

Office of Professional Responsibility

Jackson Parish Correctional Center Compliance Inspection 2025-001-007

December 10-12, 2024



U.S. Immigration
and Customs
Enforcement



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**Office of Detention Oversight
Compliance Inspection
2025-001-007**

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

**Jackson Parish Correctional Center
Jonesboro, Louisiana**

December 10-12, 2024

COMPLIANCE INSPECTION
of the
JACKSON PARISH CORRECTIONAL CENTER
Jonesboro, Louisiana

TABLE OF CONTENTS

FACILITY OVERVIEW	5
COMPLIANCE INSPECTION PROCESS	6
FINDINGS BY PERFORMANCE-BASED NATIONAL DETENTION STANDARDS 2011 (REVISED 2016) MAJOR CATEGORIES.....	7
DETAINEE RELATIONS	8
COMPLIANCE INSPECTION FINDINGS	8
SAFETY.....	8
TRANSPORTATION (BY LAND)	8
SECURITY	8
ADMISSION AND RELEASE	8
FUNDS AND PERSONAL PROPERTY.....	9
KEY AND LOCK CONTROL.....	9
TOOL CONTROL	10
USE OF FORCE AND RESTRAINTS	10
CARE	10
FOOD SERVICE	10
DISABILITY IDENTIFICATION, ASSESSMENT, AND ACCOMMODATION	11
ACTIVITIES	11
VISITATION.....	11
CONCLUSION	11

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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
Transportation (By Land)	2
Sub-Total	2
Part 2 - Security	
Admission and Release	4
Custody Classification System	0
Contraband	0
Funds and Personal Property	2
Hold Rooms in Detention Facilities	0
Key and Lock Control	5
Sexual Abuse and Assault Prevention and Intervention	0
Special Management Units	0
Staff-Detainee Communication	0
Tool Control	1
Use of Force and Restraints	1
Sub-Total	13
Part 3 - Order	
Disciplinary System	0
Sub-Total	0
Part 4 - Care	
Food Service	2
Medical Care	0
Medical Care (Women)	0
Significant Self-harm and Suicide Prevention and Intervention	0
Terminal Illness, Advance Directives and Death	0
Disability Identification, Assessment, and Accommodation	1
Sub-Total	3
Part 5 - Activities	
Recreation	0
Visitation	2
Sub-Total	2

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 standards may not be present in all inspections.

Part 6 - Justice	
Detainee Handbook	0
Grievance System	0
Legal Rights Group Presentations	0
Sub-Total	0
Part 7 - Administration and Management	
Interview and Tours	0
Staff Training	0
Sub-Total	0
Total Deficiencies	20

DETAINEE RELATIONS

ODO interviewed 39 detainees, who each voluntarily agreed to participate. ODO requested interviews with three additional detainees; however, all three declined ODO’s request for an interview. None of the detainees made allegations of discrimination, mistreatment, or abuse. All detainees reported satisfaction with facility services.

COMPLIANCE INSPECTION FINDINGS

SAFETY

TRANSPORTATION (BY LAND) (TBL)

ODO observed the facility TBL vehicle crew during detainee transfers and found the vehicle crew did not summon detainees by name to the vehicle (**Deficiency TBL-112**⁷).

ODO observed the facility TBL vehicle crew during detainee transfers and found the vehicle crew did not ask the detainee to state his/her complete name (**Deficiency TBL-113**⁸).

SECURITY

ADMISSION AND RELEASE (AR)

ODO reviewed ■ detainee detention files and found in ■ out of ■ detainee files, the facility did not prepare an itemized list of the detainee’s baggage nor personal property using a personal property inventory form or equivalent (**Deficiency AR-40**⁹).

⁷ “To confirm the identities of the detainees they are transporting, the vehicle crew shall: ...
a. Summon the detainee, by surname, to the vehicle.”

See ICE PBNDS 2011 (Revised 2016), Standard, Transportation (By Land), Section (V)(J)(3)(a).

⁸ “To confirm the identities of the detainees they are transporting, the vehicle crew shall: ...
b. Ask detainee to state his/her complete name.”

See ICE PBNDS 2011 (Revised 2016), Standard, Transportation (By Land), Section (V)(J)(3)(b).

⁹ “Facility staff shall prepare an itemized list of the detainee’s baggage and personal property using the personal

ODO reviewed the detention files of five released detainees and found in three out of five detainee files, the following deficiencies:

- No Order to Detain or Release (Form I-203) (**Deficiency AR-80¹⁰**);
- No personal property inventory forms (**Deficiency AR-91¹¹**); nor
- Property Receipt forms (Form G-589) (**Deficiency AR-97¹²**).

FUNDS AND PERSONAL PROPERTY (FPP)

ODO reviewed ■ detainee detention files and found in ■ out of ■ detainee files, the facility did not prepare an itemized inventory of all detainee baggage nor personal property, using personal property inventory forms (**Deficiency FPP-80¹³**).

ODO reviewed the detention files of five released detainees and found in three out of five detainee files, no Property Receipt forms (Form G-589) or equivalent (**Deficiency FPP-135¹⁴**).

KEY AND LOCK CONTROL (KLC)

ODO observed four facility officers carrying large security keys within the secure area and found all four officers did not use key covers for the keys (**Deficiency KLC-11¹⁵**).

ODO toured the facility lock shop, reviewed the lock shop inventory, observed key blanks and padlocks, and found no inventory for 5 key blanks and 11 padlocks (**Deficiency KLC-35¹⁶**).

ODO toured the facility lock shop, observed unassigned padlocks mixed inside the facility lock shop drawer with padlocks scheduled for disposal, and found no inventory list for the unassigned

property inventory form, or its equivalent.” See ICE PBNDS 2011 (Revised 2016), Standard, Admission and Release, Section (V)(B)(5)(a).

¹⁰ “A detainee’s out-processing begins when release processing staff receive the Form I-203, “Order to Detain or Release,” signed by an authorizing official.” See ICE PBNDS 2011 (Revised 2016), Standard, Admission and Release, Section (V)(H)(1).

¹¹ “The detainee shall check his/her property against the original personal property inventory form. If all property is correctly accounted for, the detainee shall sign the inventory sheet, a copy of which the officer shall place in the detainee’s detention file.” See ICE PBNDS 2011 (Revised 2016), Standard, Admission and Release, Section (V)(H)(9)(c).

¹² “If the detainee’s documentation is in order, the officer shall return the detainee’s funds and secure the detainee’s signature, confirming receipt of the inventoried property on the blue copy of the G-589 (equivalent).” See ICE PBNDS 2011, (Revised 2016) Standard, Admission and Release, Section (V)(H)(11).

¹³ “An itemized inventory of all detainee baggage and personal property shall be completed during admissions processing using the personal property inventory form.” See ICE PBNDS 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(I).

¹⁴ “The detainee shall then sign the G-589 Form or equivalent, indicating his receipt of all funds and personal property due him.” See ICE PBNDS 2011 (Revised 2016), Standard, Funds and Personal Property, Section (V)(K).

¹⁵ “Facilities shall use key covers for large security keys to prevent detainees or other unauthorized persons from observing and duplicating them.” See ICE PBNDS 2011 (Revised 2016), Standard, Key and Lock Control, Section (V)(A)(9).

¹⁶ “The security key control officer shall maintain inventories of all keys, locks and locking devices in the lock shop.” See ICE PBNDS 2011 (Revised 2016), Standard, Key and Lock Control, Section (V)(C).

padlocks (**Deficiency KLC-38¹⁷**).

ODO observed the facility control center's key cabinet, observed four issued key ring hooks, and found for four out of four key ring hooks, no chit in place for the issued keys (**Deficiency KLC-79¹⁸**).

ODO interviewed the facility KLC officer and control center officer and found the facility control center officer does not conduct a key audit upon reporting for duty (**Deficiency KLC-92¹⁹**).

TOOL CONTROL (TC)

ODO observed the facility maintenance area, reviewed the tool inventory, and found no inventory for two extension cords, one pry bar, and seven boxed tool sets (**Deficiency TC-127²⁰**).

USE OF FORCE AND RESTRAINTS (UOFR)

ODO interviewed a facility major, reviewed one immediate UOF incident, dated July 29, 2024, and the after-action review form, and found the after-action review team convened on August 4, 2024 (**Deficiency UOFR-155²¹**).

CARE

FOOD SERVICE (FS)

ODO interviewed the facility FS manager, toured the FS area, and found fish patties at a temperature of 135 Fahrenheit (F) degrees and coleslaw at 46 F degrees (**Deficiency FS-81²²**). **This is a priority component.**

¹⁷ "Lock shop inventories shall include, at a minimum, the following: ...

c. All unassigned padlocks."

See ICE PBNDS 2011 (Revised 2016), Standard, Key and Lock Control, Section (V)(C)(1)(c).

¹⁸ "All key rings shall be issued as needed (e.g., at the beginning of a shift, etc.) with the exchange of a chit for a key and with the chit placed on the hook from which the key was removed." See ICE PBNDS 2011 (Revised 2016), Standard, Key and Lock Control, Section (V)(E)(1).

¹⁹ "The control room officer shall conduct a key ring audit upon reporting for duty, accounting for each key ring in the control center logbook, and shall immediately report discrepancies in the record to the shift supervisor." See ICE PBNDS 2011 (Revised 2016), Standard, Key and Lock Control, Section (V)(E)(5).

²⁰ "All tools and equipment shall be accounted for and documented on a regular basis." See ICE PBNDS 2011 (Revised 2016), Standard, Tool Control, Section (V)(J)(10).

²¹ "This four-member after-action review team shall convene on the workday after the incident." See ICE PBNDS 2011 (Revised 2016), Standard, Use of Force and Restraints, Section (V)(P)(3).

²² "Before and during the meal, the CS in charge shall inspect the food service line to ensure: ...

3) Sanitary guidelines are observed, with hot foods maintained at a temperature of at least 140 F degrees (120 F degrees in food trays) and foods that require refrigeration maintained at 41 F degrees or below."

See ICE PBNDS 2011 (Revised 2016), Standard, Food Service, Section (V)(D)(2)(a)(3).

ODO observed the FS area and found two tilt skillets and one oven with accumulated food debris, splatter, and grime buildup (**Deficiency FS-159²³**). **This is a repeat deficiency.**

DISABILITY IDENTIFICATION, ASSESSMENT, AND ACCOMMODATION (DIAA)

ODO reviewed █ detainee mobility impairment accommodation files and found in █ out of █ files, facility medical staff notified ERO New Orleans between 15 and 30 days after the review (**Deficiency DIAA-63²⁴**).

ACTIVITIES

VISITATION (V)

ODO observed the facility's visiting area and found the facility does not post notification of the facility's rules nor hours for legal visitation (**Deficiency V-65²⁵**).

ODO reviewed the detainee legal visitation log and found the log does not include the visitor's time of arrival nor address. Additionally, ODO reviewed 41 detainee legal visitation log entries and found in 5 out of 41 entries, no entry for whether the detainee has a Notice of Entry of Appearance as Attorney or Accredited Representative (Form G-28) on file (**Deficiency V-99²⁶**).

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 19 of those standards. ODO found 20 deficiencies in the remaining 9 standards. Since JPCC's last rated inspection in December 2023, the facility's compliance with PBNDS 2011 (Revised 2016) has trended downward. JPCC went from 9 deficient standards and 16 deficiencies in December 2023 to 10 deficient standards and 20 deficiencies during this compliance inspection. JPCC completed its uniform correction action plan for its last inspection in July 2024, which likely resolved ODO's previously cited deficiencies; however, ODO noted one priority component and one repeat deficiency in FS.²⁷

²³ "The surfaces of equipment, containers, cutting boards and utensils used for preparation and subsequent storage of potentially hazardous food shall be cleaned effectively after each use." See ICE PBNDS 2011 (Revised 2016), Standard, Food Service, Section (V)(F)(7).

²⁴ "The facility shall notify the Field Office Director as soon as practicable, but no later than 72 hours, after the multidisciplinary team has completed its review of the needs of any detainee with a communication or mobility impairment." See ICE PBNDS 2011 (Revised 2016), Standard, Disability Identification, Assessment, and Accommodation, Section (V)(H)(1).

²⁵ "The facility shall provide notification of the rules and hours for legal visitation as specified above. This information shall be prominently posted in the waiting areas and visiting areas and in the housing units." See ICE PBNDS 2011 (Revised 2016), Standard, Visitation, Section (V)(J)(2).

²⁶ "Log entries shall include the following information: ...

- b. Time of arrival;
- d. Visitor's address; and
- g. Whether the detainee currently has a G-28 on file."

See ICE PBNDS 2011 (Revised 2016), Standard, Visitation, Section (V)(J)(14)(b)(d) and (g).

²⁷ ODO did not review Disability Identification, Assessment, and Accommodation, Transportation (By Land), Key and Lock Control, Tool Control, nor Visitation standards during the FY 2024 inspection cycle, which accounted for 10 deficiencies.

ODO recommends ERO New Orleans continue to work with the facility to resolve the deficiencies in accordance with its contractual obligations.

Compliance Inspection Results Compared	FY 2024 Full Inspection (PBNS 2011) (Revised 2016)	FY 2025 Full Inspection (PBNS 2011) (Revised 2016)
Standards Reviewed	29	28
Deficient Standards	9	9
Overall Number of Deficiencies	16	20
Priority Component Deficiencies	1	1
Repeat Deficiencies	1	1
Areas Of Concern	0	0
Corrective Actions	0	0
Facility Rating	Good	Acceptable/Adequate



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