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Office of Professional Responsibility
ICE Inspections
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**Office of Detention Oversight
Compliance Inspection
2024-001-231**

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

**Richwood Correctional Center
Monroe, Louisiana**

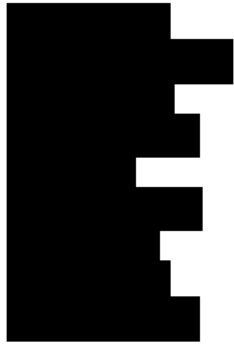
October 31-November 2, 2023

COMPLIANCE INSPECTION
of the
RICHWOOD CORRECTIONAL CENTER
Monroe, Louisiana

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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 compliance inspection of the Richwood Correctional Center (RCC) in Monroe, Louisiana, from October 31 to November 2, 2023.¹ The facility opened in 1998 and is owned 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).

[REDACTED] A facility administrator handles daily operations and manages [REDACTED] support personnel. Performance Food provides food services, Correct Medical provides medical care services, and Correct Commissary provides commissary services at the facility. In June 2022, the facility was accredited by the National Commission on Correctional Health Care. 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 ²	[REDACTED]
Average ICE Population ³	[REDACTED]
Adult Male Population (as of October 31, 2023)	[REDACTED]
Adult Female Population (as of October 31, 2023)	[REDACTED]

During its last full inspection, in Fiscal Year (FY) 2023, ODO found 35 deficiencies in the following areas: Admission and Release (1); Contraband (1); Environmental Health and Safety (1); Food Service (5); Funds and Personal Property (1); Key and Lock Control (1); Special Management Units (5); Tool Control (1); and Transportation (By Land) (19).

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

² Data Source: ERO Custody Management Division Authorized Facility List as of October 30, 2023.

³ *Ibid.*

COMPLIANCE INSPECTION PROCESS

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

Upon completion of each 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 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}	Deficiencies
Part 1 - Safety	
Emergency Plans	0
Environmental Health and Safety	0
Sub-Total	0
Part 2 - Security	
Admission and Release	1
Custody Classification System	0
Facility Security and Control	2
Funds and Personal Property	0
Population Counts	0
Post Orders	1
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	5
Part 4 - Care	
Food Service	0
Hunger Strikes	0
Medical Care	4
Medical Care (Women)	0
Personal Hygiene	0
Significant Self-harm and Suicide Prevention and Intervention	0
Sub-Total	4
Part 5 - Activities	
Correspondence and Other Mail	14
Trips for Non-Medical Emergencies	0
Marriage Requests	0
Religious Practices	0
Telephone Access	4
Voluntary Work Program	0

⁵ For greater detail on ODO's findings, see the *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 standard components may not be present in all standards.

Sub-Total	18
Part 6 – Justice	
Grievance System	0
Law Libraries and Legal Materials	0
Sub-Total	0
Part 7 - Administration and Management	
Detention Files	0
Sub-Total	0
Total Deficiencies	27

DETAINEE RELATIONS

ODO interviewed 45 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.

Searches of Detainees: One detainee stated facility staff damaged bedding and threw away food during a search of his housing unit and then turned off telephones, tablets, and kiosks as a form of punishment.

- Action Taken: ODO interviewed facility staff, reviewed search logs for housing unit 7 and found housing unit officers conducted searches from September 27 to 29, 2023, due to suspicion of a knife in the unit. All searches concluded with no weapon found and with no comment of retaliatory measures recorded. Staff also confirmed it is the facility’s procedure to conduct daily searches within the facility based on information received from detainees or facility staff.

ODO also reviewed the housing unit’s daily telephone reports from September 28 to October 1, 2023, and found housing unit officers only reported inoperable telephones in housing unit 7 but they did not immediately submit a work order for telephone repairs. ODO cited this as a deficiency in the *Telephone Access* section of the report. ODO interviewed the chief of security and confirmed resolution of the telephones after 3 days of receiving the report. On November 2, 2023, ODO tested the telephones, kiosks, and tablets in the housing unit and found them to be in working order.

Significant Self-harm and Suicide Prevention and Intervention: One detainee stated thoughts of harming himself because of his confinement.

- Action Taken: ODO immediately stopped the interview and requested facility staff to take the detainee to the medical department. Medical staff came to the detainee interview room and evaluated the detainee. ODO notified facility leadership and ERO New Orleans staff of the detainee’s issue. On October 31, 2023, a facility registered nurse assessed the detainee, confirmed his suicidal ideations, and then consulted with a facility psychiatric mental health nurse practitioner (PMHNP). The PMHNP ordered medical staff to place the detainee on constant suicide watch with one-to-one

observations. That same day, the PMHNP assessed the detainee and found him to be cooperative but anxious and no longer actively suicidal. The PMHNP discontinued the detainee's suicide watch orders and scheduled the detainee for a mental health observation with a facility licensed professional counselor (LPC). On November 2, 2023, the LPC assessed the detainee and found him stable and no longer actively suicidal. The LPC cleared the detainee to return to general population and advised him to continue to follow-up with mental health staff by submitting a sick call request when necessary. The detainee verbalized understanding, and medical staff returned him to his housing unit.

COMPLIANCE INSPECTION FINDING

SECURITY

ADMISSION AND RELEASE (AR)

ODO reviewed [REDACTED] detainee detention files and found in [REDACTED] out of [REDACTED] files, no Order to Detain (Form I-203) with an appropriate ERO New Orleans authorizing official signature (**Deficiency AR-54**⁷).

FACILITY SECURITY AND CONTROL (FSC)

ODO reviewed the facility's visitor log and found the facility did not require visitors to sign the log upon entry to the facility (**Deficiency FSC-26**⁸).

ODO interviewed the facility administrator (FA), reviewed eight detainee housing unit logs, and found both the FA and the assistant FA did not record their visits by initialing unit logs (**Deficiency FSC-81**⁹).

POST ORDERS (PO)

ODO reviewed the facility's PO policy, 20 POs and found the FA signed and dated the last page of every section of each PO but did not initial and date all other pages (**Deficiency PO-12**¹⁰).

⁷ "An Order to Detain or an Order to Release the detainee (Form I-203 or I-203a), bearing the appropriate ICE/ERO Authorizing Official signature, must accompany each newly arriving detainee." See ICE PBNDS 2011 (Revised 2016), Standard, Admission and Release, Section (V)(E).

⁸ "The post officer shall require the visitor to print and sign his/her name in the visitor logbook." See ICE PBNDS 2011 (Revised 2016), Standard, Facility Security and Control, Section (V)(C)(1)(b)(3).

⁹ "The facility administrator, designated assistant facility administrator, supervisors and others designated by the facility administrator shall be required to visit all housing units weekly at minimum to observe living conditions and interact informally with detainees. Such visitors shall record their visits by initialing the housing unit log." See ICE PBNDS 2011 (Revised 2016), Standard, Facility Security and Control, Section (V)(D)(2).

¹⁰ "The facility administrator (or designee) shall: ...

2. Initial and date all other pages."

See ICE PBNDS 2011 (Revised 2016), Standard, Post Orders, Section (V)(C)(2).

STAFF-DETAINEE COMMUNICATION (SDC)

ODO interviewed an ERO New Orleans assistant field office director and found the facility contract detention processing officers accessed the secure ICE drop-box for detainees instead of only ERO New Orleans personnel (**Deficiency SDC-15**¹¹).

CARE

MEDICAL CARE (MC)

ODO reviewed █ detainee medical records and found in █ out of █ records, no documentation the 2 detainees gave their informed consent, neither verbally nor signed form, prior to facility medical staff administering medication for non-emergency treatment (**Deficiency MC-67**¹²).

ODO reviewed █ comprehensive health assessments and found the clinical medical authority (CMA) did not review █ out of █ health assessments to determine the priority of treatment (**Deficiency MC-140**¹³).

ODO reviewed █ detainee medical records and found in █ out of █ records, no documentation the 2 detainees gave their informed consent for the provision of health care services (**Deficiency MC-238**¹⁴).

ODO reviewed █ detainee medical records for detainees with prescribed psychotropic medications and found in █ out of █ records, no documentation the two detainees gave their informed consent, neither verbally nor signed form, prior to the administration of psychotropic medication (**Deficiency MC-241**¹⁵).

ACTIVITIES

CORRESPONDENCE AND OTHER MAIL (COM)

ODO reviewed the facility's COM policy, toured eight housing units, and found all units did not contain postings of the procedures for indigent detainees to request postage at government expense

¹¹ "The facility shall provide a secure drop-box for ICE detainees to correspond directly with ICE management. Only ICE personnel shall have access to the drop-box." See ICE PBNDS 2011 (Revised 2016), Standard, Staff-Detainee Communication, Section (V)(B).

¹² "Informed consent shall be obtained prior to providing treatment (absent medical emergencies)." See ICE PBNDS 2011 (Revised 2016), Standard, Medical Care, Section (V)(D).

¹³ "The CMA shall be responsible for review of all comprehensive health assessments to assess the priority for treatment." See ICE PBNDS 2011 (Revised 2016), Standard, Medical Care, Section (V)(M).

¹⁴ "Upon admission at the facility, documented informed consent shall be obtained for the provision of health care services." See ICE PBNDS 2011 (Revised 2016), Standard, Medical Care, Section (V)(AA)(1).

¹⁵ "Prior to the administration of psychotropic medications, a separate documented informed consent, that includes a description of the medication's side effects, shall be obtained." See ICE PBNDS 2011 (Revised 2016), Standard, Medical Care, Section (V)(AA)(4).

(Deficiency COM-8¹⁶).

ODO reviewed the facility detainee handbook and found the handbook did not include:

- Notification to detainees that general correspondence and other mail addressed to detainees shall be opened and inspected in a detainee’s presence unless the facility administrator authorizes inspection without the detainee’s presence for security **(Deficiency COM-16¹⁷)**;
- Notification that outgoing special correspondence or legal mail shall not be opened, inspected, nor read **(Deficiency COM-19¹⁸)**; and
- Notification that identity documents such as passports, birth certificates, etc., in a detainee’s possession are contraband and may be used by ICE/ERO as evidence against the detainee or for other purposes authorized by law **(Deficiency COM-22¹⁹)**.

ODO toured eight detainee housing units and found all units did not contain a complete posting of the facility’s COM rules **(Deficiency COM-27²⁰)**.

ODO reviewed the facility’s COM policy, interviewed the mail clerk, and found the facility confiscated incoming mail intended for a detainee but did not provide the detainee with a receipt **(Deficiency COM-71²¹)**.

¹⁶ “Each facility shall have written procedures that explain how indigent detainee can request postage at government expense. Such procedures shall also be posted in a common area where all detainees can view them.” *See* ICE PBNDS 2011 (Revised 2016), Standard, Correspondence and Other Mail, Section (V)(B).

¹⁷ “The facility shall notify detainees of its rules on correspondence and other mail through the detainee handbook, or supplement, provided to each detainee upon admittance. At a minimum, the notification shall specify: ...

3. That general correspondence and other mail addressed to detainees shall be opened and inspected in the detainee’s presence, unless the facility administrator authorizes inspection without the detainee’s presence for security.”

See ICE PBNDS 2011 (Revised 2016), Standard, Correspondence and Other Mail, Section (V)(C)(3).

¹⁸ “The facility shall notify detainees of its rules on correspondence and other mail through the detainee handbook, or supplement, provided to each detainee upon admittance. At a minimum, the notification shall specify: ...

5. That incoming special correspondence or legal mail may only be opened in the detainee’s presence, and may be inspected for contraband, but not read, and that outgoing special correspondence or legal mail shall not be opened, inspected or read.”

See ICE PBNDS 2011 (Revised 2016), Standard, Correspondence and Other Mail, Section (V)(C)(5).

¹⁹ “The facility shall notify detainees of its rules on correspondence and other mail through the detainee handbook, or supplement, provided to each detainee upon admittance. At a minimum, the notification shall specify: ...

8. That identity documents, such as passports, birth certificates, etc., in a detainee’s possession are contraband and may be used by ICE/ERO as evidence against the detainee or for other purposes authorized by law (however, upon request, the detainee shall be provided a copy of each document, certified by an ICE/ERO officer to be a true and correct copy; the facility shall consult ICE/ERO with any and all requests for identity documents).”

See ICE PBNDS 2011 (Revised 2016), Standard, Correspondence and Other Mail, Section (V)(C)(8).

²⁰ “The rules notification shall be posted in each housing area.” *See* ICE PBNDS 2011 (Revised 2016), Standard, Correspondence and Other Mail, Section (V)(C).

²¹ “When incoming or outgoing mail is confiscated or withheld (in whole or in part), the detainee shall be notified and given a receipt.” *See* ICE PBNDS 2011 (Revised 2016), Standard, Correspondence and Other Mail, Section (V)(H).

ODO reviewed the facility's COM policy, interviewed the mail clerk, and found the facility rejected incoming mail intended for one detainee but they did not provide written notice to both the sender and the addressee, signed by the facility administrator, explaining why the facility rejected the mail (**Deficiency COM-81**²²).

ODO observed a facility officer remove an item from a detainee's mail and found the following deficiencies pertaining to the officer not making a written record:

- No written record with the detainee's name and non-citizen number (**Deficiency COM-84**²³);
- No written record with the name of the sender and recipient (**Deficiency COM-85**²⁴);
- No written record with the description of the mail in question (**Deficiency COM-86**²⁵);
- No written record with the description of the action taken and the reason for it (**Deficiency COM-87**²⁶);
- No written record with the disposition of the item nor the date of disposition (**Deficiency COM-88**²⁷); and
- No written record with the officer's signature (**Deficiency COM-89**²⁸).

ODO reviewed the facility's COM policy, interviewed the mail clerk, and found the facility confiscated a book the facility considered contraband from a detainee's incoming mail but did not maintain records for discovery and disposition of the contraband (**Deficiency COM-94**²⁹).

²² "Both sender and addressee shall be provided written notice, signed by the facility administrator, with explanation, when the facility rejects incoming or outgoing mail." See ICE PBNDS 2011 (Revised 2016), Standard, Correspondence and Other Mail, Section (V)(H).

²³ "When an officer finds an item that must be removed from a detainee's mail, he/she shall make a written record that includes:

1. The detainee's name and A-number."

See ICE PBNDS 2011 (Revised 2016), Standard, Correspondence and Other Mail, Section (V)(I)(1).

²⁴ "When an officer finds an item that must be removed from a detainee's mail, he/she shall make a written record that includes: ...

2. The name of the sender and recipient."

See ICE PBNDS 2011 (Revised 2016), Standard, Correspondence and Other Mail, Section (V)(I)(1).

²⁵ "When an officer finds an item that must be removed from a detainee's mail, he/she shall make a written record that includes: ...

3. A description of the mail in question."

See ICE PBNDS 2011 (Revised 2016), Standard, Correspondence and Other Mail, Section (V)(I)(1).

²⁶ "When an officer finds an item that must be removed from a detainee's mail, he/she shall make a written record that includes: ...

4. A description of the action taken and the reason for it."

See ICE PBNDS 2011 (Revised 2016), Standard, Correspondence and Other Mail, Section (V)(I)(1).

²⁷ "When an officer finds an item that must be removed from a detainee's mail, he/she shall make a written record that includes: ...

5. The disposition of the item and the date of disposition."

See ICE PBNDS 2011 (Revised 2016), Standard, Correspondence and Other Mail, Section (V)(I)(5).

²⁸ "When an officer finds an item that must be removed from a detainee's mail, he/she shall make a written record that includes: ...

6. The officer's signature."

See ICE PBNDS 2011 (Revised 2016), Standard, Correspondence and Other Mail, Section (V)(I)(6).

²⁹ "Prohibited items discovered in the mail shall be handled as follows: ...

TELEPHONE ACCESS (TA)

ODO reviewed telephone reports from September 28 to October 1, 2023, for detainee housing unit 7, and found housing officers reported inoperable telephones but did not immediately submit a work order for repair (**Deficiency TA-8**³⁰).

ODO toured eight detainee housing units and found in four out of eight units, no posted notice advising detainees all calls were subject to monitoring nor the procedure for obtaining an unmonitored call to a court or a legal representative for the purposes of obtaining legal representation (**Deficiency TA-20**³¹).

Corrective Action: Prior to the conclusion of the inspection, the facility initiated corrective action. ODO confirmed on November 2, 2023, the facility posted notices on the telephones in the housing units, advising detainees of monitored calls and procedures for obtaining unmonitored calls (**C-1**).

ODO toured eight detainee housing units and found in four out of eight units, no posted notice in Spanish, advising detainees all calls were subject to monitoring (**Deficiency TA-21**³²).

Corrective Action: Prior to the conclusion of the inspection, the facility initiated corrective action. ODO confirmed on November 2, 2023, the facility posted notices in Spanish on telephones in the housing units, advising detainees of monitored calls and procedures for obtaining unmonitored calls (**C-2**).

ODO toured eight detainee housing units and found in seven out of eight units; the facility had not posted updated consulate lists in the units (**Deficiency TA-26**³³).

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4. The facility administrator shall ensure that facility records of the discovery and disposition of contraband are accurate and current.”

See ICE PBNDS 2011 (Revised 2016), Standard, Correspondence and Other Mail, Section (V)(I)(4).

³⁰ “Facility staff shall inspect the telephones daily, promptly report out-of-order telephones to the repair service so that required repairs are completed quickly.” See ICE PBNDS 2011 (Revised 2016), Standard, Telephone Access, Section (V)(A)(3).

³¹ “If telephone calls are monitored, the facility shall at each monitored telephone, place a notice that states the following:

- a. That detainee calls are subject to monitoring; and
- b. The procedure for obtaining an unmonitored call to a court, a legal representative or for the purposes of obtaining legal representation.”

See ICE PBNDS 2011 (Revised 2016), Standard, Telephone Access, Section (V)(B)(3)(a-b).

³² “ICE/ERO and the facility shall coordinate in posting the notice in Spanish and in the language of significant segments of the population with limited English proficiency, where practicable.” See ICE PBNDS 2011 (Revised 2016), Standard, Telephone Access, Section (V)(B).

³³ “Updated telephone and consulate lists shall be posted in detainee housing units.” See ICE PBNDS 2011 (Revised 2016), Standard, Telephone Access, Section (V)(C).

JUSTICE

GRIEVANCE SYSTEM (GS)

ODO reviewed the facility's grievance procedures and found detainee submitted grievances are routed through facility contract detention processing officers who then forward the grievances to ERO New Orleans. ODO noted this process could allow a contract officer to see a grievance submitted against them and lead to possible retaliation against the detainee who submitted the grievance. ODO cited this practice as an **Area of Concern**.

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 28 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 21 of those standards. ODO found 27 deficiencies in the remaining 7 standards. Since RCC's last full inspection in October 2022, the facility has trended upward. RCC went from 9 deficient standards and 35 deficiencies in October 2022 to 7 deficient standards and 27 deficiencies during this most recent full inspection. The Correspondence and Other Mail and the Telephone Access standards account for 18 out of 27 deficiencies and ODO did not inspect either of these standards during the previous full inspection. ODO received the uniform corrective action plan for ODO's last inspection of RCC in April 2023, which likely resolved the deficiencies ODO previously identified and contributed to the facility's improved performance. ODO recommends ERO New Orleans continue to work with the facility to resolve the 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	23	28
Deficient Standards	9	7
Overall Number of Deficiencies	35	27
Priority Component Deficiencies	0	0
Repeat Deficiencies	1	0
Areas Of Concern	0	1
Corrective Actions	1	2
Facility Rating	Good	Acceptable ³⁴

³⁴ ODO revised their rating system at the end of FY 2023, effective beginning in FY 2024, which adjusted the maximum number of deficiencies a facility can receive for ratings of "Superior" or "Good."