

October 24, 2019

TO: [REDACTED]
Assistant Director for Detention Management

FROM: [REDACTED]
Lead Compliance Inspector
The Nakamoto Group, Inc.

SUBJECT: **Annual/180 Day Follow-Up Detention Inspection of the River Correctional Center**

The Nakamoto Group, Inc. performed an annual/180 day follow-up inspection for compliance with the ICE National Detention Standards (NDS) of the River Correctional Center in Ferriday, Louisiana, during the period of October 22-24, 2019. This is an IGSA facility.

The inspection was performed under the guidance of [REDACTED], Lead Compliance Inspector. Team Members were:

Subject Matter Field	Team Member
Detainee Rights	[REDACTED]
Security	[REDACTED]
Medical Care	[REDACTED]
Medical Care	[REDACTED]
Safety	[REDACTED]

Type of Inspection

This is a scheduled annual/180 day follow-up inspection, which is performed to determine overall compliance with the ICE NDS for Over 72 hour facilities. The facility received a rating of Deficient during the March 2019 annual/90 day follow-up inspection.

Inspection Summary

The River Correctional Center is currently accredited by:

- The American Correctional Association (ACA) - No
- The National Commission on Correctional Health Care (NCCHC) - No
- The Joint Commission (TJC) - No
- Prison Rape Elimination Act (PREA) - No

Standards Compliance

The following information is a summary of the standards that were reviewed and overall compliance that was determined as a result of the 2019 annual/90 day follow-up inspection and the 2019 NDS annual/180-day follow-up inspections:

2019 Annual/90-Day Inspection	
Acceptable	33
Deficient	5
Repeat Finding	0
Not Applicable	1

2019 Annual/180-Day Inspection	
Acceptable	38
Deficient	0
Repeat Finding	0
Not Applicable	1

The inspection team identified two (2) deficient components in the following two (2) standards:

Key and Lock Control – 1
Security Inspections – 1, which is a repeat deficiency

Facility Snapshot/Description

The River Correctional Center is located in a rural area approximately five miles from Ferriday, Louisiana. The facility was constructed in 2001 and is owned by LaSalle Corrections (LaSalle). [REDACTED] LaSalle Corrections provides the facility with an OIC (Warden), Assistant Warden, and medical personnel to manage the facility and other operational services. All other River Correctional Center employees are sheriff's department staff.

[REDACTED] These housing units are under visual supervision of a control center officer. Roving housing unit officers provide additional supervision. The facility is currently housing male ICE detainees with a Low or Medium Low custody classification. The facility also has a double-bunked housing unit designated as a Lockdown Dorm. The Lockdown Dorm is designated for suicide watch, administrative, disciplinary, and protective custody housing needs. During the month of February this housing unit was used to house Louisiana Department of Corrections inmates who served as a work crew. These inmates were moved to the nearby Concordia Parish Correctional Center in April. The facility does not house females or juvenile detainees. [REDACTED]

The facility began housing ICE detainees February 1, 2019. There are currently seven ICE/ERO personnel who are assigned onsite and maintain an office at the facility.

During the inspection, team members toured the housing units multiple times interviewing detainees either in groups or in a private, confidential setting. LEP detainees were interviewed using the Language Line. No detainees expressed any concerns about their treatment by staff and all stated they felt safe at the facility. There were no issues raised concerning access to medical care. Several detainees stated that they had not been able to contact their families due to difficulty with international calls to Africa and other countries. The detainees were advised to complete an ICE request form for assistance from ICE personnel. Detainees also stated that they felt the cost of telephone calls was too high. A review of the telephone rates indicated that they are comparable to rates charged in most other facilities. It was reported that the Pro Bono Legal Services Provider numbers posted in the housing units did not work. When tested, two of the numbers did work. The SDDO was advised of the problem with the third number and he managed to contact the provider and was advised that they are not accepting calls from the facility at this time.

Several detainees stated that they had not received a response to their requests to ICE. A review of the detainee request log indicated that the requests were answered within two days. One detainee stated that his family had deposited \$90.00 in his account and he did not receive it. The detainee's account was reviewed and there were several deposits noted but no record of a \$90.00 deposit found. Facility personnel are following up on the complaint.

All areas of the facility were visited and found to be secure, properly ventilated, and well-lit; however, sanitation levels are considered to be below-average in the housing units. All of the housing units were inspected to include all of the cells used for administrative and disciplinary control. There are eight open dormitory style housing units with various capacities from a low of 66 to a high of eighty. They are double and triple bunked. There are tables for board games and meals but not enough for the entire housing unit to be seated at the same time. As a result, most of the detainees sit on their bunks to eat their meal. Some storing of food items was evident in the detainee's storage boxes attached to their beds creating unsanitary conditions.

Numerous hand-made ropes and strings were present in all of the housing units used for hanging clothes and privacy screens. These items were brought to the attention of facility staff and they were removed. When the inspectors returned to the housing units the next day the detainees had replaced the hand-made ropes and strings. Facility staff reported that this is an on-going problem.

The restroom sanitation levels appear to be well below average and the floors approaching these areas are wet and slippery. In at least one of the housing units water was leaking from the shower area underneath a wall and into the bed area. All detainees sleeping in that area complained and it was brought to the attention of facility officials during this inspection.

A common complaint was that the amount of food was not enough. According to the food service department the portions served are well within the required amount. One detainee complained that he had previously suffered a broken nose and had sought treatment from facility medical staff. He stated that they did nothing for him other than take his blood pressure. The Medical SME reviewed his medical record and found that he had in fact received the proper treatment for his complaint. No other complaints were voiced regarding medical care.

There have been a number of hunger strikes during this inspection period. Staff stated the surge in hunger strike numbers since the last inspection is due to the presence of a large number of detainees from India that use hunger strikes as a request for release.

During the inspection there were four detainees on hunger strike; they had been together on hunger strike for more than seven days each. A review of their medical records indicated that staff are following protocol and maintaining the documentation as required. The Medical SME interviewed each detainee and found that they were alert, oriented, and able to carry on a conversation.

ICE detainees are not charged co-pays for medical, mental health, or dental care. Food Services and Health care services are provided by LaSalle. Detainee telephone services are provided via a contract with Correct Solutions Group.

Areas of Concern/Significant Observations

There were no concerns or significant observations during this inspection.

Recommended Rating and Justification

The Lead Compliance Inspector recommends that the facility receive a rating of Meets Standards. The facility complies with the ICE National Detention Standards (NDS) for Over 72 hour facilities as evidenced by no (0) Standards rated as Deficient and one (1) standard was Not Applicable (N/A). All remaining thirty-eight (38) standards were found to Meet Standards.

LCI Assurance Statement

The findings of compliance and non-compliance are accurately and completely documented on the G-324 Inspection Form and are supported by documentation in the inspection file. An out brief was conducted at the facility and in addition to the entire Nakamoto Group, Inc. Inspection Team, the following were present:

- ICE Officials - [REDACTED]

- Facility Staff - [REDACTED]

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] Lead Compliance Inspector
Printed Name of LCI

October 24, 2019
Date