



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

**Office of Detention Oversight
Follow-Up Compliance Inspection
2024-002-326**

**Enforcement and Removal Operations
ERO Washington Field Office**

**Caroline Detention Facility
Bowling Green, Virginia**


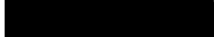
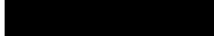
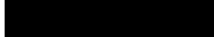
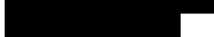
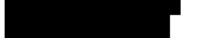
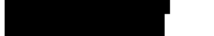
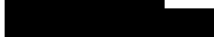
July 9-11, 2024

FOLLOW-UP COMPLIANCE INSPECTION
of the
CAROLINE DETENTION FACILITY
Bowling Green, Virginia

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FOLLOW-UP COMPLIANCE INSPECTION TEAM MEMBERS

	Team Lead	ODO
	Senior Inspections and Compliance Specialist	ODO
	Senior 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 Caroline Detention Facility (CDF) in Bowling Green, Virginia, from July 9 to 11, 2024.¹ This inspection focused on the standards found deficient during ODO’s last inspection of CDF from January 9 to 11, 2024. The facility opened in 1999 and is owned and operated by Peumansend Creek Regional Jail Authority. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at CDF in 2018 under the oversight of ERO’s Field Office Director in Washington (ERO Washington). The facility operates under the Performance-Based National Detention Standards (PBNDS) 2011 (Revised 2016).

[REDACTED]

[REDACTED] A superintendent handles daily facility operations and manages [REDACTED] support personnel. Trinity Services provides food services, ICE Health Service Corps provides medical care, and Oasis Commissary provides commissary services at the facility. In November 2023, CDF was accredited by the National Commission on Correctional Health Care. In December 2022, CDF was audited for the Department of Homeland Security (DHS) Prison Rape Elimination Act (PREA) and was DHS PREA certified.

Capacity and Population Statistics	Quantity
ICE Bed Capacity ²	[REDACTED]
Average ICE Population ³	[REDACTED]
Adult Male Population (as of July 9, 2024)	[REDACTED]
Adult Female Population (as of July 9, 2024)	[REDACTED]

During its last rated inspection, in Fiscal Year (FY) 2024, ODO found 12 deficiencies in the following areas: Detention Files (1); Grievance System (1); Medical Care (1); Searches of Detainees (1); Telephone Access (7); and Voluntary Work Program (1).

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

² Data Source: ERO Custody Management Division Authorized Facility List as of July 8, 2024.

³ *Ibid.*

FOLLOW-UP COMPLIANCE INSPECTION PROCESS

ODO conducts biannual oversight inspections of ICE detention facilities with an average daily population (ADP) of 10 or more detainees, and where detainees are housed for longer than 72-hours, to assess compliance with ICE National Detention Standards. In FY 2021, to meet congressional requirements, ODO began conducting follow-up inspections at all over-72-hour ICE detention facilities with an ADP of 10 or more detainees that ODO conducted a full inspection of earlier in the FY. Follow-up inspections focus on facility compliance with detention standards that directly affect detainee life, health, safety, and/or well-being, and other standards ODO found deficient during the previous rated inspection to assess the facility's corrective actions taken to address those previously cited deficiencies.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.

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 the full and follow-up inspection are annotated as "Repeat Deficiencies" in this report.

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
Sub-Total	0
Part 2 - Security	
Admission and Release	0
Custody Classification System	1
Funds and Personal Property	0
Searches of Detainees	0
Special Management Units	0
Staff-Detainee Communication	0
Use of Force and Restraints	0
Sub-Total	1
Part 4 - Care	
Food Service	0
Hunger Strikes	0
Medical Care	0
Medical Care (Women)	0
Significant Self-harm and Suicide Prevention and Intervention	0
Sub-Total	0
Part 5 - Activities	
Telephone Access	0
Voluntary Work Program	0
Sub-Total	0
Part 6 - Justice	
Grievance System	0
Sub-Total	0
Part 7 - Administration and Management	
Detention Files	0
Sub-Total	0
Total Deficiencies	1

⁵ For greater detail on ODO's findings, see the *Follow-up 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.

DETAINEE RELATIONS

ODO interviewed 21 detainees who each voluntarily agreed to participate. None of the detainees made allegations of mistreatment, discrimination, or abuse. Most detainees reported satisfaction with facility services except for the concern listed below.

Voluntary Work Program: One detainee stated his kitchen uniform needed repair or replacement due to excess wear and tear.

- Action Taken: On July 10, 2024, ODO notified a facility lieutenant of the detainee's concern. On July 11, 2024, the detainee received new sets of kitchen uniforms to perform his job duties.

FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

SECURITY

CUSTODY CLASSIFICATION SYSTEM (CCS)

ODO reviewed [REDACTED] detainee detention files and found in [REDACTED] out of [REDACTED] files, ERO classified a detainee with an arrest record of assault and battery as low custody and subsequently housed the detainee in a low-custody housing unit (**Deficiency CCS-38⁷**). **This is a priority component.**

CONCLUSION

During this follow-up inspection, ODO assessed the facility's compliance with 18 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 17 of those standards. ODO found one deficiency in the remaining standard. Since CDF's last rated inspection in January 2024, the facility's overall compliance with the PBNDS 2011 (Revised 2016) has trended upwards. CDF went from 6 deficient standards and 12 deficiencies in January 2024 to 1 deficient standard and 1 deficiency during the most recent inspection. The facility's improved performance was partly due to staff completing two corrective actions for the Telephone Access standard from the previous inspection and resolving seven deficiencies. ODO did not receive a completed UCAP for ODO's last inspection of CDF in January 2024 and cannot assess the UCAP's effectiveness in resolving the previously cited deficiencies. ODO recommends ERO Washington continue to work with the facility to resolve the remaining deficiency in accordance with contractual obligations.

⁷ "Low custody detainees may not be comingled with high custody detainees.

- May not include any detainee with an arrest or conviction that included an act of physical violence, or any detainee with a history of assaultive behavior."

See ICE PBNDS 2011 (Revised 2016), Standard, Custody Classification System, Section (V)(F)(1).

Compliance Inspection Results Compared	FY 2024 Full Inspection (PBNDS 2011) (Revised 2016)	FY 2024 Follow-Up Inspection (PBNDS 2011) (Revised 2016)
Standards Reviewed	29	18
Deficient Standards	6	1
Overall Number of Deficiencies	12	1
Priority Component Deficiencies	2	1
Repeat Deficiencies	0	0
Areas Of Concern	0	0
Corrective Actions	2	0
Facility Rating	Acceptable/Adequate	N/A