

October 9, 2020

TO:

Assistant Director for Detention Management

FROM:

Lead Compliance Inspector The Nakamoto Group, Inc.

SUBJECT: Annual Inspection of the Catahoula Correctional Center

The Nakamoto Group, Inc. performed an annual inspection for compliance with the ICE Performance-Based National Detention Standards (PBNDS) 2011 of the Catahoula Correctional Center in Harrison-burg, Louisiana during the period of October 7-9, 2020. This is an IGSA facility.

The annual inspection was performed under the guidance of the compliance Inspector. Team members were:

Subject Matter Field	Team Member
Detainee Rights	
Security	
Medical Care	
Medical Care	
Safety	

Type of Inspection

This is a scheduled annual inspection, which is performed to determine overall compliance with the ICE PBNDS 2011 for Over 72-hour facilities. The facility received a rating of Meets Standards during the August 2019 annual inspection.

Inspection Summary

The Catahoula 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 and 2020 PBNDS annual inspections:



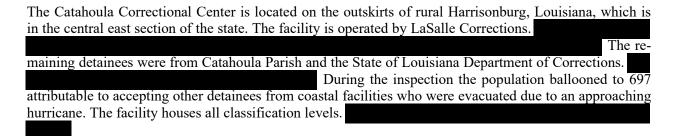
2019 Annual Inspection	
Meets Standards	39
Does Not Meet Standards	0
Repeat Finding	0
Not Applicable	3

2020 Annual Inspection	
Meets Standards	40
Does Not Meet Standards	0
Repeat Finding	0
Not Applicable	2

The inspection team identified five (5) deficient components in the following three (3) standards:

Hold Rooms – 3 Key and Lock Control - 1 Special Management Units – 1

Facility Snapshot/Description



The compound contains the main facility, which is surrounded by two sixteen-foot-high chain link fences supplemented with razor ribbon on top and bottom, and a perimeter road/path that is foot patrolled by an unarmed officer at least once each shift. Surveillance cameras offer visibility around the entire perimeter and interior movement corridors. All exterior building doors and interior security gates and doors are under constant camera surveillance and controlled by central control staff. The facility is equipped with a 199-surveillance camera network, that is monitored 24 hours a day. All movement is escorted. There are two small buildings/sheds outside the secure perimeter, that house landscaping equipment and surplus materials.

There are nine individual housing units, which are dormitory design. The living units' range in size from 64-108 beds. There is one special management unit (SMU) designed with ten cells; two one-bed cells, which are also used for suicide observation, and eight two-bed cells which are dedicated for housing administrative and/or disciplinary segregation status detainees. There was one ICE detainee in the SMU on administrative segregation status during the inspection. The facility has dedicated part of one housing unit to serve as a COVID-19 wing; it was empty during the inspection.

Each living area, except the SME, has a common dayroom, which is equipped with a television, fixed table/chair units for detainees to eat their meals, play games, and gather for conversation. There are no electronic tablets or kiosks in the housing units. All announcements and schedules are posted on the dayroom and common area bulletin boards. Detainees are provided indoor and outdoor recreation.

Inspectors interviewed just two detainees; one from general population and one from the SMU, both detainees spoke English. Sign-up sheets were posted in the housing units for two days and each day the compliance manager went into each unit to publicly announce and ask specifically if any detainees wanted to speak with the inspectors. The response was void of volunteers. Generally, these detainees felt safe in the facility and registered no substantive complaints about any aspect of their detention, except for the general population detainee. He expressed a litany of concerns regarding his case and all the things he felt



the facility was doing wrong. The Safety SME and Detainee Rights SME shared his comments with the OIC and compliance manager who were quite familiar with the detainee. All issues discussed with facility staff had been aired before and resulted in no further action taken at those times. This briefing ended in the same manner. The other detainee was not unhappy with his detention but was concerned about COVID-19 conditions and his overall health. The Safety SME discussed this concern with the OIC who stated the safety protocols in place adhere to public health guidelines and no further action could be taken until COVID-19 conditions are eased.

There was one ICE detainee death during this inspection period. A 47-year-old male from Guatemala was medically screened and physically evaluated by medical staff upon admission on 2/26/2020, and it was subsequently determined that the detainee should be transferred to the hospital via ambulance. He was admitted at Ochsner LSU Hospital Monroe and later transferred to Ochsner LSU Hospital Shreveport, for further care. He was cleared to transfer back to Ochsner LSU Hospital Monroe where the detainee's condition did not improve until he expired on 7/14/2020. He was taken off the ventilator at the request of his wife and son. Per the health services administrator, ICE/ERO representatives were updated on the detainee's condition daily. An autopsy was requested by ICE/ERO; results are pending. Procedures conducted were in compliance to the requirements of the standard.

An assessment of the general cleanliness of the facility could not be determined due to the remote nature of the inspection.

Detainee telephone services are provided by Correct Solutions Group. Medical services are provided by CorrectMed. Food service and maintenance operations are provided by Catahoula Parish employees. ICE detainees are not charged medical co-pays.

Areas of Concern/Significant Observations

The inspection was conducted remotely, and inspectors were unable to personally observe practices and procedures within the facility. The inspection team relied upon photographs and/or videos to validate the observation of many standards.

Recommended Rating and Justification

The Lead Compliance Inspector recommends that the facility receive a rating of Meets Standards unless unobserved practices and conditions are contrary to what was reported to the inspection team. The facility complies with the ICE Performance-Based National Detention Standards (PBNDS) 2011 for Over 72-hour facilities. No (0) Standards were rated as Does Not Meet Standard and two (2) standards were Not Applicable (N/A). All remaining forty (40) standards were found to be in compliance.

LCI Assurance Statement

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

- ICE Officials –
- Facility Staff –



, Lead Compliance Inspector

October 9, 2020

Printed Name of LCI

Date