COMPLIANCE INSPECTION of the
RIVER CORRECTIONAL CENTER
Ferriday, Louisiana

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<th>Company</th>
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<td>Acting Team Lead</td>
<td>ODO</td>
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<tr>
<td>Inspections and Compliance Specialist</td>
<td>ODO</td>
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<td>Inspections and Compliance Specialist</td>
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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 River Correctional Center (RCC) in Ferriday, Louisiana, from November 2 to 4, 2021.¹ The facility opened in 2001, and is owned and operated by LaSalle Corrections. 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 ERO New Orleans (ERO New Orleans). Prior to ODO’s inspection, RCC executed a contract modification, changing the facility to a dedicated intergovernmental service agreement facility, and the facility now operates under the Performance-Based National Detention Standards (PBNDS) 2011 (Revised 2016).

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

<table>
<thead>
<tr>
<th>Capacity and Population Statistics</th>
<th>Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>ICE Bed Capacity²</td>
<td></td>
</tr>
<tr>
<td>Average ICE Population³</td>
<td></td>
</tr>
<tr>
<td>Adult Male Population (as of November 2, 2021)</td>
<td></td>
</tr>
<tr>
<td>Adult Female Population (as of November 2, 2021)</td>
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</tr>
</tbody>
</table>

During its last inspection, in Fiscal Year (FY) 2021, ODO found 1 deficiency in the following areas: Significant Self-Harm and Suicide Prevention and Intervention (1).

¹ This facility holds male detainees with low, medium-low, medium-high and high security classification levels for periods greater than 72 hours.
² Data Source: ERO Facility List as of September 27, 2021.
³ Ibid.
COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population greater than 10, and where detainees are housed for over 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.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 its 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 (PBNDS) 2011 (REVISED 2016) MAJOR CATEGORIES

<table>
<thead>
<tr>
<th>PBNDS 2011 (Revised 2016) Standards Inspected(^5,6)</th>
<th>Deficiencies</th>
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</thead>
<tbody>
<tr>
<td><strong>Part 1 - Safety</strong></td>
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<tr>
<td>Emergency Plans</td>
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<td>Environmental Health and Safety</td>
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<td><strong>Sub-Total</strong></td>
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<tr>
<td><strong>Part 2 - Security</strong></td>
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<td>Admission and Release</td>
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<td>Custody Classification System</td>
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<td>Funds and Personal Property</td>
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<td>Post Orders</td>
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<td>Searches of Detainees</td>
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<td>Special Management Units</td>
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<td>Use of Force and Restraints</td>
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<td><strong>Sub-Total</strong></td>
<td><strong>17</strong></td>
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<tr>
<td><strong>Part 4 - Care</strong></td>
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<td>Food Service</td>
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<td>Hunger Strikes</td>
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<tr>
<td>Medical Care</td>
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<td>Personal Hygiene</td>
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<td>Significant Self-harm and Suicide Prevention and Intervention</td>
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<td><strong>Sub-Total</strong></td>
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<tr>
<td><strong>Part 5 - Activities</strong></td>
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<td>Marriage Requests</td>
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<td>Voluntary Work Program</td>
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<td><strong>Sub-Total</strong></td>
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<td><strong>Part 6 - Justice</strong></td>
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<td>Legal Rights Group Presentations</td>
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<td><strong>Sub-Total</strong></td>
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<tr>
<td><strong>Part 7 - Administration and Management</strong></td>
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<td>Detention Files</td>
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<td>Detainee Transfers</td>
<td>7</td>
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<tr>
<td>Interview and Tours</td>
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</tbody>
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\(^5\) For greater detail on ODO’s findings, see the Compliance Inspection Findings section of this report.

\(^6\) 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.

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Office of Detention Oversight

River Correctional Center

November 2021

ERO New Orleans
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 concerns listed below.

Admission and Release: Two detainees stated they received an RCC detainee handbook in English during the intake process, but the detainee could not understand it since they speak Spanish.

- **Action Taken:** ODO interviewed RCC’s staff and reviewed the signed detainee acknowledgement forms, dated October 8, 2021, for receipt of the RCC detainee handbook and ICE National Detainee Handbook. On November 4, 2021, staff reissued the detainees both the RCC handbook and ICE National Detainee Handbook in Spanish.

Facility Security and Control: One detainee stated a group of Haitian detainees in his housing unit were causing trouble. The detainee stated the group kept other detainees up all night and controlled the remote to the TV. Additionally, the detainee stated the group had previously threatened him before and he asked the facility to move him to a single occupant cell, but not in segregation.

- **Action Taken:** ODO spoke with the RCC officer in charge of housing. On November 4, 2021, the officer met with the detainee to discuss his complaints and possible housing options, and the detainee decided to remain in his current housing unit. The facility indicated they would have night shift officers conduct more rounds throughout the housing unit to keep down the noise and monitor detainees.

Medical Care: One detainee stated he had not received a special shoe for his partially amputated left foot. The detainee stated he requested the shoe in July 2021, when he arrived at RCC.

- **Action Taken:** ODO reviewed the detainee’s medical record and spoke with the RCC health service administrator (HSA). There were no detainee complaints or requests in the chart for sick call nor visits to the RCC provider/nurse practitioner (NP). The detainee did have a disability accommodation ordered on July 12, 2021, for a bottom bunk due to his amputated foot. On November 3, 2021, the NP evaluated the detainee’s foot and ordered a supportive shoe. It arrived on the same day and facility medical staff gave the supportive shoe to the detainee.

Medical Care: One detainee stated he had a previous heart attack; however, he could not remember the date and almost had another one the week of October 25, 2021. He stated the RCC staff was slow to get him to the RCC doctor and he wanted medical staff to examine him because his heart still gave him pain. Additionally, the detainee stated he had been depressed in the past and the facility placed him on suicide watch but retracted his statement. ODO immediately advised the warden and the facility’s mental health department of the detainee’s complaint.
• **Action Taken:** ODO reviewed the detainee’s medical record. The staff noted no complaints of a heart issue or past heart attack during the detainee’s intake screening, from the detainee’s 14-day physical, nor on any of the detainee’s previous medical visits. All his complaints were for depression or a toothache. The facility’s medical staff placed the detainee on suicide watch twice, October 22-24, 2021, and on October 25-26, 2021. On November 2, 2021, the detainee discussed his cardiac history with the NP and then spoke with a mental health provider. On November 3, 2021, the staff reevaluated the detainee, and he stated that he felt fine. The staff prescribed medication to treat the detainee’s depression which he has been taking daily.

**Medical Care:** One detainee complained of ongoing stomach issues for the past 5 years. The detainee stated he had lost 25 pounds and is still losing weight. The detainee stated that he wanted to speak with the RCC doctor about his test results for a possible stomach infection after the doctor examined him on November 1, 2021.

• **Action Taken:** ODO reviewed the detainee’s medical record and spoke with facility medical staff. The RCC NP examined the detainee on November 1, 2021, and ordered lab tests for a possible stomach infection. On November 8, 2021, the NP evaluated the detainee for a follow-up appointment and provided him with his lab results, which were negative. On November 18, 2021, the medical staff examined the detainee for continued stomach pain and ordered an abdominal ultrasound. The staff prescribed the detainee Prilosec for heartburn and Colace for constipation, which the detainee is to use twice daily, and advised him to submit a sick call request if his stomach pain worsened. Additionally, the detainee’s medical record noted his weight of 132 pounds on September 21, 2021, and 124.8 pounds on November 1, 2021, for an actual weight loss of about 7 pounds.

**Staff-Detainee Communication:** Five detainees stated they would like to speak to an ICE officer about their cases.

• **Action Taken:** ODO advised the onsite supervisory deportation and detention officer of the detainees’ names and non-citizen numbers. On November 3, 2021, an ICE officer met with the five detainees to discuss their cases.

**Staff-Detainee Communication:** One detainee stated Haitian detainees in his housing unit were stealing personal identification numbers (PINs) to make telephone calls. He also stated that someone stole his PIN to call Haiti and he only calls Nicaragua.

• **Action Taken:** ODO spoke with the RCC lieutenant responsible for the telephones and found the detainee had requested a PIN change on November 1, 2021, which the facility granted. ODO was unable to confirm if someone used the detainee’s PIN to call Haiti.

**Telephone Access:** One detainee stated he was unable to call his family in Haiti. The detainee stated the telephone rings, but no one answers.

• **Action Taken:** ODO spoke with the RCC lieutenant responsible for the telephones and confirmed that a ringing phone indicates a call reached the intended number. The facility has no control over who answers the ringing phone. On November 3, 2021, the
RCC lieutenant and ERO New Orleans tested the phones and found them to be in working order.

**Telephone Access:** Two detainees stated calls were not going through to Nicaragua. The phone rings but nobody answers.

- **Action Taken:** ODO spoke with the RCC lieutenant responsible for the telephones and confirmed that a ringing phone indicates a call reached the intended number. The facility has no control over who answers the ringing phone. On November 3, 2021, the RCC lieutenant and ERO New Orleans tested the phones and found them to be in working order.

**COMPLIANCE INSPECTION FINDINGS**

**SAFETY**

**EMERGENCY PLANS (EP)**

ODO reviewed RCC's Bomb Threat Emergency Plan, interviewed the RCC chief of security, and found the emergency plan does not direct staff to consider mail suspect for the following: any letter or package containing oily/greasy stains/discholoration, an incorrect title/department for the addressee, the addressee's name misspelled, disproportionate weight of the envelope or box, nor for the letter/package having no return address (Deficiency EP-1407).

ODO reviewed RCC's Bomb Threat Emergency Plan, interviewed the RCC chief of security, and found the plan did not specify that upon receipt of a written threat, staff members shall treat the paper or other means of communication as they would any other criminal evidence, preventing unauthorized handling of the material and saving all material associated with the delivery (e.g., envelope, wrapping) (Deficiency EP-1418).

ODO reviewed RCC's Environmental Hazard Emergency Plan, interviewed the RCC chief of security, and found RCC has not designated an officer to supervise a detainee crew to seal off specified areas in a timely manner (Deficiency EP-1589).

7 "The facility administrator shall instruct staff to consider suspect any letter or package with:
   a) oily/greasy stains/discoloration;
   b) an incorrect title/department for the addressee;
   c) the addressee’s name misspelled;
   d) disproportionate weight relative to the size of the envelope or box; and/or:
   e) no return address."


8 "Upon receipt of a written threat, staff shall treat the paper or other means of communication as they would any other criminal evidence, preventing unauthorized handling of the material and saving all material associated with the delivery (e.g., envelope, wrapping).” See ICE PBNDS 2011 (Revised 2016), Standard, Emergency Plans, Section (V)(E)(7)(a)(3).

9 "The facility administrator shall designate an officer to supervise a detainee crew, which shall seal off specified area(s) in a timely manner.” See ICE PBNDS 2011 (Revised 2016), Standard, Emergency Plans, Section (V)(E)(10)(b)(1).
ODO interviewed the RCC chief of security, reviewed RCC's Environmental Hazard Emergency Plan, and found facility staff and detainees did not receive necessary training as part of RCC’s emergency-preparedness training program (Deficiency EP-15910).

ODO reviewed RCC's Environmental Hazard Emergency Plan, interviewed the RCC chief of security, and found the plan did not specify how often and where specialized training shall occur (Deficiency EP-16011).

ODO reviewed RCC's Environmental Hazard Emergency Plan, interviewed the RCC chief of security, and found the plan did not specify the number of employees and detainees to receive the training (Deficiency EP-16112).

ODO reviewed RCC Environmental Hazard Emergency Plan, interviewed the RCC chief of security, and found the plan did not prohibit detainees from taking personal property, except for prescribed medicine, into safe harbor areas (Deficiency EP-16513).

ODO reviewed RCC’s Evacuation Emergency Plan, interviewed the RCC chief of security and found the plan did not factor in all variables and combinations of variables that may precipitate or affect a mass evacuation, such as the following contingencies and their repercussions:

- Minimal warning/preparation time;
- Weather-related complications (e.g., tornadoes, hurricanes, blizzards);
- An area-wide disaster that would limit facility access to state and local emergency services (e.g., police, fire department, hospitals, military, etc.) and transportation providers; and
- Failure of at least 10 percent of staff to respond when recalled (Deficiency EP-17014).

ODO reviewed RCC's Evacuation Emergency Plan, interviewed the RCC chief of security and found the plan did not include how to:

- Identify and prepare a list of suppliers to provide essential goods and materials during the emergency;
- Prepare an alternative list, identifying product substitutions and alternate suppliers; and

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12 "The plan shall specify the number of employees and detainees to receive the training." See ICE PBNDS 2011 (Revised 2016), Standard, Emergency Plans, Section (V)(E)(10)(b)(1)(c).

13 "Detainees may take no personal property, with the exception of prescribed medicine, into safe harbor areas." See ICE PBNDS 2011 (Revised 2016), Standard, Emergency Plans, Section (V)(E)(10)(b)(5).

14 "The facility’s plan shall factor in all variables, and combinations of variables, that may precipitate or affect a mass evacuation, such as the following contingencies and their repercussions:

1) minimal warning/preparation time;
2) weather-related complications (e.g., tornadoes, hurricanes, blizzards);
3) an area-wide disaster that would limit facility access to state and local emergency services (e.g., police, fire department, hospitals, military, etc.) and transportation providers; and
• Assign priorities among the essentials listed, recognizing shortages likely to occur during an area-wide emergency (Deficiency EP-171 15).

ODO reviewed RCC’s Evacuation Emergency Plan, interviewed the RCC chief of security, and found the facility did not have signed contracts, agreements, and/or commitments for transportation and supplies as needed if federal and other public-sector resources are unavailable (Deficiency EP-172 16).

ENVIRONMENTAL HEALTH AND SAFETY (EHS)

ODO inspected RCC’s eight detainee housing units and found RCC did not maintain environmental health conditions to recognized hygiene standards, including those from the American Correctional Association (ACA) for detainee-to-toilet, shower, and washbasin ratios (Deficiency EHS-1 17).

ODO reviewed RCC’s posted housekeeping plan and noted the plan did not provide the cleaning schedule, indicating areas that required daily or weekly cleaning. Specifically, the posted housekeeping plan stated that, “cleaning should be completed by 7:30 a.m.” However, ODO inspected four housing units at 8:45 a.m. and found the facility had not completed any cleaning in four out of four housing units (Deficiency EHS-7 18).

ODO inspected RCC housing units and found the sanitation of the living and shower areas to be unsatisfactory. Specifically, empty shampoo and beverage bottles, bags, and bars of used soap littered the shower floor, and a mixture of blanket fibers and hair covered the drains in multiple housing units. Additionally, ODO noted peeling paint in several showers. Furthermore, RCC’s posted housekeeping plans did not specify daily cleaning details and no follow-up by staff to ensure workers cleaned the housing units to standard (Deficiency EHS-11 19).

15 “For every evacuation scenario, the plan shall:
1) identify and prepare a list of suppliers to provide essential goods and materials during the emergency;
2) prepare an alternative list, identifying product substitutions and alternate suppliers; and
3) assign priorities among the essentials listed, recognizing shortages likely to occur during an area-wide emergency.”
16 “The facility administrator shall secure as many signed contracts, agreements and commitments for transportation and supplies as needed in the event that federal and other public-sector resources are unavailable.” See ICE PBNDS 2011 (Revised 2016), Standard, Emergency Plans, Section (V)(E)(12)(c).
17 "Environmental health conditions shall be maintained at a level that meets recognized standards of hygiene, including those from the:
a. American Correctional Association."
18 "Detainee living area safety shall be emphasized to staff and detainees to include providing, as noted in the standards, a housekeeping plan.” See ICE PBNDS 2011 (Revised 2016), Standard, Environmental Health and Safety, Section (V)(A)(2).
19 “The facility administrator shall ensure that staff and detainees maintain a high standard of facility sanitation and general cleanliness.” See ICE PBNDS 2011 (Revised 2016), Standard, Environmental Health and Safety, Section (V)(A)(3).
ODO inspected multiple housing units and found the facility had not cleaned horizontal surfaces with an approved germicidal solution (Deficiency EHS-13\(^20\)).

ODO inspected multiple housing units and found dirty window frames. Further review of the housekeeping plan found it did not provide for weekly cleaning of the frames or windowsills (Deficiency EHS-14\(^21\)).

ODO inspected multiple housing units and found unclean dining tables and microwaves. Specifically, the dining tables were sticky from spilled beverages and food, and the microwave ovens contained residue from previously heated food (Deficiency EHS-15\(^22\)).

ODO inspected multiple housing units and found workers had previously mopped the floors; however, beverage containers were leaking juice on the floor and the floors required additional cleaning (Deficiency EHS-16\(^23\)).

ODO inspected the hair care tools and found them to be unsanitary. Specifically, hair and oil were on the clippers, clipper guards, and inside the clipper storage box (Deficiency EHS-212\(^24\)).

**SECURITY**

**ADMISSION AND RELEASE (AR)**

ODO reviewed the training records for RCC staff assigned to admissions duties, interviewed the intake lieutenant and compliance coordinator, and found staff assigned to admission duties did not complete RCC admission process training (Deficiency AR-10\(^25\)).

ODO reviewed LaSalle Corrections’ Admission and Release procedures and policy, detainee detention files, and interviewed the RCC intake lieutenant, and found missing, incomplete or inaccurate Order to Detain or Order to Release forms (Forms I-203), in out of detainee detention files reviewed. Specifically, five files were missing a Form I-203 and one file contained a Form I-203 with no authorizing signature (Deficiency AR-54\(^26\)).

\(^{20}\) “All horizontal surfaces shall be damp-dusted daily with an approved germicidal solution used according to the manufacturer’s directions.” See ICE PBNDS 2011 (Revised 2016), Standard, Environmental Health and Safety, Section (V)(A)(3)(a).


\(^{22}\) “Furniture and fixtures shall be cleaned daily.” See ICE PBNDS 2011 (Revised 2016), Standard, Environmental Health and Safety, Section (V)(A)(3)(c).

\(^{23}\) “Floors shall be mopped daily and when soiled, using the double-bucket mopping technique and with a hospital disinfectant-detergent solution mixed according to the manufacturer’s directions.” See ICE PBNDS 2011 (Revised 2016), Standard, Environmental Health and Safety, Section (V)(A)(3)(d).

\(^{24}\) “After each detainee visit, all hair care tools that come into contact with the detainee shall be cleaned and effectively disinfected.” See ICE PBNDS 2011 (Revised 2016), Standard, Environmental Health and Safety, Section (V)(E)(3).

\(^{25}\) “Staff members shall be provided with adequate training on the admissions process at the facility.” See ICE PBNDS 2011 (Revised 2016), Standard, Admission and Release, Section (V)(B)(1).

\(^{26}\) “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).
ODO interviewed an RCC lieutenant, reviewed detainee detention files of released detainees, and found 20 out of 200 files did not contain a Form I-203, signed by an authorizing official before the detainee’s release, removal, or transfer from RCC (Deficiency AR-80).  

ODO interviewed the RCC intake lieutenant, reviewed 200 detainee detention files of released detainees, and found only the pink copy of the Property Receipt Form (Form G-589) in the detainees’ detention files (Deficiency AR-98).  

Funds and Personal Property (FPP)  

ODO reviewed RCC’s property storage, interviewed the RCC intake lieutenant, and found the facility secured detainee property storage bags with string and not in a tamper-resistant manner (Deficiency FPP-84).  

ODO reviewed the property inventory forms in 200 detainee detention files, interviewed the RCC intake lieutenant, and found the property inventory forms in all 200 files did not contain the detainee’s time of admission to RCC (Deficiency FPP-85).  

ODO reviewed the Baggage Check forms (Forms I-77) attached to 200 detainee property bags, interviewed the RCC intake lieutenant, and found Form I-77 on all 200 detainee property bags did not contain the detainees’ signatures (Deficiency FPP-93).  

ODO reviewed the center part of the Form I-77 of 200 detainee property bags, interviewed the RCC intake lieutenant, and found the Form I-77 on all 200 detainee property bags did not contain a brief description of the property containers, nor was it attached to the detainees’ detention files (Deficiency FPP-95).  

ODO reviewed 200 detainee property bags, interviewed the RCC intake lieutenant, and found the bottom part of the Form I-77 on all 200 bags was still intact and not given to the detainees, nor did the reverse side contain a brief description of the property containers (Deficiency FPP-96).  

ODO reviewed 200 detainee property bags and found the facility had not secured all 200 detainee property bags in a tamper-resistant manner. Specifically, RCC secured their detainee property bags — 200 times.  

28 “The facility shall retain all three copies (blue, pink and white) of the closed-out G-589 in the detainee’s detention file.” See ICE PBND 2011 (Revised 2016), Standard, Admission and Release, Section (V)(H)(11).  
29 “All detainee luggage and facility containers used for storing detainee personal property shall be secured in a tamper-resistant manner.” See ICE PBND 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(I).  
30 “The personal property inventory form must contain the following information at a minimum: time of admission.” See ICE PBND 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(I)(1).  
31 “The detainee’s signature must appear on both the top (Part I) and bottom (Part III) of the Form I-77 or its equivalent.” See ICE PBND 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(I)(2).  
32 “The center part shall provide a brief description of the property container (for example, black suitcase, paper bag, etc.) and shall be attached to the detainee’s booking card or detention file.” See ICE PBND 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(I)(4).  
33 “The bottom part shall be given to the detainee and the reverse side shall also contain a brief description of the property container.” See ICE PBND 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(I)(5).
bags with a black string (Deficiency FPP-97\textsuperscript{34}).

ODO reviewed the RCC property logbook, interviewed the RCC intake lieutenant, and found the logbook did not contain the Form I-77 number, security tie-strap number, nor a description of the property (Deficiency FPP-98\textsuperscript{35}).

ODO reviewed released detainees detention files, reviewed the property storage area, interviewed the RCC intake lieutenant, and found detainees did not present their copy of Form I-77 during the release process. Specifically, a review of the property storage area indicated the three parts of the Form I-77 were intact on the property bags and the facility did not provide a copy of the Form I-77 to the detainees (Deficiency FPP-127\textsuperscript{36}).

ODO reviewed the Form I-77 attached to detainees property bags, interviewed the RCC intake lieutenant, and found Form I-77 on all detainees property bags did not contain the detainees' signatures (Deficiency FPP-129\textsuperscript{37}).

SEARCHES OF DETAINEES (SD)

ODO interviewed an RCC major and facility medical staff and found the facility does not require detainees provide a urine sample within 2 hours of the facility placing detainees in close observation status (Deficiency SD-84\textsuperscript{38}).

ODO interviewed an RCC major and facility medical staff and found the facility does not require detainees provide a second urine sample prior to the facility releasing the detainees from close observation status (Deficiency SD-85\textsuperscript{39}).

USE OF FORCE AND RESTRAINTS (UOFR)

ODO interviewed the RCC chief of security and found RCC did not have documentation showing the facility trained and certified staff in the use of an intermediate force device that the facility authorized the staff to use (Deficiency UOFR-27\textsuperscript{40}).

\textsuperscript{34} "All detainee luggage and facility containers used for storing detainee personal property shall be secured in a tamper-resistant manner." \textit{See} ICE PBNDS 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(I).

\textsuperscript{35} "A logbook shall be maintained listing I-77 number, security tie-strap number and property description." \textit{See} ICE PBNDS 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(I).

\textsuperscript{36} "After checking the I-385 Form or equivalent, the detainee shall present the white copy of both the G-589 Form(s) and I-77 Form(s) or equivalents for all received property." \textit{See} ICE PBNDS 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(K).

\textsuperscript{37} "For each I-77 presented, staff shall compare the signature on the detainee’s portion with the portion on the stored item and the portion on the booking card." \textit{See} ICE PBNDS 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(K).

\textsuperscript{38} "For the detainee’s safety, he/she shall be required to provide a urine sample within two hours of placement under close observation." \textit{See} ICE PBNDS 2011 (Revised 2016), Standard, Searches of Detainees, Section (V)(E)(4)(a).

\textsuperscript{39} "A second urine sample shall be required prior to releasing the detainee from close observation." \textit{See} ICE PBNDS 2011 (Revised 2016), Standard, Searches of Detainees, Section (V)(E)(4)(a).

\textsuperscript{40} "Any officer who is authorized to use an intermediate force device shall be specifically trained and certified to use that device." \textit{See} ICE PBNDS 2011 (Revised 2016), Standard, Use of Force and Restraints, Section (V)(D)(2).
ODO interviewed the RCC chief of security and found RCC did not maintain certification documentation for an intermediate force device that the facility authorized the staff to use (Deficiency UOFR-32 41).

CARE

FOOD SERVICE (FS)

ODO interviewed the RCC kitchen supervisor and found she had no food service management experience prior to her assignment as kitchen supervisor (Deficiency FS-1 42).

ODO interviewed the RCC kitchen supervisor, inspected the detainee housing units, and observed staff did not prevent detainees from leaving the food service department with food items. Specifically, ODO observed several Styrofoam trays in the housing units with meals removed from the kitchen by detainee kitchen workers without permission from staff (Deficiency FS-44 43).

ODO interviewed the RCC kitchen supervisor, reviewed detainee job descriptions, and found the facility’s kitchen supervisor did not review detainee job descriptions on an annual basis (Deficiency FS-53 44).

ODO observed staff thawing potentially hazardous food in an improper manner. Specifically, staff placed tubes of ground chicken in running hot water instead of submerged in running water at a temperature of 70 degrees F or below (Deficiency FS-149 45).

ODO observed staff obtaining food temperatures prior to placement on the serving line and all temperatures met the requirements of the standard when served and transported from the kitchen; however, ODO observed detainees placing their meal trays in their bunk drawers, which are not temperature controlled, to eat later (Deficiency FS-260 46).

ODO reviewed detainee records and found the RCC medical staff pre-screened and approved records for work details in the kitchen; however, the medical staff did not provide ODO with any documentation verifying food service personnel had received pre-employment medical

41 "The employee must also maintain certification." See ICE PBNDS 2011 (Revised 2016), Standard, Use of Force and Restraints, Section (V)(D)(2).
42 "The food service program shall be under the direct supervision of an experienced food service administrator (FSA)." See ICE PBNDS 2011 (Revised 2016), Standard, Food Service, Section (V)(A)(1)(a).
43 "Unless otherwise directed by facility policy or special instructions, staff shall prevent detainees from leaving the food service department with any food item." See ICE PBNDS 2011 (Revised 2016), Standard, Food Service, Section (V)(B)(5).
44 "The FSA shall review detainee job descriptions annually to ensure accuracy and specific requirements." See ICE PBNDS 2011 (Revised 2016), Standard, Food Service, Section (V)(C)(2).
45 "Potentially hazardous food shall be thawed according to one of the following procedures:
   b. submerged in running water;
      1) at a water temperature of 70 F degrees or below;"
46 "Foods shall be kept sufficiently hot or cold to arrest or destroy the growth of infectious organisms." See ICE PBNDS 2011 (Revised 2016), Standard, Food Service, Section (V)(I)(1).
examinations prior to placement in the kitchen (Deficiency FS-306\textsuperscript{47}).

ODO inspected the detainee restroom in the kitchen area and found the facility did not maintain the toilet to appropriate sanitation levels. Specifically, the toilet was not clean and had excessive unsanitary buildup on it (Deficiency FS-380\textsuperscript{48}).

**MEDICAL CARE (MC)**

ODO interviewed the RCC director of nursing and the HSA and found the facility lacked accreditation with the National Commission on Correctional Health Care (NCCHC) (Deficiency MC-10\textsuperscript{49}). ODO notes NCCHC scheduled the facility for an NCCHC evaluation to occur in January 2022.

**PERSONAL HYGIENE (PH)**

ODO observed RCC provided toilets 24 hours per day that could be used without staff assistance when detainees are confined to their cells or sleeping areas; however, the population counts in multiple housing units did not comply with ACA Expected Practice 4-ALDF-4B-08, requiring toilets be provided at a minimum ratio of 1 for every 12 male detainees with urinals substituted for up to one-half of the toilets (Deficiency PH-32\textsuperscript{50}).

ODO observed RCC provided washbasins with temperature controlled hot and cold running water 24 hours per day; however, the population counts in multiple housing units did not comply with ACA Expected Practice 4-ALDF-4B-08, requiring a minimum ratio of 1 washbasin for every 12 detainees (Deficiency PH-37\textsuperscript{51}).

ODO observed the facility’s detainee housing unit showers are thermostatically controlled to temperatures between 100-120 degrees F; however, the population counts in multiple housing units did not comply with ACA Expected Practice 4-ALDF-4B-09, requiring a minimum ratio of 1

\textsuperscript{47} "All food service personnel, including staff and detainees, shall receive a preemployment medical examination noting the importance of identifying those communicable diseases more likely to be found in the immigrant population." See ICE PBNDs 2011 (Revised 2016), Standard, Food Service, Section (V)(J)(3).

\textsuperscript{48} "Toilet fixtures shall be of sanitary design and readily cleaned." See ICE PBNDs 2011 (Revised 2016), Standard, Food Service, Section (V)(J)(9)(a).

\textsuperscript{49} "Does the medical clinic within the detention facility achieve and maintain current accreditation with the National Commission on Correctional Health Care (NCCHC), and maintain compliance with those standards?" See ICE PBNDs 2011 (Revised 2016), Standard, Medical Care, Section (II)(1).

\textsuperscript{50} "Detainees shall be provided:

1. an adequate number of toilets, 24 hours per day, which can be used without staff assistance when detainees are confined to their cells or sleeping areas. ACA Expected Practice 4-ALDF-4B-08 requires that toilets be provided at a minimum ratio of one for every 12 male detainees or one for every 8 female detainees. For males, urinals may be substituted for up to one-half of the toilets. All housing units with three or more detainees must have at least two toilets." See ICE PBNDs 2011 (Revised 2016), Standard, Personal Hygiene, Section (V)(E)(1).

\textsuperscript{51} "Detainees shall be provided:

2. an adequate number of washbasins with temperature controlled hot and cold running water 24 hours per day. ACA Expected Practice 4-ALDF-4B-08 requires one washbasin for every 12 detainees." See ICE PBNDs 2011 (Revised 2016), Standard, Personal Hygiene, Section (V)(E)(2).
shower for every 12 detainees (Deficiency PH-39 52).

**ACTIVITIES**

**CORRESPONDENCE AND OTHER MAIL (COM)**

ODO reviewed the RCC detainee handbook and found it did not contain a notification to detainees informing them that the facility and ICE/ERO considers possession of identity documents as contraband and ICE/ERO may use this as evidence against them or for other purposes authorized by law (Deficiency COM-22 53).

**VOLUNTARY WORK PROGRAM (VWP)**

ODO reviewed detainee detention files for detainee volunteer workers and found detainee was working in the kitchen and did not have a voluntary work program agreement for the kitchen (Deficiency VWP-64 54).

**ADMINISTRATION AND MANAGEMENT**

**DETAINEE TRANSFERS (DT)**

ODO interviewed RCC staff, reviewed detainee detention files, and found RCC did not provide in writing to detainees, the name, address, and telephone number of the facility to which ERO New Orleans was transferring the detainees (Deficiency DT-12 55).

ODO interviewed the RCC staff, reviewed detainee detention files, and found RCC did not have the detainee acknowledge in writing he or she received the transfer destination information (Deficiency DT-13 56).

52 "Detainees shall be provided:

3. operable showers that are thermostatically controlled to temperatures between 100 and 120 F degrees, to ensure safety and promote hygienic practices. ACA Expected Practice 4-ALDF-4B-09 requires a minimum ratio of one shower for every 12 detainees.”

*See ICE PBNDS 2011 (Revised 2016), Standard, Personal Hygiene, Section (V)(E)(3).*

53 "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).*

54 “The voluntary work program agreement, which each detainee is required to sign prior to commencing each new assignment, shall be placed in the detainee’s detention file.” *See ICE PBNDS 2011 (Revised 2016), Standard, Voluntary Work Program, Section (V)(N)(2).*

55 “At the time of the transfer, the sending facility shall provide the detainee, in writing, the name, address, and telephone number of the facility to which he or she is being transferred, using the attached Detainee Transfer Notification Form” *See ICE PBNDS 2011 (Revised 2016), Standard, Detainee Transfers, Section (V)(B)(2)(b).*

56 “The sending facility shall ensure that the detainee acknowledges, in writing, that:

1) he or she has received the transfer destination information.”

*See ICE PBNDS 2011 (Revised 2016), Standard, Detainee Transfers, Section (V)(B)(2)(c)(1).*
ODO interviewed RCC staff, reviewed detainee detention files, and found RCC did not have the detainee acknowledge in writing, he or she received information advising the detainee it is his or her responsibility to notify family members upon admission into the receiving facility (Deficiency DT-14).  

ODO interviewed RCC staff, reviewed detainee detention files, and found RCC did not have the detainee acknowledge in writing, he or she may place a domestic phone call, at no expense to the detainee, upon admission into the receiving facility (Deficiency DT-15).

ODO interviewed RCC staff, reviewed detainee detention files, and found the facility did not place a detainee transfer notification form in the detainees’ detention files (Deficiency DT-16).

ODO interviewed RCC staff, reviewed detainee detention files, and found the detainees nor RCC staff signed documentation indicating the facility offered a detainee a 3-minute phone to the detainees (Deficiency DT-70).

ODO interviewed RCC staff, reviewed detainee detention files, and found out of 25 detainee detention files lacked documentation that the facility offered the detainees a 3-minute phone call (Deficiency DT-71).

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 11 of those standards. ODO found 55 deficiencies in the remaining 12 standards. ODO commends RCC staff for its responsiveness during this inspection. ODO recommends ERO New Orleans work with RCC 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 June 24, 2021.

57 “The sending facility shall ensure that the detainee acknowledges, in writing, that:

2) it is his or her responsibility to notify family members if so desired, upon admission into the receiving facility.”


58 “The sending facility shall ensure that the detainee acknowledges, in writing, that:

3) he or she may place a domestic phone call, at no expense to the detainee, upon admission into the receiving facility.”


60 “The offer to make a domestic call, as referenced above, will be documented and signed by processing staff and by the detainee.” See ICE PBNDS 2011 (Revised 2016), Standard, Detainee Transfers, Section (V)(F)(2).

61 “A copy of the documentation verifying that a detainee was offered a three-minute phone call will be filed in the detainee’s detention folder.” See ICE PBNDS 2011 (Revised 2016), Standard, Detainee Transfers, Section (V)(F)(2).
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