Violations of ICE Detention Standards at Folkston ICE Processing Center and Folkston Annex





June 30, 2022 OIG-22-47



OFFICE OF INSPECTOR GENERAL

Department of Homeland Security

Washington, DC 20528 / www.oig.dhs.gov

June 30, 2022

MEMORANDUM FOR:	Tae D. Johnson Acting Director U.S. Immigration and Customs	s Enforcement
FROM:	Joseph V. Cuffari, Ph.D. JOSE Inspector General	EPH V Digitally signed by JOSEPH V CUFFARI Date: 2022.06.30 08:19:19 -04'00'
SUBJECT:	Violations of ICE Detention Standards at Folkston Processing Center and Folkston Annex	

Attached for your action is our final report, *Violations of ICE Detention Standards at Folkston Processing Center and Folkston Annex.* We incorporated the formal comments provided by your office.

The report contains thirteen recommendations aimed at improving care of detainees at Folkston Processing Center and Folkston Annex. Your office concurred with all 13 recommendations. We consider 12 recommendations resolved and closed and 1 recommendation resolved and open. Once your office has fully implemented the one remaining recommendation, please submit a formal closeout letter to us within 30 days so that we may close the recommendation. The memorandum should be accompanied by evidence of completion of agreed-upon corrective actions. Please send your response or closure request to <u>OIGISPFollowup@oig.dhs.gov</u>.

Consistent with our responsibility under the *Inspector General Act*, we will provide copies of our report to congressional committees with oversight and appropriation responsibility over the Department of Homeland Security. We will post the report on our website for public dissemination.

Please call me with any questions, or your staff may contact Thomas Kait, Deputy Inspector General for Inspections and Evaluations at (202) 981-6000.

Attachment



DHS OIG HIGHLIGHTS

Violations of ICE Detention Standards at Folkston ICE Processing Center and Folkston Annex

June 30, 2022

Why We Did This Inspection

In accordance with the Consolidated Appropriations Act, 2021, we conduct unannounced inspections of ICE detention facilities to ensure compliance with detention standards. In November 2021, we conducted an in-person inspection of Folkston Processing Center and Folkston Annex in Folkston, Georgia, to evaluate compliance with ICE detention standards and COVID-19 requirements.

What We Recommend

We made 13 recommendations to improve ICE's oversight of detention facility management and operations at Folkston.

For Further Information: Contact our Office of Public Affairs at (202) 981-6000, or email us at DHS-OIG.OfficePublicAffairs@oig.dhs.gov

What We Found

During our unannounced inspection of U.S. Immigration and Customs Enforcement's (ICE) Folkston Processing Center and Folkston Annex (collectively, "Folkston") in Folkston, Georgia, we found that Folkston complied with standards for access to legal services, the voluntary work program, and detainee classification. However, Folkston did not meet standards for facility conditions, medical care, grievances, segregation, staff-detainee communications, and handling of detainee property. We identified violations that compromised the health, safety, and rights of detainees. Folkston facilities were unsanitary and dilapidated, with torn mattresses, water leaks and standing water, mold growth and water damage, rundown showers, mold and debris in the ventilation system, insect infestations, lack of access to hot showers, inoperable toilets, an inoperable thermometer display on a kitchen freezer, and an absence of hot meals. Facility medical staff did not provide timely access to specialty care or adequate mental health care for detainees. Folkston did not provide timely or complete responses to detainee grievances and requests. Folkston also did not consistently provide required services to detainees in segregation and inappropriately handcuffed detainees. Further, ICE did not consistently respond to detainee requests in a timely manner and did not provide detainees with paper grievance forms and submission boxes as required. ICE also did not provide detainees sufficient contact with deportation officers. Lastly, the facility has improperly handled detainee property. In addition, Folkston has not met staffing levels required by the contract with ICE to ensure proper detainee oversight. In addressing COVID-19, Folkston did not consistently enforce use of masks and social distancing. In April 2021, Folkston began providing COVID-19 vaccinations to detainees.

ICE Response

ICE concurred with all 13 recommendations. We consider 12 recommendations resolved and closed and 1 recommendation resolved and open. See Appendix B for ICE's full response.



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Abbreviations

COVID-19	coronavirus disease 2019
ERO	Enforcement and Removal Operations
Folkston	collectively, Folkston ICE Processing Center and
	Folkston Annex
Folkston IPC	Folkston ICE Processing Center
ICE	U.S. Immigration and Customs Enforcement
PBNDS	Performance-Based National Detention Standards
SMU	Special Management Units
	1 0



Introduction

U.S. Immigration and Customs Enforcement (ICE) houses detainees at roughly 130 facilities nationwide, and the conditions and practices at those facilities can vary greatly. Nonetheless, ICE must comply with national detention standards and establish an environment that protects the health, safety, and rights of detainees. Our program of unannounced inspections of ICE detention facilities has identified and helped correct violations of the *2011 Performance-Based National Detention Standards* (2011 PBNDS) at facilities across the country. From November 16 through November 18, 2021, we conducted an unannounced in-person inspection of Folkston ICE Processing Center (Folkston IPC) and Folkston Annex in Folkston, Georgia, and identified concerns regarding detainee care and treatment. In this report, we use the term "Folkston" to refer collectively to Folkston IPC and Folkston Annex.

Background

ICE apprehends, detains, and removes noncitizens who are in the United States unlawfully. ICE Enforcement and Removal Operations (ERO) oversees the detention facilities it manages in conjunction with private contractors or state or local governments. Owned and operated by GEO Group, Inc., Folkston began housing detainees in 2017. In fiscal year 2021, Folkston IPC had an average daily population of 286 detainees with a maximum capacity of 780, while Folkston Annex had a daily average of 88 detainees with a maximum capacity of 338.

ICE's intergovernmental service agreement with Folkston requires the facility to comply with the 2011 PBNDS, as revised in December 2016. According to ICE, the 2011 PBNDS establish consistent conditions of confinement, program operations, and management expectations within ICE's detention system. These standards set requirements for areas such as:

• environmental health and safety, including cleanliness, sanitation, security, detainee searches, segregation,¹ and disciplinary systems;

¹ ICE, *Performance-Based National Detention Standards 2011*, Section 2.12, *Special Management Units* (revised Dec. 2016). Segregation is the process of separating certain detainees from the general population for disciplinary or administrative reasons. Detainees in segregation at Folkston are placed in individual cells. Detainees in disciplinary segregation can be held for no more than 30 days per incident, except in extraordinary circumstances. Detainees in disciplinary segregation are allowed out of their cells for 1 hour of recreation time at least 5 days a week. Detainees in administrative segregation are separated from the general population to ensure the safety of all detainees and can be held in segregation until their safety, and the safety of others, is no longer a concern. Detainees in administrative segregation are allowed out of their cells for up to 2 hours of recreation time and day room access at least



- detainee care, e.g., food service, medical care, and personal hygiene;
- activities, including visitation and recreation; and
- grievance systems.

As mandated by Congress,² we conduct unannounced inspections of ICE detention facilities to ensure compliance with detention standards. From November 16 through November 18, 2021, we made an unannounced, inperson inspection of Folkston to determine whether it complied with ICE's 2011 PBNDS. We also conducted a limited review of the facility's coronavirus disease 2019 (COVID-19) pandemic preparedness measures and its response to outbreaks of COVID-19 in the detainee population.³ We contracted with medical professionals to review facility medical files and have incorporated their assessments into our findings. At the start of the inspection, Folkston IPC housed 589 ICE detainees and Folkston Annex housed 213 ICE detainees. During our inspection, we conducted a walk-through of Folkston facilities, including detainee housing units, medical units, and indoor and outdoor recreation areas. We also interviewed ICE personnel, Folkston officials, and detainees.

Results of Inspection

During our unannounced inspection, we found that Folkston complied with standards for access to legal services, the voluntary work program, and detainee classification. However, Folkston did not meet standards for facility conditions, medical care, grievances, segregation, staff-detainee communications, and handling of detainee property. We identified violations that compromised the health, safety, and rights of detainees. According to our observations, Folkston facilities were unsanitary and dilapidated, with torn mattresses, water leaks and standing water, mold growth and water damage, rundown showers, mold and debris in the ventilation system, insect infestations, lack of access to hot showers, inoperable toilets, an inoperable thermometer display on a kitchen freezer, and an absence of hot meals. Facility medical staff did not provide timely access to specialty care or adequate mental health care for detainees. Folkston did not provide timely or complete responses to detainee grievances. Folkston also did not consistently provide required services to detainees in segregation and inappropriately handcuffed detainees. Further, ICE did not consistently respond to detainee requests in a

⁷ days a week. Detainees in both disciplinary and administrative segregation are also allowed time out of their cells for showers, phone calls, use of the law library, visitation, and religious services when those are offered.

² Consolidated Appropriations Act, 2021, Pub. L. No. 116-260, Division F, Department of Homeland Security Appropriations Act, 2021; H.R. Rep. No. 116-458 (2021).

³ The Office of Inspector General is also conducting a separate, in-depth evaluation of ICE's handling of COVID-19 in its detention facilities.



timely manner and did not provide detainees with paper grievance forms and submission boxes as required. ICE also did not provide detainees sufficient contact with deportation officers. Lastly, the facility improperly handled detainee property.

In addition, Folkston has not met staffing levels required by the contract with ICE to ensure proper detainee oversight. In addressing COVID-19, Folkston did not consistently enforce use of masks and social distancing. In April 2021, Folkston began providing COVID-19 vaccinations to detainees.

Folkston Complied with Standards for Access to Legal Services and the Voluntary Work Program

According to the 2011 PBNDS, facilities must ensure detainees have access to courts,⁴ counsel, legal rights groups,⁵ and legal materials, as well as the opportunity to voluntarily participate in facility work programs.⁶ Our review of Folkston's policies, guidance, and records showed the facility complied with these standards. Specifically, legal visitation occurred in person in private rooms as required or through live video streaming. A legal rights group was available to virtually educate detainees about the immigration process. For detainees who work, we found their work schedules did not exceed 8 hours per day for up to 40 hours per week. Detainees received between \$2 and \$3 dollars per day depending on their work, which meets payment guidelines. The facility's grievance log did not contain any allegations of detainees being forced to work in the work program.

Folkston Complied with the Standard for Detainee Classification

According to the 2011 PBNDS,⁷ facilities must classify detainees according to risk level and house them with others of similar background and criminal history, ensuring separation of high risk and low risk detainees. Our review of Folkston's policies, guidance, and classification records showed Folkston complied with the detainee classification standard. At Folkston, detainees who are classified as low or medium-low risk are housed together, and detainees who are classified medium-high or high risk are housed together. Our review of housing records, as well as our observations of detainees in housing units, did not reveal comingling of low or medium-low risk detainees with medium-high or high-risk detainees.

⁴ 2011 PBNDS, Section 6.3, Law Libraries and Legal Materials (revised Dec. 2016).

⁵ 2011 PBNDS, Section 6.4, Legal Rights Group Presentations (revised Dec. 2016).

⁶ 2011 PBNDS, Section 5.8, Voluntary Work Program (revised Dec. 2016).

⁷ 2011 PBNDS, Section 2.2, Custody Classification System (revised Dec. 2016).



Poor Conditions at Folkston Endangered the Health, Safety, and Rights of Detainees

We identified concerns with Folkston's living conditions, such as torn mattresses, water leaks and standing water, mold growth and water damage, rundown showers, mold and debris in the ventilation system, insect infestations, lack of access to hot showers, inoperable toilets, an inoperable thermometer display on a kitchen freezer, and an absence of hot meals for detainees in Folkston Annex. These living conditions not only violated ICE detention standards and detainee rights, but also posed health and safety risks to detainees.

Several Folkston Detainees Slept on Torn and Worn-Down Mattresses

According to the 2011 PBNDS, detainees must have suitable, clean bedding.⁸ However, during our site visit, detainees complained about uncomfortable mattresses. Several detainees in a Folkston IPC dormitory showed us worn-down mattresses with stuffing spilling out of them or sizable tears along the seams (see Figures 1 and 2). The condition of the mattresses we observed violated the standard for suitable, clean bedding.



Figures 1 and 2. Torn Detainee Mattresses Observed at a Dormitory in Folkston IPC

Source: DHS OIG photos

⁸ 2011 PBNDS, Section 4.5, Personal Hygiene (revised Dec. 2016).



Folkston Did Not Have Clean and Sanitary Conditions in Certain Areas

Although the 2011 PBNDS require "maintaining high facility standards of cleanliness and sanitation,"⁹ our inspection found that clean and sanitary conditions were not always present in the facility housing units.

Leaking and Standing Water Created Hazardous Conditions for Detainees

During our visit, we observed toilets and sinks leaking water onto the floor in the housing units (see Figures 3 and 4), which could lead to mold, mildew, or slips and falls.



Figures 3 and 4. Leaking Sink (left) and Toilet (right) Observed in Folkston IPC Housing Units Where Detainees Were Held

Source: DHS OIG photos

Detainees in Folkston IPC also showed us a shower that did not drain, creating standing water in the shower area that could pose a slip and fall hazard. During our visit, one detainee injured his arm after he slipped and fell in a housing unit where we had previously notified management of water leaks. In the kitchen, we observed a leaking sink with two large basins set beneath it to collect leaking water. Although facility staff repaired the kitchen sink by the conclusion of our visit, the leaks in the housing unit were still present when we departed the facility. Water leaks contribute to unsanitary and potentially hazardous conditions throughout the facility.

⁹ 2011 PBNDS, Section 1.2, *Environmental Health and Safety* (revised Dec. 2016).



Mold and Water Damage Were Pervasive Throughout the Housing Units

We also found extensive mold growth and signs of water damage throughout the facility. In both Folkston IPC and Folkston Annex, we observed showers that were rundown and covered with mold and peeling paint (see Figures 5 and 6).



Figures 5 and 6. Showers Observed in Folkston Housing Units Holding Detainees in Poor Condition with Peeling Paint and Mold Present

Source: DHS OIG photos

We also observed dirty and moldy ceiling air vents and signs of water damage in nearly every dormitory visited (see Figures 7–10).



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Figures 7 and 8. Blackened Air Vent with Mold Growth (left) and Water Damage Causing Paint to Bubble and Peel (right), Observed in Folkston IPC Housing Units

Source: DHS OIG photos



Figures 9 and 10. Ceiling Observed in a Folkston IPC Detainee Housing Unit, Showing Water Damage and Mold on the Ceiling (left) and in the Vent (right)

Source: DHS OIG photos

Detainees complained that they did not have adequate cleaning supplies to eliminate the mold. The mold growth we observed on showers, ceilings, and walls, as well as peeling paint and water damage, violated the standards for clean and sanitary conditions in the facility.



Some Detainee Areas in Folkston IPC Had Insect Infestations

We also observed signs of insect infestation in two parts of the facility. One cell in a detainee housing unit had a sign on its door warning that it should not be used to house detainees due to an infestation of ants, and we saw ants in other detainee cells (see Figure 11).



Figure 11. Sign Observed on Cell Door in Folkston IPC Housing Unit, Reading "ANTS: DO NOT HOUSE DETAINEES"

Source: DHS OIG photos

One detainee in Folkston Annex also showed us an infestation of gnats that lived in the drain of the sink in his cell and said the facility staff had not taken action to fix the situation. Insect infestations violated the standards for clean and sanitary conditions in the facility.

Some Detainees Did Not Have Access to Hot Showers

According to the 2011 PBNDS, detention facilities must provide detainees with showers that have hot water.¹⁰ We tested showers in detainee housing units and found two dormitories in Folkston IPC did not provide hot water in showers as required, leaving 127 detainees without the opportunity for a hot shower. Detainees in both dormitories reported not having had hot showers for several days. It is imperative that Folkston provide detainees access to hot showers for their personal hygiene.

¹⁰ 2011 PBNDS, Section 4.5, Personal Hygiene (revised Dec. 2016).



Toilets in Detainee Housing Units Were Inoperable

The 2011 PBNDS require that housing units provide detainees access to one toilet for every 12 detainees and that these toilets can be used without staff assistance.¹¹ Folkston had the required number of toilets installed in the housing units (all male housing units), but several toilets were not usable during our inspection. In a housing unit, only three of eight toilets were operable for 67 detainees. Detainees need adequate access to toilets for sanitation and personal hygiene.

Kitchen Thermostat Not Functioning to Ensure Proper Food Storage

According to the 2011 PBNDS, all walk-in freezers and refrigerators for food storage must be equipped with accurate, easy-to-read thermometers.¹² In the food storage units we inspected, the external temperature display for one freezer (used by kitchen staff to monitor freezer temperature) was inoperable. Kitchen staff need an accurate reading on the temperature in freezers to avert the risk of food spoilage.

Detainees in Folkston Annex Received Cold Meals

The 2011 PBNDS require that detainees be served three meals each day, at least two of which are to be served hot.¹³ Meals at Folkston IPC were served hot as required, but meals at Folkston Annex were not. Because the annex kitchen was not in use, meals for the Folkston Annex detainees were prepared in the Folkston IPC kitchen about 2 hours before being served at the Folkston Annex. Facility staff explained they had no means of keeping the meals warm once they were prepared, and the meals were transported without warmers for the approximate 5-minute drive between facilities. Several detainees at Folkston Annex complained that their meals always arrived cold. Serving cold meals to the detainees in Folkston Annex violates the standard for food service.

Folkston Did Not Provide Timely Access to Specialty Care or Adequate Mental Health Care for Detainees

Two medical clinics in the facility provide medical care: the Folkston IPC clinic (staffed by contractor GEO Group, Inc.) and the Folkston Annex clinic (staffed by ICE's Health Service Corps). Reviews of health records completed by our contracted medical experts showed that detainees were transferred between the Folkston IPC clinic and the Folkston Annex clinic for health care.

¹¹ 2011 PBNDS, Section 4.5, Personal Hygiene (revised Dec. 2016).

¹² 2011 PBNDS, Section 4.1, Food Service (revised Dec. 2016).

¹³ *Id*.



Our contracted medical experts identified two issues regarding an absence of coordinated care. First, off-site specialty care did not occur in a timely manner for detainees who moved between Folkston IPC and Folkston Annex. If a detainee at Folkston IPC had a specialty appointment scheduled by Folkston IPC medical staff and was then transferred to Folkston Annex, the Folkston IPC medical staff canceled the scheduled appointment as part of the transfer process, and medical staff at Folkston Annex would need to reschedule the appointment for that detainee, causing delays. As an example, one detainee who was moved multiple times between the Folkston facilities went 1 year without receiving ordered off-site optometry and dental care due to this cycle of scheduling and canceling. Because Folkston medical clinics do not coordinate the scheduling of specialty care visits for detainees, detainees experienced delays in receiving needed medical care.

Second, detainees had inadequate access to mental health care for suicide prevention. The 2011 PBNDS¹⁴ require Folkston suicide prevention and followup care program to have (1) cells for detainees that have been appropriately retrofitted to be "suicide resistant" and (2) qualified mental health staff to direct and provide the services required during suicide-crisis and post-crisis periods. Our inspection found that the Folkston IPC clinic had the appropriate cells but did not have the qualified personnel to provide this type of care. On the other hand, the Folkston Annex clinic had the required personnel but did not have the appropriate cells for detainees in need of suicide prevention and care. Given these challenges, the medical leadership teams at both clinics discussed a plan that all detainees in crisis would be housed and monitored in the Folkston IPC clinic's suicide-resistant cells and then transferred to the Annex Clinic's cells post crisis. This split in operations presents a challenge to ensuring coordinated care for detainees in need of suicide services and could result in a detainee not receiving needed crisis care in a timely and safe manner.

Folkston Did Not Provide Timely or Complete Responses to Detainee Grievances and Facility Requests

The 2011 PBNDS establish procedures for detainees to file grievances regarding any aspect of their detention,¹⁵ to ensure all detainees are treated fairly. The grievance system standard requires the facility to respond to any detainee grievance within 5 days and ensure review and resolution. Folkston instructs detainees to submit formal grievances using paper forms, which are deposited

¹⁴ 2011 PBNDS, Section 4.6, *Significant Self Harm and Suicide Prevention and Intervention* (revised Dec. 2016).

¹⁵ 2011 PBNDS, Section 6.2, *Grievance System* (revised Dec. 2016).



in secure drop boxes in the detainee housing units. Folkston has a grievance official who logs and distributes the grievances to relevant case managers for responses. The grievance official then receives the responses and distributes them to case managers to provide to detainees and file in the detainees' records. If detainees do not agree with the responses provided, they can file an appeal through multiple levels of facility and ICE staff. Between May 15, 2021, and November 15, 2021, detainees at Folkston filed 20 paper grievances. We identified missing or incomplete responses for 13 of 20 grievances reviewed, or 65 percent. For example, one detainee complained about missing property, but the facility only replied that the matter was being worked on. In another example, a detainee complained about an issue with laundry services, but the facility only replied that the laundry department would reach out to the detainee complaint. Without a timely and fully compliant grievance process, Folkston risks ignoring or worsening serious deficiencies in the facility.

Additionally, Folkston allows detainees to submit electronic requests for services provided in the facility, including laundry, law library, mail, work program, barber shop, library, recreation, religious programs, commissary, classification, telephone calls, and food service. Between May 15, 2021, and November 15, 2021, detainees filed more than 6,500 requests using the electronic tablet systems in the detainee housing units. We found the facility responses frequently took longer than the required 5-day timeframe or were not responsive to requests regarding detainee property, food service, laundry, and intake and management requests. Specifically:

- Detainees filed 319 property requests, with 33 missing responses (10 percent) and 57 late responses (18 percent).
- Detainees filed 191 food service requests, with 10 missing responses (5 percent) and 22 late responses (11 percent).
- Detainees filed 2,241 laundry requests, with 325 missing responses (14 percent) and 47 late responses (2 percent).
- Detainees filed 311 intake requests, with 39 missing responses (12 percent) and 73 late responses (23 percent).
- Detainees filed 96 management requests, with 17 missing responses (18 percent) and 31 late responses (32 percent).

In one example of non-responsive replies, one detainee filed a grievance indicating that when laundry was sent out, either the laundry did not return, or it would come back still wet. The facility would check with ICE and the laundry supervisor, but never responded specifically to the complaint on how it would be resolved. In the same grievance, the detainee complained that his shoes were in poor condition, and the facility responded that the laundry



supervisor would reach out to replace the shoes. However, the facility provided no further information that it actually replaced the shoes and addressed the complaint. Detainees depend on timely responses as affirmation that the facility is taking their complaints and requests seriously and working to remedy concerns.

Folkston Did Not Consistently Provide Required Services and Privileges to Detainees in Segregation and Inappropriately Handcuffed Detainees

The 2011 PBNDS govern the use of administrative and disciplinary segregation at detention centers. Administratively segregated detainees should receive access to the same privileges as those in the general population, including access to recreation, legal calls, laundry services for bedding and clothing, mail, legal materials, the law library, and the commissary.¹⁶ We reviewed the segregation files for the four detainees in administrative segregation at the time of our inspection.¹⁷ We found that Folkston inappropriately placed segregated detainees in a housing unit that was being used to quarantine new detainees to reduce the spread of COVID-19. Folkston also did not conduct daily medical monitoring of the segregated detainees.

The facility did not keep appropriate segregation logs¹⁸ for the four detainees it held in administrative segregation, so we could not determine whether they had access to recreation, legal calls, laundry services for bedding and clothing, mail, legal materials, law library, and commissary. In interviews, detainees being held in administrative segregation reported that they did not have access to many required services.

Additionally, facility staff reported that Folkston policy was to handcuff detainees in disciplinary segregation anytime they left their cell, without further rationale for the restraints, which contradicts ICE standards. According to the 2011 PBNDS, placement in disciplinary segregation alone does not constitute a valid basis for using restraints.¹⁹

ICE Communication Practices with Detainees Were Deficient

The 2011 PBNDS establish procedures for contact among staff and detainees, including written communication and observation of living conditions.²⁰ These

¹⁸ 2011 PBNDS, Section 2.12, Special Management Units (revised Dec. 2016).

¹⁶ 2011 PBNDS, Section 2.12, Special Management Units (revised Dec. 2016).

¹⁷ There were no detainees in disciplinary segregation at the time of our inspection.

¹⁹ *Id*.

²⁰ 2011 PBNDS, Section 2.13, *Staff-Detainee Communication* (revised Dec. 2016).



procedures require ICE to log all requests and respond in a timely manner. Detainees file requests using either electronic tablets or paper forms deposited in secure drop boxes in the housing units. Although required, we found that ICE did not provide timely responses and, in many cases, did not respond to detainee requests at all. Additionally, ICE restricted the submission of detainee communications with ICE to electronic means only (via tablets), as ICE did not provide paper forms or check the drop boxes where detainees would submit written requests.

The 2011 PBNDS also require that ICE staff visit detainees at the facility and post the scheduled days and hours for ICE staff visits.²¹ The ICE visitation schedule must be posted in housing units and included in the detainee handbook. However, ICE did not communicate in its visitation schedule to Folkston detainees, specific times and housing units that deportation officers would be visiting to address their concerns.

ICE Did Not Provide Timely Responses to Detainee Requests

The 2011 PBNDS establish procedures for detainees to submit written requests to ICE and require ICE to respond within 3 business days of receipt.²² We determined ICE struggled to provide timely responses to detainee requests. According to request logs, Folkston detainees submitted 7,290 requests from May 30, 2021, to November 30, 2021. ICE staff responded to only 2,967 requests, or approximately 41 percent. Of the 2,967 requests that received responses, 1,304, or approximately 44 percent, were not answered within the required 3-day timeframe. Moreover, our analysis revealed that ICE provided no response to 324 of 2,967 detainee complaints, or approximately 11 percent. Onsite ICE personnel were aware of the delayed and missing responses to detainee requests. Without timely answers from ICE, detainees may face undue delays resolving important questions or concerns, such as those related to their immigration cases or detention conditions.

ICE Restricted Detainee Request Submissions to Tablet Only

The 2011 PBNDS require facilities to allow detainees to submit written questions, requests, grievances, or concerns to ICE staff using a standardized form, a local form, or a sheet of paper.²³ We found that onsite ICE personnel restricted the submission of detainee requests to electronic means only, via tablets in the detainee housing units. We observed secure drop boxes with no paper forms available in the detainee housing units, and onsite ICE staff

 $^{^{21}}$ *Id*.

²² Id.

²³ Id.



admitted to not checking the drop boxes. The restriction to tablet-only submissions reduces the available options for detainees to report issues with facility conditions, questions, or concerns.

ICE Did Not Provide Detainees Sufficient Contact with Deportation Officers

The 2011 PBNDS require ICE to post scheduled days and hours when ICE staff will be visiting housing units and include this information in the facility detainee handbook.²⁴

ICE did not provide sufficient detail to Folkston detainees about when visits would occur in each housing unit. Although ICE posted notification in housing units stating visits would occur on Wednesdays from 8 a.m. to 4 p.m., the poster did not specify exact times for visits to each housing unit. Additionally, the posted schedule had outdated contact information for the ICE staff members. Folkston detainees did not have enough information to ensure they would not miss the opportunity to meet with their deportation officer if they attended other activities such as recreation or religious services. In addition, ICE could not fully document it actually completed its Wednesday visits to detainee housing units according to its schedule. We reviewed eight current detainee housing unit logs to substantiate if ICE was following its visitation schedule and found that only two housing units had ICE staff visits documented.

Folkston Did Not Properly Handle Detainee Property

The 2011 PBNDS require detention centers to safeguard and control detainees' personal property, including funds, valuables, and baggage.²⁵ In September 2021, ICE personnel found four boxes of abandoned detainee property at Folkston. This property had not been tagged and marked with detainees' identifying information so the property could be returned to the detainees when they left the facility. During our onsite inspection, we found the property room still had issues, including unmarked detainee property with high-value contents such as phones, watches, and foreign currency. Additionally, we found detainee baggage improperly secured (i.e., cable ties were not used to secure zippered openings), allowing the bags' contents to be accessed. (See Figures 12 and 13 for illustrative examples of these issues.) Improper handling of detainee property can allow for theft or cause the facility to be unable to return property to detainees when they leave the facility.

²⁴ 2011 PBNDS, Section 2.13, *Staff-Detainee Communication* (revised Dec. 2016).

²⁵ 2011 PBNDS, Section 2.5, Funds and Personal Property (Revised Dec. 2016).





Figures 12 and 13. Unmarked High-Value Detainee Property (left), and Improperly Secured Detainee Backpack Allowing Access to Contents (right)

Source: DHS OIG photos

Folkston Staffing Levels Were Deficient

The ICE contract with Folkston specifies staffing requirements for the safety and security of detainees. In accordance with the contract, Folkston must maintain 95 percent of the approved staffing plan. However, Folkston has not met this contract condition. ICE attempted to charge Folkston financial penalties for not meeting the staffing requirement through contract discrepancy reports filed in 2019 and 2021. In those reports, ICE identified concerns regarding the facility's inability to consistently facilitate after-hours releases, inconsistent staffing of medical clinics, inadequate supervision in detainee housing units, insufficient intake staff, lack of officer oversight of security doors, and issues ICE staff had accessing areas of the facility. However, we found that ICE did not enforce the financial penalties outlined in the 2019 and 2021 contract discrepancy reports. While both ICE and Folkston agreed that the incremental and insufficient staffing levels must be addressed to resolve many of the safety and security concerns, the facility has still not come into compliance with staffing requirements for the facility. As a result, the facility has continued to receive full contract funding without consequence for failing to meet the terms of the agreement.

In September 2021, Folkston transitioned officers to 12-hour shifts with the possibility of 4 additional mandatory overtime hours, for a maximum 16-hour workday, to help address its staffing shortage. During our November 2021



visit, however, Folkston had only 102 officers present, or 57 percent of the contract requirement of approximately 179 officers.

Folkston Took Some Measures to Prevent the Spread of COVID-19 but Did Not Consistently Enforce Mask Wearing and Social Distancing Protocols

We conducted a limited review of Folkston's response to COVID-19 and identified areas for improvement. Although Folkston took some measures to prevent the spread of COVID-19, such as restricting some services and providing masks to detainees, we observed inconsistent mask wearing and social distancing during our November 2021 walk-through of multiple housing units. We also observed numerous detainees and facility staff not wearing masks when within 6 feet of each other despite assertions by facility staff that most detainees and staff were compliant with mask and social distancing protocols.

Since March 2020, 309 detainees at Folkston IPC and 72 detainees at Folkston Annex have tested positive for COVID-19²⁶ and 1,515 detainees have received doses of the COVID-19 vaccine.²⁷

Folkston Restricted Services and Social Activities in Response to COVID-19

In March 2020, ICE directed all detention facilities, including Folkston, to restrict certain activities in response to the COVID-19 pandemic.²⁸ This included halting in-person social visitation and visits by outside groups; visits from legal representatives were still allowed. To compensate for the lost visitation, Folkston provided each detainee with 13 free 10-minute telephone calls per week. The facility also paused visits by outside religious groups, relying on the facility chaplain to provide in-person religious services. Folkston restricted barber shop services to one dormitory at a time rather than the prepandemic practice of open access for all detainees. Folkston also stopped using the dining hall to feed detainees, requiring detainees to eat in their dormitories instead.

²⁶ ICE number of reported COVID-19 cases as of December 6, 2021.

²⁷ Folkston's reported number of detainees who received doses of the COVID-19 vaccine as of December 6, 2021.

²⁸ ICE, Memorandum on Coronavirus Disease 2019 (COVID-19) Action Plan, Revision 1, Mar. 27, 2020.



Folkston Staff and Detainees Did Not Consistently Wear Masks or Practice Social Distancing

ICE's *Pandemic Response Requirements*, Version 7, dated October 7, 2021, states all staff and detainees should wear masks, and whenever possible, all staff and detainees should maintain a distance of 6 feet from one another to help slow the spread of COVID-19. Folkston staff told us detainees are required to wear masks at all times when they are inside the facility, including in their housing units, unless they are drinking, eating, or sleeping. However, detainees told us most of them do not wear masks as required, and there are no consequences for not doing so. During our November 2021 walk-through across multiple housing units, we observed numerous detainees within 6 feet of each other and not wearing masks or practicing social distancing, as shown in Figures 14 and 15.



Figure 14. Folkston IPC Detainees in Their Housing Unit Not Wearing Masks and Not Practicing Social Distancing on November 16, 2021

Source: DHS OIG photo





Figure 15. Folkston IPC Detainees in Their Housing Unit Not Wearing Masks and Not Practicing Social Distancing on November 16, 2021

Source: DHS OIG photo

Folkston staff told us they must also wear masks over their nose and mouth when they are inside the facility and within 6 feet of others. Nevertheless, we observed facility staff not wearing their masks over their nose and mouth in interactions with OIG staff and detainees. The facility risks additional COVID-19 spread by not ensuring staff and detainees wear masks and practice social distancing within the housing unit.

Folkston Began Vaccinating Detainees

According to data provided by facility officials, Folkston began its COVID-19 vaccination program in April 2021 and had vaccinated 1,515 detainees as of December 6, 2021. Staff reported that most detainees receive the COVID-19 vaccine when they first arrive at the facility, but if they initially decline it, detainees can receive the vaccine later.

Recommendations

We recommend the Executive Associate Director of Enforcement and Removal Operations direct the Atlanta ERO Field Office Director responsible for Folkston to:

Recommendation 1: Ensure the Folkston facility conditions we identified as deficient are corrected and in compliance with 2011 PBNDS requirements.



Recommendation 2: Establish coordination of medical care for detainees moved between Folkston IPC and Folkston Annex and ensure timely access to specialty care.

Recommendation 3: Address medical staffing issues at Folkston IPC to ensure adequate mental health care for detainees.

Recommendation 4: Require Folkston staff to complete daily medical monitoring of detainees in administrative segregation.

Recommendation 5: Provide detainees in segregation at Folkston IPC access to recreation, legal calls, laundry services for bedding and clothing, mail, legal materials, law library, and commissary.

Recommendation 6: Ensure Folkston segregation practices related to handcuffing comply with 2011 PBNDS requirements.

Recommendation 7: Establish a grievance and facility request tracking system to ensure timely and complete responses to all detainee requests filed at Folkston.

Recommendation 8: Ensure Folkston meets ICE's COVID-19 requirements for wearing masks and social distancing.

Recommendation 9: Establish a requests tracking system to ensure timely and complete responses to all detainee requests filed at Folkston.

Recommendation 10: Provide ICE visitation schedules, including the time, duration, and location for housing unit visits, to ensure Folkston detainees are aware of their regular access to assigned ICE ERO deportation officers.

Recommendation 11: Ensure ICE provides copies of ICE request forms and secure drop boxes in all Folkston housing units.

Recommendation 12: Ensure Folkston maintains staffing levels outlined in the ICE contract.

Recommendation 13: Ensure Folkston properly secures and stores detainee personal property.



Management Comments and OIG Analysis

ICE concurred with all 13 recommendations. Appendix B contains ICE management comments in their entirety. We also received technical comments on the draft report and made revisions as appropriate. We consider 12 recommendations resolved and closed and 1 recommendation resolved and open.

A summary of ICE's responses to our recommendations and our analysis follows.

Recommendation 1: Ensure the Folkston facility conditions we identified as deficient are corrected and in compliance with 2011 PBNDS requirements.

ICE Response to Recommendation 1: Concur. Folkston IPC did not agree with the OIG's finding that detainees lacked sufficient hot water. On November 15, 2021, prior to the OIG's unannounced inspection, a weekly preventative maintenance check discovered two of five water heaters in housing unit A were inoperable. On November 18, 2022, the last day of the OIG inspection, one water heater was replaced, and the second water heater was repaired. Detainees may have experienced slower access, but they always had access to hot water.

Folkston developed a spreadsheet to identify and track all inoperable toilets, sinks, and leaks. As a result, the repairs to the deficient fixtures noted by the OIG were completed on November 24, 2021.

On December 15, 2021, Folkston completed caulking all windows and expansion joints in the cells to address any leaks. To ensure compliance with the detention standard, weekly inspections are recorded in the facility's database known as the "Facility Dude." This database also tracks work orders to make sure repairs are promptly resolved.

The OIG's inspection identified that the outside thermostats on the freezers were not working. However, the thermometers inside the food storage units were working. On February 1, 2022, a digital thermometer was installed that simultaneously monitors the two freezers, the cooler, and the dry storage area. Furthermore, the torn and worn-down mattresses were immediately replaced. Folkston IPC regularly orders new mattresses and will ensure an adequate inventory is maintained at the warehouse.

Immediately following the OIG's inspection, Folkston IPC inspected all the facility ventilation screens and vents, and they were properly cleaned, disinfected, and painted. Folkston IPC noted that no mold was found during



this inspection. The ventilation screens and vents will receive monthly preventative maintenance.

ICE provided the OIG documentation corroborating these efforts under a separate cover on May 25, 2022. ICE requests the OIG consider this recommendation resolved and closed, as implemented.

OIG Analysis: We consider these actions responsive to the recommendation, which is, therefore, resolved and closed. ICE documented that it initiated and completed the work orders for the facility condition issues identified in the report. ICE provided documentation and pictures showing the corrections had been fully completed.

Recommendation 2: Establish coordination of medical care for detainees moved between Folkston IPC and Folkston Annex and ensure timely access to specialty care.

ICE Response to Recommendation 2: Concur. The Folkston Annex staff uses an electronic medical record transfer summary that includes outside medical appointments. Process enhancements include the staff obtaining the appointment details, such as date, specialty, and provider, and adding them to the transfer summary since the Folkston Main uses many of the same medical providers. Specifically, this information will be added to a text box on the transfer summary so that Folkston Main will have all details for any upcoming appointments, to facilitate contact with the local medical provider for any follow-up information required, and/or confirm or reschedule an appointment, if necessary. The Folkston Annex medical record technicians will also reach out to outside medical providers to inform them of any transfer. In addition, the Folkston Annex Health Service Administrator or designee will communicate directly with the Folkston Main Health Service Administrator and the Director of Nursing to brief them on any pending outside medical appointments as well as any chronic conditions. The Folkston IPC drafted a local operating procedure to outline and describe the procedures for the continuation of care. On February 1, 2022, the local operating procedure was approved by ERO leadership.

ICE provided the OIG documentation corroborating these efforts under a separate cover on May 25, 2022. ICE requests the OIG consider this recommendation resolved and closed, as implemented.

OIG Analysis: We consider these actions responsive to the recommendation, which is, therefore, resolved and closed. ICE documented that it established a transfer policy and process between Folkston IPC and Folkston Annex to ensure coordination between the medical departments at both facilities. The



facilities are now working to ensure detainees' outside medical visits are coordinated and details related to those visits are transferred between both medical departments.

Recommendation 3: Address medical staffing issues at Folkston IPC to ensure adequate mental health care for detainees.

ICE Response to Recommendation 3: Concur. On January 3, 2022, Folkston Main hired a psychologist to conduct telehealth visits for mental health. The psychologist sees patients on a weekly basis on Monday, Wednesday, Thursday, and Friday. The psychiatrist has been on staff since January 20, 2017, and sees patients on Tuesdays. On January 23, 2022, a licensed social worker was hired and is onboard at the Folkston IPC.

ICE provided the OIG documentation corroborating these efforts under a separate cover on May 25, 2022. ICE requests the OIG consider this recommendation resolved and closed, as implemented.

OIG Analysis: We consider these actions responsive to the recommendation, which is, therefore, resolved and closed. ICE documented that the facility has hired two additional mental health providers to ensure mental health services for detainees.

Recommendation 4: Require Folkston staff to complete daily medical monitoring of detainees in administrative segregation.

ICE Response to Recommendation 4: Concur. In November 2021, field office management held a meeting in which it was communicated to staff that they needed to complete daily medical monitoring of detainees housed in administrative segregation and Special Management Units (SMU). The message was reinforced that detainees in administrative segregation and SMU are to be medically monitored and seen daily by nursing staff. Field office management will ensure this occurs as required.

ICE provided the OIG documentation corroborating these efforts under a separate cover on May 25, 2022. ICE requests the OIG consider this recommendation resolved and closed, as implemented.

OIG Analysis: We consider these actions responsive to the recommendation, which is, therefore, resolved and closed. ICE documented that the facility has communicated to medical staff to ensure they are providing daily medical checks for all detainees held in segregation. ICE also documented the facility reinforced the requirements for daily checks in segregation during the monthly medical staff meetings.



Recommendation 5: Provide detainees in segregation at Folkston IPC access to recreation, legal calls, laundry services for bedding and clothing, mail, legal materials, law library, and commissary.

ICE Response to Recommendation 5: Concur. As required by ICE's PBNDS section 2.12 titled "Special Management Units," ICE detention facilities must provide recreation, legal calls, laundry services, mail, legal materials, and access to the law library to detainees placed in SMU. As such, Folkston IPC detainees housed in the SMU have access to the commissary and they may place orders by noon each Tuesday and they will receive their orders on the Thursday of the same week. Commissary orders are not listed on a detainee's confinement card. However, the Commissary maintains records of all orders and purchases made by detainees in SMU.

ICE ERO will ensure that detainees placed in the SMU are monitored daily by medical staff. ERO revised the SMU confinement card to now include a line for the Unit Officer to initial and confirm medical rounds are completed daily for each detainee housed in SMU. Any discrepancies will be immediately reported to the security supervisor.

ICE provided the OIG documentation corroborating these efforts under a separate cover on May 25, 2022. ICE requests the OIG consider this recommendation resolved and closed, as implemented.

OIG Analysis: We consider these actions responsive to the recommendation, which is, therefore, resolved and closed. ICE documented that it updated its process to ensure detainees in segregation are offered all required services. ICE provided an updated confinement activity record which tracks all required services to ensure they are provided daily to detainees. In addition, the facility has established a daily schedule to ensure that detainees are provided each service every day.

Recommendation 6: Ensure Folkston segregation practices related to handcuffing comply with 2011 PBNDS requirements.

ICE Response to Recommendation 6: Concur. The OIG's finding of the use of restraints for detainees in SMU has been addressed and corrected by ERO. ERO updated Folkston IPC post orders to indicate that placement in SMU does not constitute a valid basis for the use of restraints while in segregation, or during movement around the facility. Restraints should only be used, if necessary, as a precaution against escape during transfer, for medical reasons when directed by the medical office or to prevent self-injury, injury to others, or serious property damage.



ICE provided the OIG documentation corroborating these efforts under a separate cover on May 25, 2022. ICE requests the OIG consider this recommendation resolved and closed, as implemented.

OIG Analysis: We consider these actions responsive to the recommendation, which is, therefore, resolved and closed. ICE documented that the facility updated its policy related to handcuffing. The new policy requires that the facility have a documented basis for handcuffing each detainee.

Recommendation 7: Establish a grievance and facility request tracking system to ensure timely and complete responses to all detainee requests filed at Folkston.

ICE Response to Recommendation 7: Concur. Folkston IPC has a detainee grievance tracking system. However, ICE acknowledges the OIG finding of one grievance that did not have a resolution in the grievance form. The Folkston IPC grievance officer was reminded to carefully review each grievance to verify compliance with all requirements of the 2011 PBNDS standards. Moving forward, the Assistant Facility Administrator will review the grievance log monthly to ensure compliance. Immediately following the OIG inspection, hanging wall pockets were placed in all housing units to maintain an adequate supply of grievance and detainee request forms. Case managers visit the housing units daily to ensure all forms are stocked and any completed forms are retrieved for action. The rounds completed by the case managers are maintained in a logbook to verify compliance.

ICE provided the OIG documentation corroborating these efforts under a separate cover on May 25, 2022. ICE requests the OIG consider this recommendation resolved and closed, as implemented.

OIG Analysis: We consider these actions responsive to the recommendation, which is, therefore, resolved and closed. ICE documented that the facility updated its grievance procedures to ensure the facility is tracking and responding to detainee grievances timely.

Recommendation 8: Ensure Folkston meets ICE's COVID-19 requirements for wearing masks and social distancing.

ICE Response to Recommendation 8: Concur. Folkston IPC operates under the guidelines of the PRR, which is in alignment with the CDC [Centers for Disease Control and Prevention] *Interim Guidance on Management of COVID-19 in Correctional and Detention Facilities.* To mitigate the spread of COVID-19, all detainees receive verbal and written information on the preventive measures



they must take, such as social distancing and wearing a mask, during their initial orientation. They also receive personal protective equipment upon intake and throughout their stay at the detention facility. Deportation officers continually communicate and instruct detainees to maintain social distance and to wear personal protective equipment. Detainees are required to wear a mask as they transit throughout the facility, and they are continually reminded. If detainees are seen without a mask, they are provided one for their use on the spot.

Additionally, control centers at Folkston main and Annex announce COVID-19 preventative measures and COVID-19 signage detailing mitigation measures are posted throughout the facility. Folkston IPC continues to sanitize hard surfaces and high contact areas. COVID-19 protocols are also a daily agenda topic in staff briefings. In addition, communication alerts are sent out to all facility staff, reminding them of the COVID-19 protocols. On December 7, 2021, a memo was disseminated to all detention facility staff reminding them of the requirement to always wear face masks while on duty.

ICE ERO would like to note that every detainee who tested positive for COVID-19 while housed at Folkston IPC successfully recovered due to the care they were provided and the protocols in place to mitigate the spread of COVID-19. ICE will continue to follow the CDC's guidance, and will adapt its protocols, as appropriate.

ICE provided the OIG documentation corroborating these efforts under a separate cover on May 25, 2022. ICE requests the OIG consider this recommendation resolved and closed, as implemented.

OIG Analysis: We consider these actions responsive to the recommendation, which is, therefore, resolved and closed. ICE documented that the facility reminded staff to wear proper protective masks when entering the facility and throughout the facility. ICE also provided documentation that the facility is providing two cloth masks to each detainee when they arrive at the facility and providing education about COVID 19.

Recommendation 9: Establish a requests tracking system to ensure timely and complete responses to all detainee requests filed at Folkston.

ICE Response to Recommendation 9: Concur. Folkston IPC uses the Talton electronic system for the submission and tracking of detainee requests. Detainees can electronically submit requests directly to their assigned Deportation Officer. Also, detainees continue to have the capability to complete a paper request form and drop it in the secure drop-box located in their designated housing unit. An ERO Deportation Officer routinely visits the



dormitories daily to collect all the paper request forms and provides written responses to the detainees within three business days of receipt. These actions have been in place at Folkston IPC. However, these procedures were reinforced to detention staff on May 15, 2022.

ICE provided the OIG documentation corroborating these efforts under a separate cover on May 25, 2022. ICE requests the OIG consider this recommendation resolved and closed, as implemented.

OIG Analysis: We consider these actions responsive to the recommendation, which is, therefore, resolved and closed. ICE provided documentation showing it reinforced the detainee request tracking process to detention staff and ensuring timely and complete responses.

Recommendation 10: Provide ICE visitation schedules, including the time, duration, and location for housing unit visits, to ensure Folkston detainees are aware of their regular access to assigned ICE ERO deportation officers.

ICE Response to Recommendation 10: Concur. Folkston IPC posted in all housing unit pods visitation schedules, including the time, duration, and location for facility visits to ensure Folkston detainees are aware of regular access to assigned ERO Deportation Officers. On November 29, 2021, a log was created and implemented for ERO Deportation Officers to document each pod visit.

ICE provided the OIG documentation corroborating these efforts under a separate cover on May 25, 2022. ICE requests the OIG consider this recommendation resolved and closed, as implemented.

OIG Analysis: We consider these actions responsive to the recommendation, which is, therefore, resolved and closed. ICE provided documentation establishing an ICE visitation schedule for each housing unit in both Folkston IPC and Folkston Annex which includes the dates, times, and locations of the visits. The updated visitation schedule has been posted in the detainee housing units, and ICE provided documentation that it has been adhering to the newly established schedule.

Recommendation 11: Ensure ICE provides copies of ICE request forms and secure drop boxes in all Folkston housing units.

ICE Response to Recommendation 11: Concur. Folkston IPC uses the Talton system enabling detainees to send requests or questions to ICE ERO at any time by using tablets located in each dormitory. Detainees can login to the tablet using a pin number to submit requests, questions, or grievances directly



to the facility staff or ERO. When a request is answered by an ERO officer, detainees receive a notification through the tablet which they can access any time they log in to review the response. The system automatically logs all requests and responses. While most of the staff and detainee communication is conducted via the Talton system, paper request forms are available to be submitted through the secure drop-box located in each designated housing unit.

An ERO Deportation Officer routinely visits the dormitories daily to collect all the paper request forms and provides written responses to the detainees within three [3] business days of receipt. These actions have been in place at Folkston IPC. However, the procedures were reenforced to detention staff on May 15, 2022.

ICE provided the OIG documentation corroborating these efforts under a separate cover on May 25, 2022. ICE requests the OIG consider this recommendation resolved and closed, as implemented.

OIG Analysis: We consider these actions responsive to the recommendation, which is, therefore, resolved and closed. ICE provided documentation showing it reinforced to detainee staff the process of providing copies of ICE request forms in detainee housing areas and having deportation officers retrieve those requests daily.

Recommendation 12: Ensure Folkston maintains staffing levels outlined in the ICE contract.

ICE Response to Recommendation 12: Concur. Folkston IPC is actively and aggressively hiring to fill all vacant positions. Several hiring events have been hosted in Folkston, Georgia, surrounding towns and more hiring events are being planned. During the OIG inspection, Folkston IPC had 202 cleared staff members authorized to work during the week of November 16, 2021, and as of April 14, 2022, there are a total of 222 staff onboard. There was a 10 percent increase in staffing. In addition, there are currently 127 applicants who have accepted job offers, 85 of which are awaiting clearance and are listed on ICE's Personnel Security Unit background screening report. While the new applicants onboard, Folkston IPC is covering all post shifts using overtime at the vendor's expense. The Atlanta Field Office will continue to closely monitor the staffing levels at Folkston IPC.

ICE provided the OIG documentation corroborating these efforts under a separate cover on May 25, 2022. ICE requests the OIG consider this recommendation resolved and closed, as implemented.



OIG Analysis: We consider these actions responsive to the recommendation, which is resolved and open. ICE provided documentation that the facility has worked to improve its staffing levels. The facility has held job fairs and publicized its vacancies using billboards and flyers. We will close this recommendation once the staff levels at the facility meet the ICE contract requirements.

Recommendation 13: Ensure Folkston properly secures and stores detainee personal property.

ICE Response to Recommendation 13: Concur. All detainee property is entered and tracked in Folkston IPC's "GEOTrack" system. When detainees are admitted to Folkston IPC, their personal property is logged in the system and when they are released the GEOTrack record is compared to the physical property to confirm accuracy. Following the OIG's finding, the facility completed its quarterly inventory of detainee property, and any discrepancies were reviewed by ERO. Also, an ERO Deportation officer has been assigned to regularly inspect the property room to ensure policies and procedures are being adhered to for compliance. In addition, abandoned property was disposed of according to applicable 2011 PBNDS requirements.

ICE provided the OIG documentation corroborating these efforts under a separate cover on May 25, 2022. ICE requests the OIG consider this recommendation resolved and closed, as implemented.

OIG Analysis: We consider these actions responsive to the recommendation, which is, therefore, resolved and closed. In addition to actions just described, ICE provided documentation describing the duties of the property custodian to ensure detainee property is properly secured and stored. ICE issued the facility storage instructions for detainee property. The facility also provided examples of its electronic property tracking to ensure it is logged in the Folkston system for tracking and storage while detainees are held in the facility and then returned to the detainee when they depart Folkston.



Appendix A Objective, Scope, and Methodology

The Department of Homeland Security Office of Inspector General was established by the *Homeland Security Act of 2002* (Public Law 107-296) by amendment to the *Inspector General Act of 1978*.

DHS OIG initiated this inspection at Congress' direction. Prior to conducting an unannounced inspection, we review and analyze concerns raised by immigrant rights groups and complaints to the DHS OIG Hotline about conditions for detainees in ICE custody. We generally limited our scope to the 2011 PBNDS for health, safety, medical care, mental health care, grievances, classification, searches, use of segregation, use of force, language access, and staff training. We also conducted a limited review of facility compliance with COVID-19 requirements.

Prior to our inspection, we reviewed relevant background information, including:

- OIG Hotline complaints
- ICE 2011 PBNDS
- ICE Office of Detention Oversight reports
- Information from nongovernmental organizations

We conducted our unannounced in-person inspection of Folkston from November 16 through November 18, 2021. During the inspection we:

- Conducted an in-person walk-through of the facility. We viewed areas used by detainees, including intake processing areas; medical facilities; residential areas, including sleeping, showering, and toilet facilities; legal services areas, including law libraries; and recreational facilities.
- Reviewed the facility's compliance with key health, safety, and welfare requirements of the 2011 PBNDS for classification, segregation, voluntary work program, access to legal services, access to medical care and mental health care, and medical and nonmedical grievances.
- Reviewed the facility's pandemic response to COVID-19, including standards modified and whether ICE was notified about and approved any changes that affected facility compliance with applicable standards.



- Interviewed ICE and detention facility staff members, including key ICE operational and detention facility oversight staff and detention facility medical, segregation, classification, grievance, and compliance officers.
- Interviewed detainees held at the detention facility to evaluate compliance with 2011 PBNDS grievance procedures and grievance resolution.
- Reviewed documentary evidence, including medical files, and grievance and communication logs and files.

We contracted with a team of qualified medical professionals to conduct a comprehensive evaluation of detainee medical care at the Folkston facility. We incorporated information provided by the medical contractors in our findings.

We conducted this review under the authority of the *Inspector General Act of* 1978, as amended, and according to the *Quality Standards for Inspection and Evaluation* issued by the Council of the Inspectors General on Integrity and Efficiency.



Appendix B ICE Comments on the Draft Report

Office of the Director

U.S. Department of Homeland Security 500 12th Street, SW Washington, DC 20536



June 14, 2022

MEMORANDUM FOR:	Joseph V. Cuffari, Ph. D Inspector General
FROM:	Jason Houser for Deborah Fleischaker Chief of Staff
SUBJECT:	Management Response to Draft Report: "Violations of ICE Detention Standards at Folkston ICE Processing Center and Folkston Annex" (Project No. 22-005-SRE-ICE(a))

Thank you for the opportunity to comment on this draft report. The U.S. Department of Homeland Security (DHS or the Department), U.S. Immigration and Customs Enforcement (ICE) appreciates the work of the Office of Inspector General (OIG) in planning and conducting its review and issuing this report.

ICE is pleased to note that the OIG found the Folkston ICE Processing Center (FIPC) in compliance with detention standards for access to legal services, voluntary work program, and detainee classification. In addition, ICE took the measures of restricting services, social activities, and vaccinated detainees in response to prevent the spread of COVID-19. This aligns with ICE's commitment to the safety and wellbeing of noncitizens in its custody.

Accordingly, noncitizens at the FIPC are provided continuously with information on the importance of maintaining safe distancing, wearing a mask, proper handwashing, and personal hygiene as it relates to the prevention of COVID-19. Furthermore, via the "ICE Enforcement and Removal Operations (ERO) Pandemic Response Requirements (PRR)," dated April 4, 2022, ICE implemented, executed, and ensures healthcare protocols and testing procedures for COVID-19 in alignment with the Center for Disease Control and Prevention (CDC) "Interim Guidance on Management of COVID-19 in Correctional and Detention Facilities."

ICE leadership has concerns about some of the deficiencies the OIG identified since they were items that had repair work underway. For instance, the showers included in photographs (figures 5 and 6) were scheduled for resurfacing with a water-resistant, two-


part epoxy finish. The FIPC's shower resurfacing project began on October 30, 2021, and the preparatory work included scraping, cleaning, and sanitizing shower walls and floors During the OIG's inspection, the resurfacing of showers on the bottom tier of the housing units was completed and the work on the housing unit's upper tier's shower stalls was underway. The shower resurfacing project for all FIPC's showers needing resurfacing was completed throughout the facility on April 8, 2022.

ICE remains committed to ensuring that noncitizens in its custody reside in safe, secure, and humane environments and under appropriate conditions of confinement. The draft report contained 13 recommendations, with which ICE concurs. Attached please find our detailed response to the recommendations. ICE previously submitted technical comments addressing several accuracy, contextual, and other issues under a separate cover for OIG's consideration, as appropriate.

Again, thank you for the opportunity to review and comment on this draft report. Please feel free to contact me if you have any questions. We look forward to working with you again in the future.

Enclosure



Enclosure: Management Response to Recommendations Contained in 22-005-SRE-ICE(a)

OIG recommended that the ICE Executive Associate Director of ERO direct the Atlanta Field Office responsible for FIPC to:

Recommendation 1: Ensure the Folkston facility conditions we identified as deficient are corrected and in compliance with 2011 PBNDS [Performance-Based National Detention Standards] requirements.

Response: Concur. The FIPC does not agree with the OIG's finding that detainees lacked sufficient hot water. On November 15, 2021, prior to the OIG's unannounced inspection, a weekly routine preventative maintenance check discovered two of five water heaters in housing unit A were inoperable. On November 18, 2022, the last day of the OIG inspection, one water heater was replaced, and the second water heater was repaired after receiving necessary parts on December 10, 2021. Detainees may have experienced slower access to hot water, but they always had access to hot water.

The FIPC developed a spreadsheet to identify and track all inoperable toilets, sinks, and leaks within the facility. By tracking all plumbing issues, the facility will make certain any inoperable fixture is promptly repaired since any item needing repair will be immediately submitted to the maintenance supervisor for review and action. As a result, the repairs to the deficient fixtures noted by the OIG were completed on November 24, 2021. Additionally, each housing unit officer is responsible for recording their observation of plumbing fixtures and documenting any issues within the daily inspection form while they make their daily rounds.

On December 15, 2021, the FIPC completed the task of caulking all windows and expansion joints in the cells to make certain any leaks were properly addressed. To ensure compliance of applicable detention standard, the maintenance supervisor is conducting weekly rounds in all detainees living areas and the findings are recorded in the facility's automated database known as the "Facility Dude." This database also creates and tracks work orders to make sure repairs are promptly resolved. The housing unit officer will observe and document their observations and identify any deficiencies while they make their daily rounds. Any items that need repair will be submitted immediately to the maintenance supervisor for review and action.

The OIG's inspection indicated concerns with the FIPC freezers, specifically that they were inoperable. The outside digital thermostats on the freezers were not working; however, the thermometers located inside the food storage units were working and



monitoring the temperature of the food. On February 1, 2022, a digital thermometer was installed that simultaneously monitors the two freezers, the cooler, and the dry storage area.

The FIPC assessed meal delivery procedures from the Annex and IPC and will make enhancements to ensure all meals are served at the appropriate temperature according to PBNDS, SERV Safe, and Food and Drug Administration codes. Furthermore, the torn and worn-down mattresses were immediately replaced as well as any other mattresses found to be unserviceable. Detainees are issued mattresses that are inspected and deemed serviceable by the facility staff before they are provided to the detainee. FIPC regularly orders new mattresses and will ensure an adequate inventory is maintained at the warehouse.

Immediately following the OIG's inspection, the FIPC conducted an inspection of all the facility ventilation screens and vents. Any mildew or dust found on the ventilation screens and vents were properly cleaned, disinfected, and painted. The FIPC would like to note that no mold was found during this inspection. This project was completed on March 4, 2022. The maintenance supervisor will continue to regularly inspect the FIPC's ventilation screens and vents as part of the facility's preventative maintenance program. Furthermore, the maintenance supervisor has added monthly preventative maintenance schedules into the "Facility Dude" for continuous monitoring.

ICE provided the OIG documentation corroborating these efforts under a separate cover on May 25, 2022. ICE requests the OIG consider this recommendation resolved and closed, as implemented.

Recommendation 2: Establish coordination of medical transfer procedures between Folkston IPC and Folkston Annex to ensure timely access to specialty care.

Response: Concur. The Folkston Annex staff uses an electronic medical record transfer summary that includes outside medical appointments. Process enhancements include the staff obtaining the appointment details, such as date, specialty, and provider, and adding it to the transfer summary since the Folkston Main uses many of the same medical providers. Specifically, this information will be added to a text box on the transfer summary so that Folkston Main will have all details for any upcoming appointments, to facilitate contact with the local medical provider for any follow-up information required, and/or confirm or reschedule an appointment, if necessary. The Folkston Annex medical record technicians will also reach out to the outside medical provider to inform them of any transfer. In addition, the Folkston Annex Health Service Administrator (HSA) or designee will communicate directly with the Folkston Main HSA and the Director of Nursing to brief them on any pending outside medical appointments as well as any



chronic conditions. The FIPC drafted a local operating procedure (LOP) to outline and describe the procedures for the continuation of care. On February 1, 2022, the LOP was approved by ERO leadership.

ICE provided the OIG documentation corroborating these efforts under a separate cover on May 25, 2022. ICE requests the OIG consider this recommendation resolved and closed, as implemented.

Recommendation 3: Address medical staffing issues at Folkston IPC to ensure adequate mental health care for detainees.

Response: Concur. On January 3, 2022, Folkston Main hired a psychologist to conduct telehealth visits for mental health. The psychologist sees patients on a weekly basis on Monday, Wednesday, Thursday, and Friday. The psychiatrist has been on staff since January 20, 2017 and sees patients on Tuesdays. On January 23, 2022, a licensed Social Worker was hired and is onboard at the FIPC.

ICE provided the OIG documentation corroborating these efforts under a separate cover on May 25, 2022. ICE requests the OIG consider this recommendation resolved and closed, as implemented.

Recommendation 4: Require Folkston staff to complete daily medical monitoring of detainees in administrative segregation.

Response: Concur. In November 2021, field office management held a meeting in which it was communicated to staff that they needed to complete daily medical monitoring of detainees housed in administrative segregation and Special Management Units (SMU). The message was reinforced that detainees in administrative segregation and SMU are to be medically monitored and seen daily by nursing staff. Field office management will ensure this occurs as required.

ICE provided the OIG documentation corroborating these efforts under a separate cover on May 25, 2022. ICE requests the OIG consider this recommendation resolved and closed, as implemented.

Recommendation 5: Provide detainees in segregation at Folkston IPC access to recreation, legal calls, laundry services for bedding and clothing, mail, legal materials, law library and commissary.

Response: Concur. As required by ICE's PBNDS section 2.12 titled "Special Management Units," ICE detention facilities must provide recreation, legal calls, laundry

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services, mail, legal materials, and access to the law library to detainees placed in SMU. As such, FIPC detainees housed in the SMU have access to the commissary and they may place orders by noon each Tuesday and they will receive their orders on the Thursday of the same week. Commissary orders are not listed on a detainee's confinement card; however, the Commissary maintains records of all orders and purchases made by detainees in SMU.

ICE ERO will ensure that detainees placed in the SMU are monitored daily by medical staff. ERO revised the SMU confinement card to now include a line for the Unit Officer to initial and confirm medical rounds are completed daily for each detainee housed in SMU. Any discrepancies will be immediately reported to the Security supervisor.

ICE provided the OIG documentation corroborating these efforts under a separate cover on May 25, 2022. ICE requests the OIG consider this recommendation resolved and closed, as implemented.

Recommendation 6: Ensure Folkston segregation practices related to handcuffing comply with 2011 PBNDS requirements.

Response: Concur. The OIG's finding of the use of restraints for detainees in SMU has been addressed and corrected by ERO. ERO updated the FIPC post orders to indicate that placement in SMU does not constitute a valid basis for the use of restraints while in segregation, or during movement around the facility. Restraints should only be used, if necessary, as a precaution against escape during transfer, for medical reasons when directed by the medical office or to prevent self-injury, injury to others, or serious property damage.

ICE provided the OIG documentation corroborating these efforts under a separate cover on May 25, 2022. ICE requests the OIG consider this recommendation resolved and closed, as implemented.

Recommendation 7: Establish a grievance and facility request tracking system to ensure timely and complete responses to all detainee requests filed at Folkston.

Response: Concur. FIPC has a detainee grievance tracking system; however, we acknowledge the OIG finding of one grievance that did not have a resolution within in the grievance form. The FIPC grievance officer was reminded to carefully review each grievance to verify compliance with all requirements of the 2011 PBNDS standards. Moving forward, the Assistant Facility Administrator will review the grievance log monthly to ensure compliance. Immediately following the OIG inspection, hanging wall pockets were placed in all housing units to maintain an adequate supply of grievance and



detainee request forms. Case managers visit the housing units daily to ensure all forms are stocked and any completed forms are retrieved for action. The rounds completed by the case managers are maintained in a logbook to verify compliance.

ICE provided the OIG documentation corroborating these efforts under a separate cover on May 25, 2022. ICE requests the OIG consider this recommendation resolved and closed, as implemented.

Recommendation 8: Ensure Folkston meets ICE's COVID-19 requirements of wearing masks and social distancing.

Response: Concur. The FIPC operates under the guidelines of the PRR, which is in alignment with the CDC Interim Guidance on Management of COVID-19 in Correctional and Detention Facilities. To mitigate the spread of COVID-19, all detainees receive verbal and written information on the preventive measure they must take, such as social distancing and wearing a mask, during their initial orientation. They also receive personall protective equipment (PPE) upon intake and throughout their stay at the detention facility. Deportation officers continuously communicate and instruct detainees to maintain social distance and to wear PPE. Detainees are required to wear a mask as they transit throughout the facility, and they are continuously reminded. If a detainee is seen without a mask, they are provided one for their use on the spot.

Additionally, control centers at Folkston main and Annex announce COVID-19 preventative measures and COVID-19 signage detailing mitigation measures are posted throughout the facility. The FIPC continues to sanitize hard surfaces and high contact areas. COVID-19 protocols are also a daily agenda topic within staff briefings. In addition, communication alerts are sent out to all facility staff, reminding them of the COVID-19 protocols. On December 7, 2021, a memo was disseminated to all detention facility staff reminding them of the requirement to always wear face masks while on duty.

ICE ERO would like to note that every detainee that tested positive for COIVD-19 while housed at the FIPC successfully recovered due to the care they were provided and the protocols in place to mitigate the spread of COVID-19. ICE will continue to follow the CDC's guidance, and will adapt its protocols, as appropriate.

ICE provided the OIG documentation corroborating these efforts under a separate cover on May 25, 2022. ICE requests the OIG consider this recommendation resolved and closed, as implemented.



Recommendation 9: Establish a requests tracking system to ensure timely and complete responses to all detainee requests filed at Folkston.

Response: Concur. The FIPC uses the Talton electronic system for the submission and tracking of detainee requests. Detainees can electronically submit requests directly to their assigned Deportation Officer. Also, detainees continue to have the capability to complete a paper request form and drop it in the secure drop-box located in their designated housing unit. An ERO Deportation Officer routinely visits the dormitories daily to collect all the paper request forms and provides written responses to the detainees within three business days of receipt. These actions have been in place at the FIPC; however, these procedures were reinforced to detention staff on May 15, 2022.

ICE provided the OIG documentation corroborating these efforts under a separate cover on May 25, 2022. ICE requests the OIG consider this recommendation resolved and closed, as implemented.

Recommendation 10: Provide ICE visitation schedules, including the time, duration, and location for housing unit visits, to ensure Folkston detainees are aware of their regular access to assigned ICE ERO deportation officers.

Response: Concur. The FIPC posted in all housing unit pods visitation schedules, including the time, duration, and location for facility visits to ensure Folkston detainees are aware of regular access to assigned ERO Deportation Officers. On November 29, 2021, a log was created and implemented for ERO Deportation Officers to document each pod visit.

ICE provided the OIG documentation corroborating these efforts under a separate cover on May 25, 2022. ICE requests the OIG consider this recommendation resolved and closed, as implemented.

Recommendation 11: Ensure ICE provides copies of ICE request forms and secure drop boxes in all Folkston housing units.

Response: Concur. The FIPC uses the Talton system to enable detainees to send requests or questions to ICE ERO at any time by using tablets located in each dormitory. Detainees can login to the tablet using a pin number to submit requests, questions, or grievances directly to the facility staff or ERO. When a request is answered by an ERO officer, the detainee receives a notification through the tablet which they can access any time they log in to review the response. The system automatically logs all requests and responses. While most of the staff and detainee communication is conducted via the



Talton system, paper request forms are available to be submitted through the secure dropbox located in each designated housing unit.

An ERO Deportation Officer routinely visits the dormitories daily to collect all the paper request forms and provides written responses to the detainees within three business days of receipt. These actions have been in place at the FIPC; however, the procedures were reenforced to detention staff on May 15, 2022.

ICE provided the OIG documentation corroborating these efforts under a separate cover on May 25, 2022. ICE requests the OIG consider this recommendation resolved and closed, as implemented.

Recommendation 12: Ensure Folkston maintains staffing levels outlined in the ICE contract.

Response: Concur. The FIPC is actively and aggressively hiring to fill all vacant positions. Several hiring events have been hosted in Folkston, Georgia, surrounding towns and more hiring events are being planned. During the OIG inspection, the FIPC had 202 cleared staff members authorized to work during the week of November 16, 2021, and as of April 14, 2022, there are a total of 222 staff onboard. There was a 10 percent increase in staffing. In addition, there are currently 127 applicants who have accepted job offers, 85 of which are awaiting clearance and are listed on ICE's Personnel Security Unit background screening report. While the new applicants onboard, the FIPC is covering all post shifts using overtime at the vendor's expense. The Atlanta Field Office will continue to closely monitor the staffing levels at the FIPC.

ICE provided the OIG documentation corroborating these efforts under a separate cover on May 25, 2022. ICE requests the OIG consider this recommendation resolved and closed, as implemented.

Recommendation 13: Ensure Folkston properly secures and stores detainee personal property.

Response: Concur. All detainee property is entered and tracked in the FIPC's "GEOTrack" system. When a detainee is admitted to the FIPC their personal property is logged in the system and when they are released the GEOTrack record is compared to the physical property to confirm accuracy. Following the OIG's finding, the facility completed its quarterly inventory of detainee property, and any discrepancies were reviewed by ERO. Also, an ERO Deportation officer has been assigned to regularly inspect the property room to ensure policies and procedures are being adhered to for



compliance. In addition, abandoned property was disposed according to applicable 2011 PBNDS requirements.

ICE provided the OIG documentation corroborating these efforts under a separate cover on May 25, 2022. ICE requests the OIG consider this recommendation resolved and closed, as implemented.



Appendix C Office of Inspections and Evaluations Major Contributors to This Report

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