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ICE Inspections
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Office of Detention Oversight
Follow-Up Compliance Inspection

Enforcement and Removal Operations
ERO Boston Field Office

Wyatt Detention Center
Central Falls, Rhode Island

May 10-12, 2022

FOLLOW-UP COMPLIANCE INSPECTION
of the
WYATT DETENTION CENTER
Central Falls, Rhode Island

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FOLLOW-UP COMPLIANCE INSPECTION TEAM MEMBERS



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FACILITY OVERVIEW

The U.S. Immigration and Customs Enforcement (ICE) Office of Professional Responsibility (OPR) Office of Detention Oversight (ODO) conducted a follow-up compliance inspection of the Wyatt Detention Center (WDC) in Central Falls, Rhode Island, from May 10 to 12, 2022.¹ This inspection focused on the standards found deficient during ODO’s last inspection of WDC from November 1 to 4, 2021. The facility opened in 1993 and is owned and operated by Central Falls Detention Facility Corporation. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at WDC in 2019 under the oversight of ERO’s Field Office Director in Boston (ERO Boston). The facility operates under the National Detention Standards (NDS) 2019.

ERO has assigned a deportation officer to the facility. A WDC warden handles daily facility operations and manages [REDACTED] support personnel. Aramark provides food and commissary services. WDC does not have a contract with a single specific health care provider, but instead, maintains individual contracts with medical staff. The facility was accredited by the American Correctional Association in April 2021. In February 2021, WDC was audited for the Department of Justice (DOJ) Prison Rape Elimination Act and was DOJ PREA certified.

Capacity and Population Statistics	Quantity
ICE Bed Capacity ²	[REDACTED]
Average ICE Population ³	[REDACTED]
Adult Male Population (as of May 10, 2022)	[REDACTED]
Adult Female Population (as of May 10, 2022)	[REDACTED]

During its last inspection, in Fiscal Year (FY) 2022, ODO found six deficiencies in the following areas: Medical Care (4); Post Orders (1); and Searches of Detainees (1).

¹ This facility holds male detainees with low, medium-low, medium-high, and high security classification levels for periods greater than 72 hours.

² Data Source: ERO Facility List as of May 9, 2022.

³ *Ibid.*

FOLLOW-UP COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population of 10 or more detainees, and where detainees are housed for longer than 72 hours, to assess compliance with ICE National Detention Standards. These inspections focus solely on facility compliance with detention standards that directly affect detainee life, health, safety, and/or well-being. In FY 2021, to meet congressional requirements, ODO began conducting follow-up compliance inspections at all ICE ERO detention facilities, which ODO inspected earlier in the FY.

While follow-up compliance inspections are intended to focus on previously identified deficiencies, ODO will conduct a complete review of several core standards, which include but are not limited to Medical Care, Hunger Strikes, Suicide Prevention, Food Service, Environmental Health and Safety, Emergency Plans, Use of Force and Restraints/Use of Physical Control Measures and Restraints, Admission and Release, Classification, and Funds and Personal Property. ODO may decide to conduct a second full inspection of a facility in the same FY based on additional information obtained prior to ODO's arrival on-site. Factors ODO will consider when deciding to conduct a second full inspection will include the total number of deficiencies cited during the first inspection, the number of deficient standards found during the first inspection, the completion status of the first inspection's UCAP, and other information ODO obtains from internal and external sources ahead of the follow-up compliance inspection. Conditions found during the inspection may also lead ODO to assess new areas and identify new deficiencies or areas of concern should facility practices run contrary to ICE standards. Any areas found non-compliant during both inspections are annotated as "Repeat Deficiencies" in this report.

FINDINGS BY NATIONAL DETENTION STANDARDS 2019 MAJOR CATEGORIES

NDS 2019 Standards Inspected ^{4,5}	Deficiencies
Part 1 – Safety	
Environmental Health and Safety	0
Sub-Total	0
Part 2 – Security	
Admission and Release	0
Custody Classification System	0
Facility Security and Control	0
Funds and Personal Property	1
Post Orders	0
Searches of Detainees	0
Use of Force and Restraints	0
Special Management Units	0
Staff-Detainee Communication	0
Sub-Total	1
Part 4 – Care	
Food Service	0
Hunger Strikes	0
Medical Care	4
Significant Self-Harm and Suicide Prevention and Intervention	0
Sub-Total	4
Part 5 – Activities	
Telephone Access	0
Sub-Total	0
Part 6 – Justice	
Grievance System	0
Sub-Total	0
Total Deficiencies	5

⁴ For greater detail on ODO’s findings, see the *Follow-Up Compliance Inspection Findings* section of this report.

⁵ Beginning in FY 2022, ODO instituted a process of rotating all standards on a 3-year basis. As a result, some standard components may not be present in all standards.

DETAINEE RELATIONS

ODO interviewed 14 detainees, who each voluntarily agreed to participate. ODO attempted to interview additional detainees but the remaining 12 detainees either declined ODO's request or the facility had isolated for COVID-19 quarantine. None of the detainees made allegations of discrimination, mistreatment, or abuse. Most detainees reported satisfaction with facility services except for the concerns listed below.

Medical Care: One detainee reported making several dental requests to repair a broken acrylic crown, but WDC declined his requests.

- Action Taken: ODO interviewed the health services administrator (HSA), reviewed the detainee's medical file, and found on August 9, 2021, the detainee requested dental care and a facility contract dentist evaluated his crown. The dentist prescribed Motrin and Tylenol for pain and documented a broken crown in the detainee's medical file. On October 15, 2021, the facility staff examined the detainee and advised him of his options: extraction of the tooth at the facility or a complete root canal, post, and crown upon release from the facility. The detainee opted for completion of his dental work after release from WDC. On February 8, 2022, and March 25, 2022, the detainee requested a follow-up appointment where dental staff re-evaluated the detainee and continued pain management for his tooth pain. On April 8, 2022, the dental staff made an unsuccessful attempt to repair the tooth. The staff assured the detainee of continued pain management and to submit a sick call request if pain persisted. Facility staff reminded the detainee of his option for extraction of the tooth by the facility dental staff.

Medical Care: One detainee stated he made several eye exam requests before the optometrist examined him.

- Action Taken: ODO interviewed the HSA, reviewed the detainee's medical file, and found the detainee requested eyeglasses on January 31, 2022. On April 13, 2022, the optometrist examined the detainee and forwarded the eyeglass prescription to ICE via facility staff for funding approval. On May 12, 2022, ICE approved the request and placed the order for the detainee's eyeglasses. On May 28, 2022, an optometrist examined the detainee again, diagnosed him with glaucoma, and issued his eyeglass prescription. The facility will provide the detainee with follow-up care, monitor his condition, and act on any other issues he reports.

Medical Care: One detainee stated facility medical staff examined him for a throat infection but the infection persisted.

- Action Taken: ODO interviewed the HSA, reviewed the detainee's medical file, and found the detainee submitted multiple sick call requests for throat pain from February 1 to May 3, 2022. Facility medical staff examined the detainee for each request and treated him with medication, but with no improvement in his throat. On May 3, 2022, the medical staff placed the detainee on a 10-day antibiotic cycle and instructed him to

follow the full course for effective treatment. The antibiotics provided relief for the detainee, but he did not consistently follow through in taking his medications as required by the treatment. The staff encouraged the detainee to return to sick call if his throat worsened.

Medical Care: One detainee stated he requested a continuous positive airway pressure machine to help with his sleep apnea but the facility has not yet evaluated him for use of this device.

- Action Taken: ODO interviewed the HSA, reviewed the detainee’s medical file, and found on January 26, 2022, the detainee complained of excessive salivating and gasping for air during sleep and requested a sleep study. On January 27, 2022, facility medical staff examined the detainee and found no respiratory or cardiac symptoms to warrant a sleep study. The detainee informed ERO Boston of his sleep problems and the facility’s inaction in treating him. ERO Boston requested the medical staff to reevaluate the detainee and to compare findings with his previous evaluation. On April 25, 2022, medical staff conducted a reexamination of the detainee, prescribed a nasal inhaler, and submitted a request to ICE Health Service Corps (IHSC) for a sleep study. On May 26, 2022, ERO Boston followed up with WDC and found the request is still pending a decision with IHSC.

FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

SECURITY

FUNDS AND PERSONAL PROPERTY (FPP)

ODO reviewed the facility’s inventory and audit logs and found no times recorded for completed audits in March 2022, April 2022, and May 2022 (**Deficiency FPP-20⁶**).

CARE

MEDICAL CARE (MC)

ODO observed the facility’s pharmaceutical storage areas and found the facility did not store refrigerated medication in a temperature-controlled area to ensure no change in medication potency. Specifically, ODO found the facility refrigerated insulin at 34 Fahrenheit (F) degrees as opposed to the manufacturer’s recommended temperature range of 38 to 46 F degrees (**Deficiency MC-10⁷**).

⁶ “The facility’s logs will indicate the date, time, and name of the officer(s) conducting the inventory.” *See* ICE NDS 2019, Standard, Funds and Personal Property, Section (II)(D).

⁷ “All pharmaceuticals will be stored in a secure area and temperature controlled to ensure no alteration in potency.” *See* ICE NDS 2019, Standard, Medical Care, Section (II)(B).

ODO reviewed █ detainee medical records and found in █ out of █ records, no medical, dental, nor mental health screening within 12 hours of the detainees’ arrival (**Deficiency MC-12⁸**).

ODO reviewed █ detainee medical records and found in █ out of █ records, no tuberculosis screening in accordance with current Centers for Disease Control and Prevention guidelines upon the detainees’ arrival and placement in general population housing units (**Deficiency MC-18⁹**).

ODO reviewed █ detainee medical records and found in █ out of █ records, comprehensive health assessments were not completed within 14 days of arrival to the facility. Specifically, the facility completed 8 out of 11 assessments between 21 and 31 days after arrival; did not sign nor date 2 assessments; and did not complete 1 assessment (**Deficiency MC-27¹⁰**). **This is a repeat deficiency.**

CONCLUSION

During this inspection, ODO assessed the facility’s compliance with 16 standards under NDS 2019 and found the facility in compliance with 14 of those standards. ODO found five deficiencies in the remaining two standards. ODO notes the four deficiencies in the MC standard and delays in MC ODO identified during detainee interviews as a specific area of concern. Each detainee complaint involved delayed medical care. ODO recommends ERO work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations. ODO commends facility staff members for their responsiveness during this inspection. ODO has not received the uniform corrective action plan for ODO’s last inspection of WDC in November 2021.

Compliance Inspection Results Compared	First FY 2022 (NDS 2019)	Second FY 2022 (NDS 2019)
Standards Reviewed	19	16
Deficient Standards	3	2
Overall Number of Deficiencies	6	5
Repeat Deficiencies	1	1
Areas Of Concern	0	0
Corrective Actions	0	0
Facility Rating	Superior	N/A

⁸ “As soon as possible, but no later than 12 hours after arrival, all detainees shall receive, by a health care practitioner or a specially trained detention officer, an initial medical, dental and mental health screening and be asked for information regarding any known acute, emergent, or pertinent past or chronic medical conditions, including history of mental illness, particularly prior suicide attempts or current suicidal/homicidal ideation or intent, and any disabilities or impairments affecting major life activities.” See ICE NDS 2019, Standard, Medical Care, Section (II)(D).

⁹ “All new arrivals shall receive tuberculosis (TB) screening in accordance with the most current Centers for Disease Control and Prevention (CDC) guidelines, including, but not limited to, CDC Guidelines for Correctional Facilities, prior to being placed in general population.” See ICE NDS 2019, Standard, Medical Care, Section (II)(D)(1).

¹⁰ “The facility will conduct and document a comprehensive health assessment, including a physical examination and mental health screening, on each detainee within 14 days of the detainee’s arrival at the facility.” See ICE NDS 2019, Standard, Medical Care, Section (II)(E).