



**U.S. Department of Homeland Security**  
U.S. Immigration and Customs Enforcement  
Office of Professional Responsibility  
ICE Inspections  
Washington, DC 20536-5501

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**Office of Detention Oversight  
Follow-Up Compliance Inspection**

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

**Winn Correctional Center  
Winnfield, Louisiana**

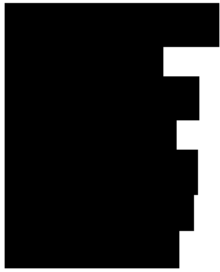
**August 23-25, 2022**

**FOLLOW-UP COMPLIANCE INSPECTION**  
**of the**  
**WINN CORRECTIONAL CENTER**  
Winnfield, Louisiana

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## FOLLOW-UP COMPLIANCE INSPECTION TEAM MEMBERS



Acting Team Lead	ODO
Inspections and Compliance Specialist	ODO
Inspections and Compliance Specialist	ODO
Contractor	Creative Corrections
Contractor	Creative Corrections
Contractor	Creative Corrections
Contractor	Creative Corrections

## 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 Winn Correctional Center (WCC) in Winnfield, Louisiana, from August 23 to 25, 2022.<sup>1</sup> This inspection focused on the standards found deficient during ODO's last inspection of WCC from March 7 to 10, 2022. The facility opened in 1990 and is owned by Louisiana Department of Corrections and operated by Lasalle Corrections. 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 (Revised 2016).

ERO has assigned deportation officers to the facility. A warden handles daily facility operations and manages █████ personnel. Correct Commissary provides food and commissary services, and Correct Med provides medical care at the facility. The facility does not hold any accreditations from any 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 <sup>2</sup>	████
Average ICE Population <sup>3</sup>	████
Adult Male Population (as of August 23, 2022)	████
Adult Female Population (as of August 23, 2022)	████

During its last inspection, in Fiscal Year (FY) 2022, ODO found eight deficiencies in the following areas: Correspondence and Other Mail (3); Environmental Health and Safety (4); and Personal Hygiene (1).

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<sup>1</sup> This facility holds male detainees with low, medium-low, medium-high, and high security classification levels for periods greater than 72 hours.

<sup>2</sup> Data Source: ERO Facility List as of August 15, 2022.

<sup>3</sup> *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 uniform corrective action plan (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**

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

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

<sup>5</sup> Beginning in FY 2022, ODO instituted a process of rotating all standards on a 3-year basis. As a result, some standard components may not be present in all standards.

## DETAINEE RELATIONS

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

*Medical Care:* One detainee stated he had a concern eating facility food since he has chronic stomach issues.

- Action Taken: ODO interviewed a facility licensed practical nurse (LPN) and confirmed medical staff examined the detainee and prescribed laxatives on June 27, 2022. On July 12, 2022, medical staff examined the detainee for a follow-up visit and extended the laxative prescription due to his continued complaint of constipation. On August 23, 2022, medical staff again continued the laxative prescription and scheduled the detainee for an appointment with an off-site gastroenterologist on December 19, 2022, to assess his chronic constipation. Medical staff also scheduled him for a follow-up appointment with the facility provider on August 30, 2022, and will submit the medical authorization request for the gastroenterology appointment to ERO New Orleans closer to the scheduled December date.

*Medical Care:* One detainee stated he stopped taking his medication for anxiety due to an allergic reaction.

- Action Taken: ODO interviewed a facility LPN and confirmed medical staff examined the detainee for his several complaints of anxiety, chest pain, fear of heights, the dark, and closed spaces. On August 9, 2022, the LPN demonstrated breathing exercises to the detainee to reduce his anxiety and referred him to a licensed clinical social worker (LCSW) for counseling. On August 10, 2022, the LCSW referred the detainee to the facility mental health provider for medication. On August 18, 2022, the mental health provider prescribed Vistaril for sleeping issues and depression, but the detainee refused the prescription and signed a refusal form on the same day. The detainee went back to sick call on August 18, 2022, for sleep issues, and medical staff issued him a sleep mask and earplugs. On August 20, 2022, the detainee returned to sick call for stress and anxiety, and medical staff scheduled him to meet with the LCSW. After a counseling appointment on August 20, 2022, the LCSW recommended medication, but the detainee again refused. Medical staff also ran three electrocardiogram tests on the detainee from August 27 to 28, 2022, and found no irregularities. The LPN continued to work with the detainee in finding an appropriate treatment plan.

*Medical Care:* One detainee stated his concerns with the medical staff for the delay in delivering his blood test results and no response to his sick call request for the burning feeling in his chest.

- Action Taken: ODO spoke with a facility LPN and confirmed a facility provider met with the detainee on August 24, 2022, and informed him of the normal test results. The LPN also stated the detainee refused his medication for hypertension, which the facility prescribed after evaluating the detainee for the burning feeling in his chest, and

provided ODO with the signed refusal form, dated July 18, 2022. After the inspection, ODO followed-up with the facility's health service administrator and she informed ODO the detainee started taking his medication for hypertension and facility medical staff also prescribed medication for acid reflux. Since the detainee has been on both medications, the detainee reported no further complaints.

*Medical Care:* One detainee stated his concern with difficulty sleeping.

- Action Taken: ODO spoke to a facility LPN and confirmed the detainee had not submitted a sick call request for difficulty sleeping, but staff escorted the detainee to the medical section where he received a sleep mask and earplugs on August 23, 2022. The LPN also met with the detainee to explain how to submit a sick call request at the facility.

*Staff-Detainee Communication:* One detainee requested information on his wife. He stated they were separated at the border on August 21, 2022.

- Action Taken: ODO contacted ERO New Orleans on the status of the detainee's spouse on August 23, 2022. ERO New Orleans contacted the detainee and confirmed his spouse's current location at the Calxico Station holding area. ERO New Orleans assured the detainee they would coordinate a telephone call with his spouse once she arrived at a detention facility. ODO followed up with the detainee and confirmed his satisfaction with the update on his spouse.

## FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

### SECURITY

#### SPECIAL MANAGEMENT UNITS (SMU)

ODO reviewed the detention files of █ detainees in administrative segregation and found in █ out of █ files, no date and time of release stated on the administrative segregation orders (**Deficiency SMU-42**<sup>6</sup>).

ODO reviewed the detention files of █ detainees in disciplinary segregation and found in █ out of █ files, no date and time of release stated on the disciplinary segregation orders (**Deficiency SMU-71**<sup>7</sup>).

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<sup>6</sup> "When the detainee is released from the SMU, the releasing officer shall indicate the date and time of release on the administrative segregation order." See ICE PBNDS 2011, Standard, Special Management Units, Section (V)(A)(2)(h).

<sup>7</sup> "When the detainee is released from the SMU, the releasing officer shall indicate the date and time of release on the disciplinary segregation order." See ICE PBNDS 2011, Standard, Special Management Units, Section (V)(B)(2)(c).



## **FACILITY SECURITY AND CONTROL (FSC)**

ODO reviewed the facility’s logs, interviewed the assistant warden, and found the maintenance supervisor and chief of security did not check the perimeter fence monthly, nor document the results in the shift supervisor’s daily log (**Deficiency FSC-114**<sup>8</sup>).

## **CARE**

### **PERSONAL HYGIENE (PH)**

ODO observed facility laundry operations and found detainees did not receive a daily change of socks and undergarments. Specifically, detainees received three pairs of socks and undergarments, with sock and undergarment laundry service only occurring on Tuesdays and Thursdays (**Deficiency PH-55**<sup>9</sup>).

## **CONCLUSION**

During this inspection, ODO assessed the facility’s compliance with 17 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 14 of those standards. ODO found four deficiencies in the remaining three standards. ODO commends WCC staff for its responsiveness during this inspection. ODO recommends ERO New Orleans work with WCC to resolve any deficiencies that remain outstanding in accordance with contractual obligations. ERO provided ODO with the UCAP for ODO’s last inspection of WCC on June 29, 2022.

<b>Compliance Inspection Results Compared</b>	<b>First FY 2022 (PBNDS 2011) (2013 Errata)</b>	<b>Second FY 2022 (PBNDS 2011) (Revised 2016)</b>
Standards Reviewed	23	17
Deficient Standards	3	3
Overall Number of Deficiencies	8	4
Repeat Deficiencies	0	0
Areas Of Concern	0	0
Corrective Actions	0	0
Facility Rating	Superior	N/A

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<sup>8</sup> “Perimeter inspections shall occur frequently, but at irregular times, as follows: ...

d. The facility maintenance supervisor and Chief of Security shall check the fence monthly, documenting the results in the shift supervisor’s daily log.”

See ICE PBNDS 2011, Standard, Facility Security and Control, Section (V)(F)(2)(d).

<sup>9</sup> “Detainees shall be provided with clean clothing, linen and towels on the following basis:

1. a daily change of socks and undergarments;”

See ICE PBNDS 2011, Standard, Personal Hygiene, Section (V)(H)(1).