



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
2024-002-305**

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

**Richwood Correctional Center
Monroe, Louisiana**

April 30-May 2, 2024

FOLLOW-UP COMPLIANCE INSPECTION
of the
RICHWOOD CORRECTIONAL CENTER
Monroe, Louisiana

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FOLLOW-UP COMPLIANCE INSPECTION TEAM MEMBERS



Team Lead	ODO
Acting Team Lead	ODO
Inspections and Compliance Specialist	ODO
Contractor	Creative Corrections
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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 follow-up compliance inspection of the Richwood Correctional Center (RCC) in Monroe, Louisiana, from April 30 to May 2, 2024.¹ This inspection focused on the standards found deficient during ODO’s last inspection of RCC from October 31 to November 2, 2023. The facility opened in 1998 and is owned and operated by LaSalle Corrections. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at RCC 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. Performance Food provides food services, CorrectMed provides medical care, and Correct Commissary provides commissary services at the facility. The facility was accredited by the National Commission on Correctional Health Care in June 2022. In July 2022, RCC 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 April 30, 2024)	[REDACTED]
Adult Female Population (as of April 30, 2024)	[REDACTED]

During its last rated inspection, in Fiscal Year (FY) 2024, ODO found 27 deficiencies in the following areas: Admission and Release (1); Correspondence and Other Mail (14); Facility Security and Control (2); Medical Care (4); Post Orders (1); Staff-Detainee Communication (1); and Telephone Access (4).

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 April 29, 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	0
Facility Security and Control	0
Funds and Personal Property	0
Post Orders	2
Special Management Units	0
Staff-Detainee Communication	0
Use of Force and Restraints	0
Sub-Total	2
Part 4 - Care	
Food Service	3
Hunger Strikes	0
Medical Care	0
Medical Care (Women)	0
Significant Self-harm and Suicide Prevention and Intervention	0
Sub-Total	3
Part 5 - Activities	
Correspondence and Other Mail	0
Telephone Access	0
Sub-Total	0
Part 6 - Justice	
Grievance System	0
Sub-Total	0
Total Deficiencies	5

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 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 facility staff took her prescription eye medicine during intake, which she needs daily, and did not receive a refill for more than 25 days after her arrival to the facility. Additionally, the detainee stated she had yet to receive an appointment for an eye specialist to assess her glaucoma as per a facility doctor's recommendation.

- Action Taken: ODO interviewed the health services administrator (HSA) and found the detainee arrived at the facility on March 12, 2024. According to the HSA, the detainee did not arrive at the facility with eye drops nor indicated having eye surgery for glaucoma. On March 19, 2024, the detainee spoke to a nurse practitioner (NP), stating she had eye surgery 6 months earlier and had a prescription for eye drops. The NP prescribed latanoprost (Xalatan) eye drops for 90 days to treat glaucoma, and medical staff began administering the medication to her on March 20, 2024. On March 22, 2024, the detainee spoke to an NP, stating she was not receiving eye drops every 6 hours as per a doctor's prescription from her country. The detainee showed the NP documentation stating a prescription for polyethylene glycol (PEG) 400 every 6 hours. The NP explained to the detainee PEG 400 is an over-the-counter eye drop medication for dry eyes, not a prescription to decrease pressure in the eye. The NP placed an order for Refresh Tears eye drops for the detainee's dry eyes. The HSA showed ODO the record documenting the dates the detainee did not show up to receive eye drop medication from medical staff. On April 30, 2024, the HSA notified ODO of the detainee's appointment to see a provider in August 2024, but ERO New Orleans released her in May 2024.

FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

SECURITY

POST ORDERS (PO)

ODO reviewed 29 PO folders and found in 2 out of 29 folders, the housing unit officer folders in C and D dorms contained POs for the central control room officer and the housing unit officers on the first shift signed the wrong POs for their posts (**Deficiency PO-7**⁷).

ODO interviewed the chief of security and found the chief did not maintain a PO master file in her office (**Deficiency PO-42**⁸).

⁷ "Even in the event that an officer has worked a post in the past, he/she shall assume the post orders have changed and shall be required to read and comprehend all Post Order documents upon assuming their posts." *See* ICE PBNDS 2011 (Revised 2016), Standard, Post Orders, Section (V)(B).

⁸ "A post orders master file shall be maintained in the office of the Chief of Security and shall be made available to all staff." *See* ICE PBNDS 2011 (Revised 2016), Standard, Post Orders, Section (V)(G)(5).

CARE

FOOD SERVICE (FS)

ODO reviewed RCC’s FS program, interviewed the acting food service manager, and found the following deficiencies:

- No common fare menu (**Deficiency FS-169**⁹);
- No special menus for federal holidays (**Deficiency FS-188**¹⁰); and
- No common fare menu certified as exceeding minimum daily nutritional requirements and meeting recommended daily allowances (**Deficiency FS-189**¹¹).

CONCLUSION

During this inspection, ODO assessed the facility’s compliance with 18 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 16 of those standards. ODO found five deficiencies in the remaining two standards. Since RCC’s last full inspection in October 2023, the facility’s overall compliance with the PBNDS 2011 (Revised 2016) improved. RCC went from 7 deficient standards and 27 deficiencies in October 2023 to 2 deficient standards and 5 deficiencies during this most recent inspection. The facility’s improved performance was likely due to completing a UCAP for ODO’s last inspection of RCC that occurred in October 2023. ODO recommends ERO New Orleans continue to work with the facility to resolve the remaining deficiencies in accordance with contractual obligations.

Compliance Inspection Results Compared	FY 2024 Full Inspection (PBNDS 2011) (Revised 2016)	FY 2024 Follow-Up Inspection (PBNDS 2011) (Revised 2016)
Standards Reviewed	28	18
Deficient Standards	7	2
Overall Number of Deficiencies	27	5
Priority Component Deficiencies	0	0
Repeat Deficiencies	0	0
Areas Of Concern	1	0
Corrective Actions	2	0
Facility Rating	Acceptable	N/A

⁹ “All facilities shall provide detainees requesting a religious diet a reasonable and equitable opportunity to observe their religious dietary practice, within the constraints of budget limitations and the security and orderly running of the facility, by offering a common fare menu.” See ICE PBNDS 2011 (Revised 2016), Standard, Food Service, Section (V)(G)(1).

¹⁰ “The common fare menu is based on a 14-day cycle, with special menus for the ten federal holidays.” See ICE PBNDS 2011 (Revised 2016), Standard, Food Service, Section (V)(G)(2).

¹¹ “The menus must be certified as exceeding minimum daily nutritional requirements and meeting RDAs.” See ICE PBNDS 2011 (Revised 2016), Standard, Food Service, Section (V)(G)(2).