



**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  
2023-002-116**

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

**Winn Correctional Center  
Winnfield, Louisiana**

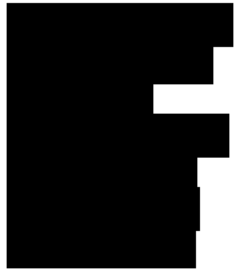
**July 18-20, 2023**

**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 July 18 to 20, 2023.<sup>1</sup> This inspection focused on the standards found deficient during ODO's last inspection of WCC from January 24 to 26, 2023. The facility opened in 1988 and is owned by 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 (Revised 2016).

[REDACTED] A warden handles daily facility operations and manages [REDACTED] support personnel. LaSalle Corporation provides food services and medical care, and Correct Commissary (Ruston, Louisiana) provides commissary services at the facility. The facility was accredited by the National Commission on Correctional Health Care in August 2022. 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>	[REDACTED]
Average ICE Population <sup>3</sup>	[REDACTED]
Adult Male Population (as of July 18, 2023)	[REDACTED]
Adult Female Population (as of July 18, 2023)	[REDACTED]

During its last inspection, in Fiscal Year (FY) 2023, ODO found 11 deficiencies in the following areas: Environmental Health and Safety (1); Food Service (5); Funds and Personal Property (2); Medical Care (2); and Significant Self-harm and Suicide Prevention and Intervention (1).

<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 July 17, 2023.

<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 may 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>PBNDS 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 Systems	2
Funds and Personal Property	0
Sexual Abuse and Assault Prevention and Intervention	0
Special Management Units	1
Use of Force and Restraints	0
<b>Sub-Total</b>	<b>3</b>
<b>Part 4 - Care</b>	
Food Service	0
Medical Care	0
Significant Self-harm and Suicide Prevention and Intervention	0
Terminal Illness, Advance Directives and Death	0
<b>Sub-Total</b>	<b>0</b>
<b>Part 5 - Activities</b>	
Correspondence and Other Mail	0
Recreation	0
Visitation	0
<b>Sub-Total</b>	<b>0</b>
<b>Part 6 - Justice</b>	
Detainee Handbook	0
<b>Sub-Total</b>	<b>0</b>
<b>Total Deficiencies</b>	<b>3</b>

<sup>4</sup> For greater detail on ODO's findings, see the *Follow-up Compliance 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 25 detainees, who each voluntarily agreed to participate. One detainee made an allegation of abuse. No other detainees made any allegations of discrimination, mistreatment, or abuse. Most detainees reported satisfaction with facility services except for the concerns listed below.

*Admission and Release:* One detainee stated two of his personal cell phones are missing from his personal property.

- Action Taken: ODO interviewed ERO New Orleans staff and the facility admissions officer (AO) and reviewed the detainee's detention file, detainee inventory intake sheet, dated, May 5, 2023, and a detainee property receipt, listing the detainee's two cell phones (a Note Ultra 20 and a blue Samsung A51). The WCC AO attempted to locate the recorded cell phones by first searching in the detainee's property bag. The AO notified ERO New Orleans staff of the lost property, and the facility began an official investigation to locate the missing devices. ERO New Orleans suggested the phones may have been lost during the back-and-forth shuttling of the detainee from WCC to the Alexandria International Airport (AEX). ERO New Orleans staff and WCC contacted AEX staff to review closed-circuit television (CCTV) footage during the detainee's time at the airport. ERO New Orleans staff stated they directed the facility warden to meet with the detainee to discuss possible reimbursement for his cell phones. On July 24, 2023, the facility AO notified ERO New Orleans staff of the facility's \$750 reimbursement to the detainee for his lost cell phones.

*Food Service:* Four detainees stated their dissatisfaction with the facility's food service.

- Action Taken: ODO interviewed the facility food service manager (FSM), observed facility food service (FS) operations, and reviewed the approved menu, postings, and overall FS program. ODO observed FS staff's use of measured serving utensils to ensure equal servings of all food items to detainees. ODO confirmed a licensed dietician evaluated and certified the daily nutritional value of the facility meal plan at 2,313 calories. Additionally, ODO reviewed the facility's food substitution lists to check for any deviation from equivalent food items. The FSM stated his staff serves rice and beans often, but only as side items. ODO also checked the delivery manifests for milk and confirmed no deliveries exceeded their expiration dates.

*Medical Care:* One detainee stated a facility provider diagnosed him with a throat ulcer, but the prescribed medication causes him to experience headaches.

- Action Taken: ODO interviewed the health service administrator (HSA), reviewed the detainee's medical file, and found a medical provider diagnosed laryngitis and initially prescribed steroids and antibiotics on May 8, 2023. The medical provider also prescribed loratadine (twice a day for 7 days), for his irritated throat. ODO noted no other sick call visits, and the HSA met with the detainee on July 19, 2023, at ODO's request. The detainee stated he did not take the prescription (loratadine) because he

thought it was Prednisone but the HSA educated the detainee on the loratadine and the detainee agreed to take the prescription as directed.

*Medical Care:* One detainee stated he has yet to see a dentist after submitting a sick call request on July 10, 2023.

- Action Taken: ODO interviewed the HSA, reviewed the detainee's medical file, and found the detainee had no documented sick call requests for a dental visit. The HSA stated detainees receive dental care only for emergencies and eligibility for dental cleanings requires 6 months in residence at WCC. At the request of ODO, the HSA met with the detainee to inform him of facility's dental policy, to discuss his dental concerns, and to schedule him for a dental cleaning.

*Recreation:* Four detainees stated their outdoor recreation was limited to 3 days for only 30 minutes.

- Action Taken: ODO interviewed the recreation officer (RO), reviewed the facility's recreation policy and schedule, and observed the indoor and outdoor recreation areas. ODO confirmed the facility routinely provides recreation for a minimum of 1-hour daily, indoor and/or outdoor, based on the weather conditions and facility scheduling. Due to recent weather, facility staff adjusted outdoor recreation to minimize injury as per facility handbook requirements. ODO confirmed the facility's adherence to the facility's policy by verifying the heat index exceeded 100 degrees Fahrenheit. At the request of ODO, the RO informed the detainees on the facility's recreation policy regarding inclement weather, and they acknowledged understanding.

*Staff-Detainee Communication:* One detainee stated an ICE DO verbally assaulted him and physically assaulted another detainee on separate occasions.

- Action Taken: ODO interviewed an ERO New Orleans acting AFOD and the facility warden, reviewed the detainees' detention files, CCTV footage, and the associated Special Investigation Report (SIR) regarding this incident. ERO New Orleans staff and the warden provided ODO copies of the incident reports, all confirming the facility and ERO New Orleans followed the proper chains of command in the reporting and filing of this incident. ERO New Orleans suspended the DO, pending the conclusion of an investigation of the allegation (OPR Joint Intake Center [JIC] case number 202304518).

*Use of Force and Restraints:* One detainee alleged an ERO New Orleans DO physically assaulted him.

- Action Taken: ODO interviewed ERO New Orleans staff and the facility warden and reviewed CCTV footage from the special management unit (SMU) incident, the facility's use of force and restraints incident report, and the associated significant incident report. ERO New Orleans staff and the warden provided ODO copies of the incident reports, all confirming the facility and ERO New Orleans followed the proper



chains of command in the reporting and filing of this incident. ERO New Orleans suspended the DO, pending the conclusion of an investigation of the allegation (OPR JIC case number 202311154).

## **FOLLOW-UP COMPLIANCE INSPECTION FINDINGS**

### **SECURITY**

#### **SPECIAL MANAGEMENT UNITS (SMU)**

ODO reviewed █ SMU activity record forms and found in █ out of █ forms, no signature of the officer conducting observations and activities on the record, only the officer's printed initials (**Deficiency SMU-99<sup>6</sup>**).

*Corrective Action:* Prior to the completion of this inspection, the facility initiated corrective action. The facility's assistant warden created and implemented a revised SMU observation and activities record form, in accordance with the standard, which included a signature line for the designated officer conducting SMU activities. WCC's warden approved the form for use, informed all dedicated WCC SMU staff of the changes, and provided documented training (**C-1**).

#### **CUSTODY CLASSIFICATION SYSTEM (CCS)**

ODO reviewed the facility's CCS program and found the facility did not ensure the housing of detainees according to their classification levels. Specifically, WCC housed █ high-security detainee with █ low-security detainees in Housing Unit Elm Delta-1 for 3 days (**Deficiency CCS-33<sup>7</sup>**).

ODO reviewed the facility's CCS program and found the facility comingled low-custody detainees with high-custody detainees. Specifically, WCC housed █ high-security detainee with █ low-security detainees in Housing Unit Elm Delta-1 for 3 days (**Deficiency CCS-37<sup>8</sup>**). **This is a priority component.**

### **CONCLUSION**

During this inspection, ODO assessed the facility's compliance with 16 standards under the PBNDS 2011 (Revised 2016) and found the facility in compliance with 14 of those standards. ODO found three deficiencies in the remaining two standards. Since WCC's last full inspection in January 2023, the facility has shown improvement. WCC went from 5 deficient standards and

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<sup>6</sup> "The special housing unit officer shall immediately record: ...

3. The officer that conducts the activity shall print his/her name and sign the record."

See ICE PBNDS 2011 (Revised 2016), Standard, Special Management Units, Section (V)(D)(3)(a)(3).

<sup>7</sup> "All facilities shall ensure that detainees are housed according to their classification levels." See ICE PBNDS 2011 (Revised 2016), Standard, Custody Classification System, Section (V)(F).

<sup>8</sup> "Low custody detainees may not be comingled with high custody detainees." See ICE PBNDS 2011 (Revised 2016), Standard, Custody Classification System, Section (V)(F)(1).

11 deficiencies to 2 deficient standards and 3 deficiencies during this most recent inspection. However, one of the deficiencies ODO cited during this follow-up inspection was a priority component deficiency in the CCS standard for co-mingling a high-security detainee with low-security detainees, and WCC did not previously have a deficiency in CCS. The facility’s improved performance and no repeat deficiencies was likely a result of the facility completing a UCAP for ODO’s inspection in January 2023. ODO recommends ERO New Orleans continue working with the facility to resolve any outstanding deficiencies in accordance with their contractual obligations.

<b>Compliance Inspection Results Compared</b>	<b>FY 2023 Full Inspection (PBNDS 2011) (Revised 2016)</b>	<b>FY 2023 Follow-Up Inspection (PBNDS 2011) (Revised 2016)</b>
Standards Reviewed	24	16
Deficient Standards	5	2
Overall Number of Deficiencies	11	3
Priority Component Deficiencies	2	1
Repeat Deficiencies	0	0
Areas Of Concern	0	0
Corrective Actions	1	1
Facility Rating	Good	N/A