

Department Of Homeland Security  
Immigration and Customs Enforcement

Detention Review Summary Form  
Facilities Used Over 72 hours

**A. Type of Facility Reviewed**

- ☐ ICE Service Processing Center  
☐ ICE Contract Detention Facility  
☒ ICE Intergovernmental Service Agreement

**B. Current Inspection**

Type of Inspection  
☐ Field Office ☒ HQ Inspection

Date[s] of Facility Review  
6/4/2019 - 6/6/2019

**C. Previous/Most Recent Facility Review**

Date[s] of Last Facility Review  
3/21/2017 - 3/23/2017

Previous Rating  
☒ Meets Standards ☐ Does Not Meet Standards

**D. Name and Location of Facility**

Name  
Folkston ICE Processing Center

Address (Street and Name)  
3026 HWY 252 E

City, State and Zip Code  
Folkston, GA 31537

County  
Charlton

Name and Title of Facility Administrator  
(Warden/OIC/Superintendent)  
[REDACTED]

Telephone # (Include Area Code)  
[REDACTED]

Field Office / Sub-Office (List Office with oversight responsibilities)  
Atlanta

Distance from Field Office  
289 miles

**E. ICE Information**

Name of Inspector (Last Name, Title and Duty Station)  
[REDACTED] / LCI/Detainee Rights SME / Nakamoto Group

Name of Team Member / Title / Duty Location  
[REDACTED] / Medical SME / Nakamoto Group

Name of Team Member / Title / Duty Location  
[REDACTED] / Safety SME / Nakamoto Group

Name of Team Member / Title / Duty Location  
[REDACTED] / Security SME / Nakamoto Group

Name of Team Member / Title / Duty Location  
[REDACTED] / Medical SME / Nakamoto Group

**F. CDF/IGSA Information Only**

Contract Number [REDACTED] Date of Contract or IGSA [REDACTED]

Basic Rates per Man-Day  
[REDACTED]

Other Charges: (If None, Indicate N/A)  
[REDACTED]

Estimated Man-days Per Year  
[REDACTED]

**G. Accreditation Certificates**

List all State or National Accreditation[s] received:  
ACA

☐ Check box if facility has no accreditation[s]

**H. Problems / Complaints (Copies must be attached)**

The Facility is under Court Order or Class Action Finding  
☐ Court Order ☐ Class Action Order

The Facility has Significant Litigation Pending  
☐ Major Litigation ☐ Life/Safety Issues

☒ Check if None.

**I. Facility History**

Date Built  
[REDACTED]

Date Last Remodeled or Upgraded  
[REDACTED]

Date New Construction / Bedspace Added  
[REDACTED]

Future Construction Planned  
☐ [REDACTED] ☒ [REDACTED] Date: [REDACTED]

Current Bedspace [REDACTED] Future Bedspace (# New Beds only)  
Number: [REDACTED] Date: [REDACTED]

**J. Total Facility Population**

Total Facility Intake for previous 12 months  
[REDACTED]

Total ICE Mandays for Previous 12 months  
[REDACTED]

**K. Classification Level (ICE SPCs and CDFs Only)**

	L-1	L-2	L-3
Adult Male	NA	NA	NA
Adult Female	NA	NA	NA

**L. Facility Capacity**

	Rated	Operational	Emergency
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
<input type="checkbox"/>	[REDACTED]	[REDACTED]	[REDACTED]

**M. Average Daily Population**

	ICE	USMS	Other
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]

**N. Facility Staffing Level**

Security: [REDACTED] Support: [REDACTED]

### Significant Incident Summary Worksheet

For The Nakamoto Group to complete its review of your facility, the following information must be completed prior to the scheduled review dates. The information on this form should contain data for the past twelve months in the boxes provided. The information on this form is used in conjunction with the ICE Detention Standards in assessing your Detention Operations against the needs of the ICE and its detained population. This form should be filled out by the facility prior to the start of any inspection. Failure to complete this section will result in a delay in processing this report and the possible reduction or removal of ICE' detainees at your facility.

<i><b>Incidents</b></i>	<i><b>Description</b></i>	<b>Jan – Mar</b>	<b>Apr – Jun</b>	<b>Jul – Sept</b>	<b>Oct – Dec</b>
Assault: Offenders on Offenders <sup>1</sup>	Types (Sexual <sup>2</sup> , Physical, etc.)	12-P	15-P	16-P	11-P
	With Weapon	0	0	0	0
	Without Weapon	12	15	16	11
Assault: Detainee on Staff	Types (Sexual Physical, etc.)	1-P	0	2-P	0
	With Weapon	0	0	0	0
	Without Weapon	1	0	2	0
Number of Forced Moves, incl. Forced Cell moves <sup>3</sup>		0	0	0	0
Disturbances <sup>4</sup>		0	2	0	1
Number of Times Chemical Agents Used		0	0	0	0
Number of Times Special Reaction Team Deployed/Used		0	0	0	0
# Times Four/Five Point Restraints applied/used	Number/Reason (M=Medical, V=Violent Behavior, O=Other)	0	0	0	0
	Type (C=Chair, B=Bed, BB=Board, O=Other)	0	0	0	0
Number of Times Canines Used in Facility		0	0	0	0
Offender / Detainee Medical Referrals as a result of injuries sustained.		0	0	0	0
Escapes	Attempted	0	0	0	0
	Actual	0	0	0	0
Grievances:	# Received	35	18	3	30
	# Resolved in favor of Offender/Detainee	0	0	0	0
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)	0	A	0	0
	Number	0	1	0	0
Psychiatric / Medical Referrals	# Medical Cases referred for Outside Care	14	22	24	43
	# Psychiatric Cases referred for Outside Care	1	0	0	1

<sup>1</sup> Any attempted physical contact or physical contact that involves two or more offenders

<sup>2</sup> Oral, anal or vaginal penetration or attempted penetration involving at least 2 parties, whether it is consenting or non-consenting

<sup>3</sup> Routine transportation of detainees/offenders is not considered "forced"

<sup>4</sup> Any incident that involves four or more detainees/offenders, includes gang fights, organized multiple hunger strikes, work stoppages, hostage situations, major fires, or other large scale incidents.

DHS/ICE Detention Standards Review Summary Report							
1. Meets Standards		2. Does Not Meet Standards		3.Repeat Finding		4. Not Applicable	
		1	2	3	4		
<b>PART 1 SAFETY</b>							
1	Emergency Plans	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
2	Environmental Health and Safety	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
3	Transportation (By Land)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
<b>PART 2 SECURITY</b>							
4	Admission and Release	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
5	Classification System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
6	Contraband	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
7	Facility Security and Control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
8	Funds and Personal Property	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9	Hold Rooms in Detention Facilities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
10	Key and Lock Control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
11	Population Counts	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
12	Post Orders	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
13	Searches of Detainees	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
14	Sexual Abuse and Assault Prevention and Intervention	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
15	Special Management Units	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
16	Staff-Detainee Communication	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
17	Tool Control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
18	Use of Force and Restraints	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<b>PART 3 ORDER</b>							
19	Disciplinary System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<b>PART 4 CARE</b>							
20	Food Service	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
21	Hunger Strikes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
22	Medical Care	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
23	Personal Hygiene	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
24	Suicide Prevention and Intervention	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
25	Terminal Illness, Advance Directives, and Death	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<b>PART 5 ACTIVITIES</b>							
26	Correspondence and Other Mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
27	Escorted Trips for Non-Medical Emergencies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
28	Marriage Requests	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
29	Recreation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
30	Religious Practices	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
31	Telephone Access	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
32	Visitation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
33	Voluntary Work Program	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>PART 6 JUSTICE</b>							
34	Detainee Handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
35	Grievance System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
36	Law Libraries and Legal Material	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
37	Legal Rights Group Presentations	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<b>PART 7 ADMINISTRATION &amp; MANAGEMENT</b>							
38	Detention Files	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
39	News Media Interviews and Tours	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
40	Staff Training	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
41	Transfer of Detainees	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

### LCI Review Assurance Statement

By signing below, the Lead Compliance Inspector (LCI) certifies that all findings of noncompliance with policy or inadequate controls contained in the Inspection Report are supported by evidence that is sufficient and reliable. Furthermore, findings of noteworthy accomplishments are supported by sufficient and reliable evidence. Within the scope of the review, the facility is operating in accordance with applicable law and policy, and property and resources are efficiently used and adequately safeguarded, except for the deficiencies noted in the report.

Lead Compliance Inspector: (Print Name) [REDACTED]	Signature [REDACTED]
Title & Duty Location Lead Compliance Inspector, The Nakamoto Group, Inc.	Date 6/6/2019

#### Team Members

Print Name, Title, & Duty Location [REDACTED], Medical SME, The Nakamoto Group, Inc.	Print Name, Title, & Duty Location [REDACTED], Safety SME, The Nakamoto Group, Inc.
Print Name, Title, & Duty Location [REDACTED], Security SME, The Nakamoto Group, Inc.	Print Name, Title, & Duty Location [REDACTED], Medical SME, The Nakamoto Group, Inc.

#### Recommended Rating:

☒ Meets Standards  
☐ Does Not Meet Standards

Comments: This inspection was conducted to determine the overall compliance with the ICE Performance-Based National Detention Standards (PBNDS) 2011. The following are the PBNDS 2011 additions/changes to the standards listed on page three:

- Medical Care (Women), a new standard, was rated Not Applicable (N/A);
- Classification System is now titled Custody Classification System;
- Suicide Prevention and Intervention is now titled Significant Self-Harm and Suicide Prevention and Intervention;
- Escorted Trips for Non-Medical Emergencies is now titled Trips for Non-Medical Emergencies;
- News Media Interviews and Tours is now titled Interviews and Tours;
- Transfer of Detainees is now titled Detainee Transfers

The total facility intake reported in Section J, the facility staffing level reported in Section N and the average daily population reported in Section M include the numbers for the Folkston ICE Processing Center Annex which is adjacent to this facility.

There was one allegation of staff-on-detainee sexual abuse/assault during this inspection period. The detainee alleged inappropriate touching during a pat down search which was investigated and determined to be unfounded. The case file was reviewed and procedures conducted by medical and detention staff were found to be in compliance with the requirements of the standard.

The three disturbances reported on the Significant Incident Summary Worksheet were all hunger strikes. There were three groups of detainees who participated in hunger strikes during this inspection period. The hunger strikers were demanding that they be granted bonds by the judge. 32 detainees had to be transferred to another facility for treatment after missing 22 consecutive days of meals. Medical records were reviewed and it was determined that the medical practices of the facility met the requirements standard.

There were no deaths during this inspection period; however, there was one detainee suicide attempt. On 5/2/2019 a 23-year old male detainee attempted to hang himself using a bed sheet tied to his bunk bed. During the attempt he pressed the call button in his cell to bring attention. A review of his medical record confirmed that procedures conducted were in compliance with the requirements of the standard.

The facility does not use Tasers nor do they use canines. Oleoresin Capsicum (OC) is authorized for use by trained officers. During this inspection period there were two uses of force involving ICE detainees. Of those instances one was an immediate use of force and one was calculated. The calculated use of force was a cell extraction. The immediate use of force situation involved staff responding when a detainee attempted to push past him. Both incidents were immediately followed by medical examinations for staff and detainees and were properly documented and reviewed by senior staff. The reports indicated that force was applied within guidelines of the standard and the medical evaluations were timely. There were no serious injuries to detainees or staff.