



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
Compliance Inspection**

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

**Winn Correctional Center
Winnfield, Louisiana**

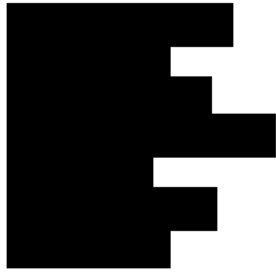
March 7-10, 2022

COMPLIANCE INSPECTION
of the
WINN CORRECTIONAL CENTER
Winnfield, Louisiana

TABLE OF CONTENTS

FACILITY OVERVIEW	4
COMPLIANCE INSPECTION PROCESS	5
FINDINGS BY PERFORMANCE-BASED NATIONAL DETENTION STANDARDS 2011 (2013 ERRATA) MAJOR CATEGORIES.....	6
DETAINEE RELATIONS	7
COMPLIANCE INSPECTION FINDINGS	7
SAFETY.....	7
Environmental Health and Safety	7
CARE	8
Personal Hygiene	8
ACTIVITIES	8
Correspondence and Other Mail	8
CONCLUSION	9

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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 Winn Correctional Center (WCC) in Winnfield, Louisiana, from March 7 to 10, 2022.¹ The facility opened in 1990 and is owned by the Louisiana Department of Corrections and operated by LaSalle Management. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at WCC 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 (2013 Errata).

ERO has assigned deportation officers to the facility. A warden handles daily facility operations and manages support personnel. LaSalle Management provides food services, Correct Med provides medical care, and Correct Commissary provides commissary services at the facility. The facility does not hold any accreditations from outside entities. In July 2018, WCC was audited for the Department of Justice (DOJ) Prison Rape Elimination Act (PREA) and was DOJ PREA certified.

Capacity and Population Statistics	Quantity
ICE Bed Capacity ²	
Average ICE Population ³	
Adult Male Population (as of March 7, 2022)	
Adult Female Population (as of March 7, 2022)	

During its last inspection, in Fiscal Year (FY) 2021, ODO found 23 deficiencies in the following areas: Admission and Release (1); Environmental Health and Safety (4); Food Service (12); Staff-Detainee Communication (2); and Post Orders (4).

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 March 7, 2022.

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.

ODO was unable to conduct an on-site inspection of this facility, as a result of the COVID-19 pandemic, and instead, conducted a remote inspection of the facility. During this remote inspection, ODO interviewed facility staff, ERO field office staff, and detainees, reviewed files and detention records, and was able to assess compliance for at least 90 percent or more of the ICE national detention standards reviewed during the inspection.

⁴ ODO reviews the facility’s compliance with selected standards in their entirety.

FINDINGS BY PERFORMANCE-BASED NATIONAL DETENTION STANDARDS (PBNDS) 2011 (2013 ERRATA) MAJOR CATEGORIES

PBNDS 2011 (2013 Errata) Standards Inspected ^{5,6}	Deficiencies
Part 1 – Safety	
Emergency Plans	0
Environmental Health and Safety	4
Sub-Total	4
Part 2 – Security	
Admission and Release	0
Custody Classification System	0
Funds and Personal Property	0
Post Orders	0
Searches of Detainees	0
Sexual Abuse and Assault Prevention and Intervention	0
Special Management Units	0
Use of Force and Restraints	0
Sub-Total	0
Part 4 – Care	
Food Service	0
Hunger Strikes	0
Medical Care	0
Personal Hygiene	1
Significant Self-harm and Suicide Prevention and Intervention	0
Sub-Total	1
Part 5 - Activities	
Correspondence and Other Mail	3
Trips for Non-Medical Emergencies	0
Marriage Requests	0
Voluntary Work Program	0
Sub-Total	3
Part 6 - Justice	
Legal Rights Group Presentations	0
Sub-Total	0
Part 7 - Administration and Management	
Detention Files	0
Interview and Tours	0

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.

Detainee Transfers	0
Sub-Total	0
Total Deficiencies	8

DETAINEE RELATIONS

ODO interviewed 13 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. All detainees reported satisfaction with facility services. ODO conducted the detainee interviews via video teleconference.

COMPLIANCE INSPECTION FINDINGS

SAFETY

ENVIRONMENTAL HEALTH AND SAFETY (EHS)

ODO interviewed the facility's fire safety manager, reviewed 10 emergency power generator test logs, and found in all 10 logs, facility staff did not test emergency power generators for 1 hour. Specifically, facility staff tested the emergency power generators for 10 minutes. Additionally, facility staff did not inspect the oil, water, hoses, and belts for mechanical readiness to perform in emergency situations (**Deficiency EHS-26⁷**).

ODO interviewed the facility's fire safety manager, reviewed 10 power generator test logs, and found in all 10 logs, facility staff did not inspect power generators on a weekly basis. Specifically, facility staff inspected power generators every other week (**Deficiency EHS-27⁸**).

ODO interviewed the facility's fire safety manager, reviewed 20 fire drill reports, and found in 10 out of 20 reports, facility staff did not include nor time the emergency-key drills (**Deficiency EHS-111⁹**).

ODO interviewed the facility's fire safety manager, reviewed 20 fire drill reports, and found in 13 out of 20 reports, the facility's designated staff did not draw emergency keys to unlock 1 set of emergency exit doors not in daily use (**Deficiency EHS-112¹⁰**).

⁷ "At least every two weeks, emergency power generators shall be tested for one hour, and the oil, water, hoses and belts of these generators shall be inspected for mechanical readiness to perform in an emergency situation." See ICE PBNDS 2011 (2013 Errata), Standard, Environmental Health and Safety, Section (V)(A)(6).

⁸ "Power generators are to be inspected weekly and load-tested quarterly at a minimum, or in accordance with the manufacturer's recommendations and instruction manual." See ICE PBNDS 2011 (2013 Errata), Standard, Environmental Health and Safety, Section (V)(A)(6).

⁹ "Emergency-key drills shall be included in each fire drill, and timed." See ICE PBNDS 2011 (2013 Errata), Standard, Environmental Health and Safety, Section (V)(C)(4)(c).

¹⁰ "Emergency keys shall be drawn and used by the appropriate staff to unlock one set of emergency exit doors not in daily use." See ICE PBNDS 2011 (2013 Errata), Standard, Environmental Health and Safety, Section (V)(C)(4)(c).

CARE

PERSONAL HYGIENE (PH)

ODO reviewed 74 water temperature check log entries for washbasins and showers located in detainee housing units and found in 17 out of 74 entries, facility staff did not maintain water temperatures between 100 to 120 Fahrenheit degrees. Specifically, facility staff logged 16 water temperatures between 70 to 99 Fahrenheit degrees, and 1 water temperature of 121 Fahrenheit degrees (**Deficiency PH-27¹¹**).

ACTIVITIES

CORRESPONDENCE AND OTHER MAIL (COM)

ODO reviewed the facility's site-specific detainee handbook and found the handbook does not notify detainees how to obtain advance approval from the facility's administrator to send or receive packages (**Deficiency COM-20¹²**).

ODO reviewed the facility's site-specific detainee handbook and found the handbook does not notify detainees that ERO New Orleans may use identity documents such as passports, birth certificates, etc., found in a detainee's possession as evidence against the detainee or for other purposes authorized by law (**Deficiency COM-22¹³**).

ODO interviewed the facility's assistant warden, reviewed two incoming mail rejection notices, and found the facility's administrator did not sign the rejection notices sent to both the detainee and the addressee (**Deficiency COM-61¹⁴**).

¹¹ "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."

See ICE PBNDS 2011 (2013 Errata), Standard, Personal Hygiene, Section (V)(E)(3).

¹² "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: ...

6. Information regarding how to obtain such approval."

See ICE PBNDS 2011 (2013 Errata), Standard, Correspondence and Other Mail, Section (V)(C)(6).

¹³ "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 identify 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."

See ICE PBNDS 2011 (2013 Errata), Standard, Correspondence and Other Mail, Section (V)(C)(8).

¹⁴ "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 (2013 Errata), Standard, Correspondence and Other Mail, Section (V)(H).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 23 standards under PBNDS 2011 (2013 Errata) and found the facility in compliance with 20 of those standards. ODO found eight deficiencies in the remaining three 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 WCC on August 16, 2021.

Compliance Inspection Results Compared	Second FY 2021 (PBNDS 2011) (2013 Errata)	First FY 2022 (PBNDS 2011) (2013 Errata)
Standards Reviewed	15	23
Deficient Standards	5	3
Overall Number of Deficiencies	23	8
Repeat Deficiencies	3	0
Areas Of Concern	1	0
Corrective Actions	0	0
Facility Rating	N/A	Superior