

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 New Orleans Field Office

Richwood Correctional Center Monroe, Louisiana

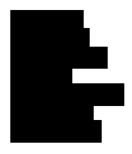
April 26-28, 2022

FOLLOW-UP COMPLIANCE INSPECTION of the RICHWOOD CORRECTIONAL CENTER Monroe, 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 Richwood Correctional Center (RCC) in Monroe, Louisiana, from April 26 to 28, 2022.¹ This inspection focused on the standards found deficient during ODO's last inspection of RCC from October 18 to 21, 2021. 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 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. An RCC facility administrator oversees daily facility operations and manages support personnel. Robertson Produce, Flowers Baking, Correct Commissary, Sysco, and Reinhardt provide food services, Correct Med provides medical care, and Correct Commissary provides commissary services at the facility. The facility does not hold any accreditations from any outside entities.

Capacity and Population Statistics	Quantity
ICE Bed Capacity ²	
Average ICE Population ³	
Adult Male Population (as of April 26, 2022)	
Adult Female Population (as of April 26, 2022)	

During its last inspection, in Fiscal Year (FY) 2022, ODO found eight deficiencies in the following areas: Correspondence and Other Mail (1); Environmental Health and Safety (1); Funds and Personal Property (1); Medical Care (2); Medical Care (Women) (1); Personal Hygiene (1); and Significant Self-harm and Suicide Prevention and Intervention (1).

¹ This facility holds male detainees with security classification levels for periods greater than 72 hours.

² Data Source: ERO Facility List as of April 25, 2022.

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.

FINDINGS BY PERFORMANCE-BASED NATIONAL DETENTION STANDARDS 2011 (REVISED 2016) MAJOR CATEGORIES

PBNDS 2011 (Revised 2016) Standards Inspected ^{4,5}	Deficiencies
Part 1 - Safety	
Emergency Plans	0
Environmental Health and Safety	2
Sub-Total	2
Part 2 - Security	
Admission and Release	1
Special Management Units	0
Custody Classification System	0
Facility Security and Control	0
Funds and Personal Property	0
Staff-Detainee Communication	0
Use of Force and Restraints	0
Sub-Total	1
Part 4 - Care	
Food Service	2
Hunger Strikes	0
Medical Care	0
Medical Care (Women)	0
Personal Hygiene	3
Significant Self-harm and Suicide Prevention and Intervention	0
Sub-Total	5
Part 5 - Activities	
Correspondence and Other Mail	0
Telephone Access	0
Sub-Total	0
Part 6 - Justice	
Grievance System	0
Sub-Total	0
Total Deficiencies	8

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

⁵ 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.

DETAINEE RELATIONS

ODO interviewed 22 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 concern listed below.

Telephone Access: One detainee stated his concern of the facility posting incorrect consulate telephone numbers in the housing units.

• <u>Action Taken</u>: ODO reviewed the list of posted consulate telephone numbers in the housing units dated April 13, 2021, and confirmed with ERO to be the most current list for the facility. ODO tested the phones and attempted to contact multiple consulates without success. ERO New Orleans contacted surrounding facilities who use the same service line and confirmed the issue was system wide. ODO followed up with ERO New Orleans and learned of a technical outage affecting multiple facilities, which prevented detainees from contacting their consulates. During the outage, the facility allowed detainees to use direct lines to contact their respective consulates. The facility submitted a work request, and the communications contractor repaired the telephones.

FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

SAFETY

ENVIRONMENTAL HEALTH AND SAFETY (EHS)

ODO observed detainee housing units, reviewed floor plans, and found the facility does not provide the minimum toilet, washbasin, nor shower-to-detainee ratio according to the American Correctional Association (ACA). Specifically, the ACA's recognized toilet-washbasin-and-shower ratio for male detainees is a minimum of 1 for every 12 detainees. ODO determined the toilet-and-washbasin ratio for Unit 5 at 13:1 and 12.7:1 for showers. Additionally, ODO determined the toilet-washbasin-and-shower ratio in Unit 4 was at 13:1 (Deficiency EHS-1⁶). This is a repeat deficiency.

ODO observed the facility barber shop and found the facility did not prohibit the common use of neck dusters. Specifically, ODO observed detainees using neck dusters and brushes to remove hair clippings from detainees (**Deficiency EHS-215**⁷).

⁶ "Environmental health conditions shall be maintained at a level that meets recognized standards of hygiene, including those from the:

a. American Correctional Association;"

See ICE PBNDS 2011, Standard, Environmental Health and Safety, Section (V)(A)(1)(a).

⁷ "The common use of brushes, neck dusters, shaving mugs and shaving brushes is prohibited." *See* ICE PBNDS 2011, Standard, Environmental Health and Safety, Section (V)(E)(4).

SECURITY

ADMISSION AND RELEASE (AR)

ODO reviewed five released detainee files and found in three out of five files, an authorizing official did not sign the Order to Detain or Release (Form I-203) (Deficiency AR-80⁸).

CARE

FOOD SERVICE (FS)

ODO inspected equipment in the FS area and found improperly cleaned sheet trays FS staff used for food preparation and storage. Specifically, ODO observed sheet trays with food debris and grease build-up present on the surface (Deficiency FS-159⁹).

Corrective Action: On April 26, 2022, RCC provided ODO with a submitted and approved purchase order for new sheet trays and added FS equipment to its weekly comprehensive safety and sanitation inspection (C-1).

ODO observed the FS area and found FS personnel using leftover cooked meat outside of the 24hour shelf-life limit. Specifically, ODO observed leftover bologna in refrigerated storage, dated April 7, 2022 (**Deficiency FS-286**¹⁰).

Corrective Action: The food service administrator disposed of the bologna and reminded facility staff to discard leftover cooked meat after 24 hours (C-2).

PERSONAL HYGIENE (PH)

ODO reviewed facility booking and dormitory documents, interviewed facility staff, and found the facility did not provide a minimum ratio of 1 toilet for every 12 detainees as required by the ACA (Deficiency PH-33¹¹).

ODO reviewed facility booking and dormitory documents, interviewed facility staff, and found the facility did not provide a minimum ratio of 1 washbasin for every 12 detainees as required by the ACA (**Deficiency PH-37**¹²).

⁸ "A detainee's out-processing begins when release processing staff receive the Form I-203, 'Order to Detain or Release,' signed by an authorizing official." *See* ICE PBNDS 2011, Standard, Admission and Release, Section (V)(H)(1).

⁹ "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, Standard, Food Service, Section (V)(F)(7).

¹⁰ "Leftover cooked meats shall not be used after 24 hours." *See* ICE PBNDS 2011, Standard, Food Service, Section (V)(I)(6)(c).

¹¹ "ACA Expected Practice 4-ALDF-4B-08 requires that toilets be provided at a minimum ratio of one for every 12 male detainees or 1 for every 8 female detainees." *See* ICE PBNDS 2011, Standard, Personal Hygiene, Section (V)(E)(1).

¹² "ACA Expected Practice 4-ALDF-4B-08 requires 1 washbasin for every 12 detainees." *See* ICE PBNDS 2011, Standard, Personal Hygiene, Section (V)(E)(2).

ODO reviewed facility booking and dormitory documents, interviewed facility staff, and found the facility did not provide a minimum ratio of 1 shower for every 12 detainees as required by the ACA (Deficiency PH-39¹³).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 18 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 14 of those standards. ODO found eight deficiencies in the remaining four 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 RCC on October 18, 2021.

Compliance Inspection Results Compared	First FY 2022 (PBNDS 2011) (Revised 2016)	Second FY 2022 (PBNDS 2011) (Revised 2016)
Standards Reviewed	24	18
Deficient Standards	7	4
Overall Number of Deficiencies	8	8
Repeat Deficiencies	1	1
Areas Of Concern	0	0
Corrective Actions	0	2
Facility Rating	Superior	N/A

¹³ "ACA Expected Practice 4-ALDF-4B-09 requires a minimum ratio of 1 shower for every 12 detainees." *See* ICE PBNDS 2011, Standard, Personal Hygiene, Section (V)(E)(3).