate supervisor (Deficiency TBL-229<sup>26</sup>); and
- No written procedures requiring the assigned transportation staff to request further instructions from the receiving office if driving under adverse conditions. Specifically, facility transportation policy provides no guidance on staff making this request. The policy provides guidance when contacting authorities, but makes no mention of.

 $<sup>^{22}</sup>$  "The written procedures shall cover the following scenarios  $\ldots$ 

<sup>8.</sup> Traffic Accident ... Regardless of the severity of the accident, the assigned transportation staff must report the accident to the local law enforcement agency and the nearest ICE/ERO office." *See* ICE PBNDS 2011 (Revised 2016), Standard, Transportation (by Land), Section (V)(S)(8).

<sup>&</sup>lt;sup>23</sup> "The written procedures shall cover the following scenarios ...

<sup>8.</sup> Traffic Accident ... They must also obtain a police report for the record, in case of future allegations or lawsuits against ICE/ERO or individual officers." *See* ICE PBNDS 2011 (Revised 2016), Standard, Transportation (by Land), Section (V)(S)(8).

<sup>&</sup>lt;sup>24</sup>"The driver must record witnesses' names, addresses, and phone numbers on Form SF-94." *See* ICE PBNDS 2011 (Revised 2016), Standard, Transportation (by Land), Section (V)(S)(8).

<sup>&</sup>lt;sup>25</sup> "The written procedures shall cover the following scenarios ...

<sup>8.</sup> Traffic Accident ... The assigned transportation staff shall discuss the issue of responsibility for the accident only with their chain of command." *See* ICE PBNDS 2011 (Revised 2016), Standard, Transportation (by Land), Section (V)(S)(8).

<sup>&</sup>lt;sup>26</sup> "The written procedures shall cover the following scenarios ...

<sup>8.</sup> Traffic Accident ... Upon arriving at the receiving office, the assigned transportation staff shall report the accident to the Field Office Director, or designee and prepare the required forms." *See* ICE PBNDS 2011 (Revised 2016), Standard, Transportation (by Land), Section (V)(S)(8).

contacting the receiving (Deficiency TBL-236<sup>27</sup>).

## **SECURITY**

## **ADMISSION AND RELEASE (AR)**

ODO reviewed the contraband tracking log, interviewed the property sergeant, observed the secure contraband storage locker, and found contraband was not processed in accordance with standard '2.3 Contraband.' Specifically, ODO observed a folding utility knife in the contraband storage locker, and the property officer failed to document date and location of the knife, specify the detainee, nor list it in the contraband tracking log (Deficiency AR-20<sup>28</sup>).

## CONTRABAND (CON)

ODO observed the facility's contraband locker, interviewed the property sergeant, and found a folding utility knife stored in the locker without any documentation. Specifically, facility staff did not notify the detainee of the seizure, nor provide the detainee a receipt (Deficiency CON-35<sup>29</sup>).

#### FUNDS AND PERSONAL PROPERTY (FPP)

ODO reviewed the contraband tracking log, interviewed the property sergeant, observed the secure contraband storage locker, and found facility staff did not properly receipt nor inventory contraband. Specifically, ODO observed a folding utility knife in the contraband storage locker, and facility staff did not document the date and location of the knife, specify the detainee, nor inventory it in the contraband tracking log (Deficiency FPP-14<sup>30</sup>).

## KEY AND LOCK CONTROL (KLC)

ODO interviewed the RCC KLC officer, observed the facility's video monitoring system, and found facility staff was unable to continuously monitor the facility front entrance gun locker (**Deficiency KLC-100**<sup>31</sup>).

<sup>&</sup>lt;sup>27</sup> "The written procedures shall cover the following scenarios ...

<sup>8.</sup> Traffic Accident ... If driving conditions are unlikely to improve, the vehicle crew shall look for a safe area to park the vehicle and request further instructions from the receiving office." See ICE PBNDS 2011 (Revised 2016), Standard, Transportation (by Land), Section (V)(S)(10).

<sup>&</sup>lt;sup>28</sup> "Items discovered during the search of a detainee or his/her property shall be identified as:

a. Contraband, and processed in accordance with standard '2.3 Contraband.'

See ICE PBNDS 2011 (Revised 2016), Standard, Admission and Release, Section (V)(B)(3)(a).

 $<sup>^{29}</sup>$  "In the event that the contraband is not illegal to possess under criminal statutes and would not otherwise pose a threat to security, staff shall inventory and provide a receipt for the property." *See* ICE PBNDS 2011 (Revised 2016), Standard, Contraband, Section (V)(B)(4).

<sup>&</sup>lt;sup>30</sup> "In accordance with standard '2.3 Contraband,' if any unauthorized personal property is contraband, it must be surrendered to staff for securing, receipting and inventorying." *See* ICE PBNDS 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(B).

<sup>&</sup>lt;sup>31</sup> "In all facilities, gun lockers shall:

<sup>1.</sup> Be placed in locations where officers can continuously observe them, in person or on a video-monitor,

*Corrective Action:* On October 19, 2022, the assistant warden contacted maintenance to adjust the front video-monitoring camera system by 1 degree to the right, and thus provided main control with continuous observation of the front gun locker instead of just the entrance to the room (C-1).

### **SPECIAL MANAGEMENT UNITS (SMU)**

ODO reviewed RCC SMU program policies and procedures, 30 detainee administrative segregation (AS)/disciplinary segregation (DS) files, interviewed facility staff, and found the following deficiencies:

- RCC did not immediately provide AS orders to detainees in a language they understood. Specifically, in 15 out of 15 files, there was no documentation showing RCC provided AS orders to detainees. Additionally, the classification manager confirmed detainees received no AS orders (Deficiency SMU-36<sup>32</sup>);
- In 1 out of 15 DS detention files, RCC did not place a detainee in DS by order of the Institution Disciplinary Panel (IDP), after a hearing in which the detainee had been found to have committed a prohibited act. Specifically, RCC placed the detainee in the SMU on July 28, 2022, and issued a disciplinary segregation order (DSO) on the same day, but the disciplinary hearing officer (DHO) found the detainee guilty of the prohibited act on July 29, 2022 (Deficiency SMU-61<sup>33</sup>);
- In 1 out of 15 DS detention files, the chair of the IDP (or disciplinary hearing officer) did not sign a written order before RCC placed the detainee in DS. Specifically, RCC placed the detainee in the SMU on July 28, 2022, and issued him a DSO on the same day, but the DHO found detainee guilty of the prohibited act on July 29, 2022 (Deficiency SMU-64<sup>34</sup>);
- In 1 out of 15 DS detention files, prior to the detainee's actual placement in DS, the IDP chairman did not complete the DSO (Form I-883 or equivalent), detailing the reason for placing the detainee in DS. Specifically, RCC placed the detainee in the SMU on July 28, 2022, and issued a DSO on the same day, but the DHO found the

and not in any area that has detainee or public access;

<sup>2.</sup> Be used to store the weapons of all on-duty officers, except those whose assignments require them to carry weapons; and

<sup>3.</sup> Not be used for long-term storage. (A staff member may arrange with the facility firearms control officer for long-term storage of a weapon in the armory.)"

See ICE PBNDS 2011 (Revised 2016), Standard, Key and Lock Control, Section (V)(F).

 $<sup>^{32}</sup>$  "The administrative 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 (Revised 2016), Standard, Special Management Units, Section (V)(A)(2)(e).

<sup>&</sup>lt;sup>33</sup> "A detainee may be placed in disciplinary segregation only by order of the IDP, or its equivalent, after a hearing in which the detainee has been found to have committed a prohibited act and only when alternative dispositions may inadequately regulate the detainee's behavior." *See* ICE PBNDS 2011 (Revised 2016), Standard, Special Management Units, Section (V)(B).

 $<sup>^{34}</sup>$  "A written order shall be completed and signed by the chair of the IDP (or disciplinary hearing officer) before a detainee is placed into disciplinary segregation." *See* ICE PBNDS 2011 (Revised 2016), Standard, Special Management Units, Section (V)(B)(2).

detainee guilty of the prohibited act on July 29, 2022 (Deficiency SMU-65<sup>35</sup>); and

• RCC did not immediately provide DS orders to the detainees in a language or manner they understood. Specifically, in 15 out of 15 files, no documentation confirmed RCC provided DS orders to detainees. The classification manager also confirmed detainees did not receive DS orders (Deficiency SMU-66<sup>36</sup>).

## TOOL CONTROL (TC)

ODO interviewed the facility staff, reviewed tool control logs, and found the facility used paper forms to issue tools, but the maintenance staff did not use the form to issue maintenance tools. In addition, ODO found 80% of the logs contained incomplete information (**Deficiency TC-131**<sup>37</sup>).

## **CARE**

## FOOD SERVICE (FS)

ODO reviewed the RCC FS program, observed the FS area, interviewed facility staff, and found the following deficiencies:

- No protection of food and ice from dust, insects and rodents, unclean utensils and work surfaces, unnecessary handling, coughs and sneezes, flooding, drainage, overhead leakage, and other sources of contamination. Specifically, ODO observed water leaking from an overhead compressor onto stored food items in a walk-in freezer, located adjacent to the FS department (Deficiency FS-151<sup>38</sup>);
- No effective surface cleaning after each use of containers, cutting boards, and utensils used for preparation and subsequent food storage. Specifically, ODO observed a buildup of food debris on the surface of a heavy-duty floor mixer in the FS bakery (Deficiency FS-159<sup>39</sup>). This is a repeat deficiency;
- No protection of outside openings by tight-fitting screens, windows, controlled air curtains, and self-closing doors. Specifically, ODO observed one of two FS exterior doors with no air curtains and two of two doors with no self-closing mechanism

 $<sup>^{35}</sup>$  "Prior to a detainee's actual placement in disciplinary segregation, the IDP chairman shall complete the disciplinary segregation order (Form I-883 or equivalent), detailing the reasons for placing a detainee in disciplinary segregation. All relevant documentation must be attached to the order." *See* ICE PBNDS 2011 (Revised 2016), Standard, Special Management Units, Section (V)(B)(2)(a).

<sup>&</sup>lt;sup>36</sup> "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 (Revised 2016), Standard, Special Management Units, Section (V)(B)(2)(b).

 $<sup>^{37}</sup>$  "A metal or plastic chit receipt shall be taken for all tools issued, and when a tool is issued from a shadow board, the receipt chit shall be visible on the shadow board." *See* ICE PBNDS 2011 (Revised 2016), Standard, Tool Control, Section (V)(K)(3).

<sup>&</sup>lt;sup>38</sup> "Food and ice shall be protected from dust, insects and rodents, unclean utensils and work surfaces, unnecessary handling, coughs and sneezes, flooding, drainage, overhead leakage and other sources of contamination." *See* ICE PBNDS 2011 (Revised 2016), Standard, Food Service, Section (V)(F)(5).

<sup>&</sup>lt;sup>39</sup> "The surfaces of equipment, containers, cutting boards and utensils used for preparation and subsequent storage of potentially hazardous food shall be cleaned effectively after each use." *See* ICE PBNDS 2011 (Revised 2016), Standard, Food Service, Section (V)(F)(7).

#### (Deficiency FS-326<sup>40</sup>);

- No frequent surface cleaning of equipment not intended for contact with food, but located in places exposed to splatters, spills, etc., Specifically, ODO observed a buildup of food debris on a heavy-duty floor mixer in the FS bakery with food debris found at the interface between the mixing paddle attachment and the rotating cylinder (Deficiency FS-339<sup>41</sup>); and
- No air curtains or comparable devices used on outside doors where food is prepared, stored, or served. Specifically, ODO found one of two food service exterior doors with no air curtains installed and two of two doors with no self-closing mechanism (Deficiency FS-387<sup>42</sup>).

# CONCLUSION

During this inspection, ODO assessed the facility's compliance with 23 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 15 of those standards. ODO found 35 deficiencies in the remaining 9 standards. ODO commends facility staff 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. ODO has not received the uniform corrective action plan for ODO's last inspection of RCC in April 2022.

Compliance Inspection Results Compared	FY 2022 (PBNDS 2011) (Revised 2016)	FY 2023 (PBNDS 2011) (Revised 2016)
Standards Reviewed	18	23
Deficient Standards	4	9
Overall Number of Deficiencies	8	35
Priority Component Deficiencies	N/A	0
Repeat Deficiencies	1	1
Areas Of Concern	1	0
Corrective Actions	2	1
Facility Rating	N/A	Good

<sup>&</sup>lt;sup>40</sup> "Outside openings shall be protected by tight-fitting screens, windows, controlled air curtains and self-closing doors." *See* ICE PBNDS 2011 (Revised 2016), Standard, Food Service, Section (V)(J)(5)(k).

<sup>&</sup>lt;sup>41</sup> "Equipment surfaces not intended for contact with food, but located in places exposed to splatters, spills, etc., require frequent cleaning. Therefore, they shall be reasonably smooth, washable, free of unnecessary ridges, ledges, projections and crevices." *See* ICE PBNDS 2011 (Revised 2016), Standard, Food Service, Section (V)(J)(7)(c)(2).

<sup>&</sup>lt;sup>42</sup> "To protect against insects and other pests, air curtains or comparable devices shall be used on outside doors where food is prepared, stored or served." *See* ICE PBNDS 2011 (Revised 2016), Standard, Food Service, Section (V)(J)(10).