

U.S. Department of Homeland Security

U.S. Immigration and Customs Enforcement Office of Professional Responsibility ICE Inspections Washington, DC 20536-5501

Office of Detention Oversight Compliance Inspection 2024-001-237

Enforcement and Removal Operations ERO Salt Lake City Field Office

Washoe County Jail Reno, Nevada

October 31-November 2, 2023

COMPLIANCE INSPECTION of the WASHOE COUNTY JAIL

Reno, Nevada

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COMPLIANCE INSPECTION TEAM MEMBERS

Team Lead	ODO
Senior Inspections and Compliance Specialist	ODO
Senior Inspections and Compliance Specialist	ODO
Inspections and Compliance Specialist	ODO
Inspections and Compliance Specialist	ODO
Contractor	Creative Corrections

FACILITY OVERVIEW

The U.S. Immigration and Customs Enforcement (ICE) Office of Professional Responsibility (OPR) Office of Detention Oversight (ODO) conducted a compliance inspection of the Washoe County Jail (WCJ) in Reno, Nevada, from October 31 to November 2, 2023. The facility opened in 1988 and is owned by Washoe County and operated by Washoe County Sheriff's Department. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at WCJ in 2008 under the oversight of ERO's Field Office Director in Salt Lake City (ERO Salt Lake City). ICE is an authorized user of this facility under a United States Marshals Service intergovernmental agreement contract, which does not specify an ICE National Detention Standard (NDS), and ODO inspected to the NDS listed on the ERO Custody Management Division Authorized Facility List as of October 30, 2023. WCJ was inspected against the NDS 2019, and ODO's assigned rating is for ERO's informational purposes only.

A chief deputy handles daily facility operations and manages support personnel. WCJ facility staff provide food services, Naphcare provides medical care, and Keefe Commissary provides commissary services at the facility. The facility was accredited by the National Commission on Correctional Health Care in February 2022.

Capacity and Population Statistics	Quantity
ICE Bed Capacity ²	
Average ICE Population ³	
Adult Male Population (as of October 31, 2023)	
Adult Female Population (as of October 31, 2023)	

During its last full inspection, in Fiscal Year (FY) 2023, ODO found 3 deficiencies in the following areas: Environmental Health and Safety (1) and Food Service (2).

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

² Data Source: ERO Custody Management Division Authorized Facility List as of October 30, 2023.

³ Ihid

COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population of 10 or more, and where detainees are housed for over 72 hours, to assess compliance with ICE national detention standards. While these inspections focus on facility compliance with detention standards that directly affect detainee life, health, safety, and/or well-being, in FY 2024 ODO added additional standards to the scope of each full inspection to ensure ODO inspects every standard at each facility at least once every other year.⁴

ODO identifies violations of ICE detention standards, ICE policies, or operational procedures, as "deficiencies." ODO highlights instances when the facility resolves deficiencies prior to completion of the ODO inspection. Where applicable, these corrective actions are annotated with "C" under the *Compliance Inspection Findings* section of this report.

Upon completion of each inspection, ODO conducts a closeout briefing with facility and local ERO officials to discuss preliminary findings. A summary of these findings is shared with ERO management officials. Thereafter, ODO provides ICE leadership with a final compliance inspection report to: (i) assist ERO in developing and initiating corrective action plans; and (ii) provide senior executives with an independent assessment of facility operations. ODO's findings inform ICE executive management in their decision-making to better allocate resources across the agency's entire detention inventory.

⁴ ODO reviews the facility's compliance with selected standards in their entirety.

FINDINGS BY NATIONAL DETENTION STANDARDS 2019 **MAJOR CATEGORIES**

NDS 2019 Standards Inspected ^{5,6}	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	0
Post Orders	0
Searches of Detainees	0
Use of Force and Restraints	0
Special Management Units	0
Staff Detainee Communication	0
Sexual Abuse and Assault Prevention and Intervention	0
Sub-Total	0
Part 4 - Care	
Food Service	1
Hunger Strikes	0
Medical Care	0
Personal Hygiene	1
Significant Self-Harm and Suicide Prevention and Intervention	0
Sub-Total	2
Part 5 - Activities	
Correspondence and Other Mail	0
Religious Practices	0
Telephone Access	0
Voluntary Work Program	0
Sub-Total	0
Part 6 - Justice	
Grievance System	0
Law Libraries and Legal Material	0
Sub-Total	0
Part 7 - Administration and Management	

For greater detail on ODO's findings, see the Compliance Inspection Findings section of this report.
Beginning in FY 2024, ODO instituted a process of rotating all standards every other year. As a result, some standards may not be present in all inspections.

Detention Files	0
Detainee Transfers	0
Sub-Total	0
Total Deficiencies	2

DETAINEE RELATIONS

ODO interviewed six detainees, who each voluntarily agreed to participate. The other five detainees were unavailable due to being released from ICE custody on October 30, 2023. The detainees made no allegations of discrimination, mistreatment, or abuse. The detainees reported satisfaction with facility services and had no concerns.

COMPLIANCE INSPECTION FINDINGS

CARE

FOOD SERVICE (FS)

ODO reviewed FS personnel files and found in all files, the facility did not document preemployment medical examinations (**Deficiency FS-86**⁷). This is a repeat deficiency.

PERSONAL HYGIENE (PH)

ODO reviewed the facility's clothing and linen exchange policy, interviewed a facility deputy, and found the facility did not exchange socks and undergarments daily nor outer garments at least twice weekly (Deficiency PH-118). This is a priority component.

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 24 standards under NDS 2019 and found the facility in compliance with 22 of those standards. ODO found two deficiencies in the remaining two standards. Since WCJ's last full inspection in November 2022, the facility's compliance with NDS 2019 has remained consistent. WCJ went from 2 deficient standards and 3 deficiencies in November 2022, to 2 deficient standards and 2 deficiencies during this most recent full inspection, which includes 1 repeat deficiency in FS. One deficiency found in the PH standard is a priority component. ODO received a completed uniform corrective action plan (UCAP) for the compliance inspection in November 2022; however, ODO did not receive a complete UCAP for the follow-up inspection in May 2023, which likely contributed to the repeat deficiency identified in FS. ODO recommends ERO Salt Lake City continue to work with the facility to resolve the deficiencies that remain outstanding in accordance with contractual obligations.

⁷ "All food service personnel (both staff and detainee) shall receive a documented preemployment medical examination." *See* ICE NDS 2019, Standard, Food Service, Section (II)(I)(3)(a).

⁸ "Socks and undergarments will be exchanged daily, outer garments at least twice weekly and sheets, towels, and pillowcases at least weekly." *See* ICE NDS 2019, Standard, Personal Hygiene, Section (II)(E).

Compliance Inspection Results Compared	FY 2023 (NDS 2019)	FY 2024 (NDS 2019)
Standards Reviewed	10	24
Deficient Standards	2	2
Overall Number of Deficiencies	3	2
Priority Component Deficiencies	0	1
Repeat Deficiencies	0	1
Areas Of Concern	1	0
Corrective Actions	0	0
Facility Rating	Superior	Good ⁹

⁹ ODO revised their rating system at the end of FY 2023 and beginning in FY 2024, facilities rated as "Superior" will have no or very minimal deficiencies and will have no repeat or priority component deficiencies.