

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

Enforcement and Removal Operations ERO Salt Lake City Field Office

Nye County Detention Center, Southern (Pahrump) Pahrump, Nevada

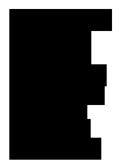
November 15-17, 2022

# COMPLIANCE INSPECTION of the NYE COUNTY DETENTION CENTER, SOUTHERN (PAHRUMP) Pahrump, Nevada

### **TABLE OF CONTENTS**

FACILITY OVERVIEW	4
COMPLIANCE INSPECTION PROCESS	5
FINDINGS BY NATIONAL DETENTION STANDARDS 2019 MAJOR	
CATEGORIES	6
DETAINEE RELATIONS	7
COMPLIANCE INSPECTION FINDINGS	10
SECURITY	10
ADMISSION AND RELEASE	-
FUNDS AND PERSONAL PROPERTY	10
SPECIAL MANAGEMENT UNITS	
STAFF-DETAINEE COMMUNICATION	11
SEXUAL ABUSE AND ASSAULT PREVENTION	
AND INTERVENTION	11
ORDER	12
DISCIPLINARY SYSTEM	12
CARE	12
FOOD SERVICE	12
ACTIVITIES	13
VISITATION	13
JUSTICE	
LAW LIBRARIES AND LEGAL MATERIAL	14
CONCLUSION	15

# **COMPLIANCE INSPECTION TEAM MEMBERS**



Acting Team Lead Inspections and Compliance Specialist Inspections and Compliance Specialist Inspections and Compliance Specialist Contractor Contractor Contractor Contractor ODO ODO ODO ODO Creative Corrections Creative Corrections Creative Corrections 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 Nye County Detention Center, Southern (Pahrump) (NCDC), in Pahrump, Nevada, from November 15 to 17, 2022.<sup>1</sup> The facility opened in 2019 and is owned by Nye County and operated by the Nye County Sheriff's Office. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at NCDC in 2019 under the oversight of ERO's Field Office Director in Salt Lake City (ERO Salt Lake City). The facility operates under the National Detention Standards (NDS) 2019.

ERO has no staff assigned to the facility. An NCDC captain handles daily facility operations and manages support personnel. Summit Foods provides food and commissary services, and Serenity Health provides medical care at the facility. The facility does not hold any accreditations from any outside entities.

Capacity and Population Statistics	Quantity	
ICE Bed Capacity <sup>2</sup>		
Average ICE Population <sup>3</sup>		
Adult Male Population (as of November 15, 2022)		
Adult Female Population (as of November 15, 2022)		

During its last inspection, in Fiscal Year (FY) 2022, ODO found 14 deficiencies in the following areas: Admission and Release (1); Grievance System (1); Hunger Strikes (1); Medical Care (1); Personal Hygiene (1); Significant Self-Harm and Suicide Prevention and Intervention (1); Special Management Unit (5); and Staff-Detainee Communication (3).

<sup>&</sup>lt;sup>1</sup> This facility holds male and female detainees with low, medium, and high security classification levels for periods greater than 72 hours.

<sup>&</sup>lt;sup>2</sup> Data Source: ERO Facility List as of October 12, 2021.

<sup>&</sup>lt;sup>3</sup> Ibid.

# **COMPLIANCE INSPECTION PROCESS**

ODO conducts oversight inspections of ICE detention facilities with an average daily population greater than 10 and where detainees are housed for over 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.<sup>4</sup>

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.

<sup>&</sup>lt;sup>4</sup> ODO reviews the facility's compliance with selected standards in their entirety.

# FINDINGS BY NATIONAL DETENTION STANDARDS 2019 MAJOR CATEGORIES

NDS 2019 Standards Inspected <sup>5, 6</sup>	Deficiencies
Part 1 - Safety	
Environmental Health and Safety	0
Transportation by Land	0
Sub-Total	0
Part 2 - Security	
Admission and Release	1
Custody Classification System	0
Funds and Personal Property	2
Hold Rooms in Detention Facilities	0
Use of Force	0
Special Management Unit	3
Sexual Abuse and Assault Prevention and Intervention	3
Sub-Total	9
Part 3 - Order	
Disciplinary System	1
Sub-Total	1
Part 4 - Care	
Food Service	1
Medical Care	0
Significant Self-Harm and Suicide Prevention and Intervention	0
Terminal Illness and Death	0
Disability Identification, Assessment, and Accommodation	0
Sub-Total	1
Part 5 - Activities	
Correspondence and Other Mail	0
Recreation	0
Visitation	11
Sub-Total	11
Part 6 - Justice	
Detainee Handbook	0
Law Libraries and Legal Material <sup>7</sup>	1
Sub-Total	1
Total Deficiencies	23

<sup>&</sup>lt;sup>5</sup> For greater detail on ODO's findings, see the *Compliance Inspection Findings* section of this report.

<sup>&</sup>lt;sup>6</sup> 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.

<sup>&</sup>lt;sup>7</sup> ODO identified the deficiency cited under the Law Libraries and Legal Material standard while performing detainee interviews. ODO did not review the Law Libraries and Legal Material standard in its entirety.

# **DETAINEE RELATIONS**

ODO interviewed 14 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. Most detainees reported satisfaction with facility services except for the concerns listed below.

*Law Libraries and Legal Material:* A detainee stated the facility did not allow him time to access the law library since his arrival to NCDC on November 8, 2022.

• <u>Action Taken</u>: ODO reviewed the NCDC electronic detainee request log, interviewed a facility lieutenant, and found the detainee submitted 18 requests for access to the law library from November 10 to 16, 2022. During that time, the facility only permitted the detainee 3 hours of access to the law library. Specifically, the facility permitted the detainee 1 hour of access to the law library on November 10, 13, and 16, 2022, respectively. The NDS 2019 standard for law libraries and legal materials requires a facility to provide a detainee 5 hours per week of access to the law library. ODO cited this as a deficiency in the *Law Libraries and Legal Material* section of the report.

*Medical Care:* A detainee stated he did not receive a scheduled appointment for a specialist, regarding a skin condition. The detainee also stated that the medication provided by medical staff treated only his symptoms as the condition itself worsened and a facility doctor who examined him diagnosed his condition as critical.

Action Taken: On October 15, 2022, ODO spoke with the facility Health Services • Administrator (HSA) and found the detainee arrived at the facility on October 6, 2022. ODO reviewed the detainee's medical requests and found the detainee submitted three medical requests in October 2022. On October 9, 2022, a facility physician examined the detainee's wounds on his arms and legs and treated him for psoriasis by prescribing Eucerin Cream. The physician did not schedule a follow-up appointment. On October 11, 2022, the facility physician examined the detainee for itching and burning caused by growing spots on his arms and legs, prescribed Minerin Cream, and referred him to an outside dermatologist for his psoriasis. The HSA stated the facility did not advise the detainee of the date of the off-site appointment as per the facility security procedure. ODO found no other medical requests after October 27, 2022, in the detainee's file. On November 17, 2022, ODO confirmed with the detainee that the facility had scheduled his dermatologist appointment and that he was aware of the appointment, just not the date. On November 30, 2022, ODO followed up with the HSA and confirmed an off-site dermatologist at a local dermatology clinic examined the detainee on November 28, 2022. The dermatologist examined all surfaces of the detainee's body. He also offered the detainee a full skin check, but the detainee declined. The dermatologist diagnosed psoriasiform plaques with micaceous scale, counseled the detainee on skin care, and prescribed Clobetasol (0.05%) Topical Cream, Calcipotriene (0.005%) Topical Cream, and Otezla (10 mg). The dermatologist advised the detainee to contact the dermatologist's office if his condition worsened.

*Medical Care:* A detainee stated he had not received a scheduled appointment after submitting a request for a dental cleaning.

• <u>Action Taken</u>: ODO spoke to the HSA on November 16, 2022, confirmed an already scheduled dental appointment for November 29, 2022, and notified the detainee.

*Medical Care:* A detainee stated medical staff has yet to examine him after submitting several requests to evaluate and treat him for mental health and hepatitis C issues. The detainee could not recall when he submitted the requests.

• <u>Action Taken</u>: ODO referred the detainee to NCDC medical staff for evaluation and treatment. On November 15, 2022, medical staff evaluated the detainee, diagnosed post-traumatic stress disorder, chronic shoulder pain, and chronic hepatitis C, and prescribed Gabapentin (800 mg), Wellbutrin, Mirtazapine, and Naproxen. On November 16, 2022, ODO reviewed the detainee's medical records and found three submitted medical requests since his arrival at NCDC. Specifically, the detainee submitted two requests on November 9, 2022, and one request on November 10, 2022, with each request receiving a response on the same day.

*Medical Care:* A detainee stated he found detention difficult but had not reached the point of harming himself nor others. ODO noted the emotional state of the detainee and offered to refer him to facility medical staff for mental health assistance.

• <u>Action Taken</u>: ODO reviewed the detainee's detention file and found no medical requests specific to a mental health issue. At the request of ODO, a facility mental health counselor (MHC) evaluated the detainee on November 17, 2022, and diagnosed depression, sleep pattern changes, anxiety, loss of self-esteem, and grieving. The MHC also completed a mental status exam and found the detainee projected a normal and clean appearance. The detainee denied suicidal or homicidal ideations, but the MHC diagnosed adjustment and alcohol-use disorders and suffering due to anxiety, grief, and depression. The MHC recommended to continue treating the detainee for grief and sobriety without prescription medication. The MHC referred the detainee to a Spanish-speaking MHC at the facility to better assist with the detainee's treatment plan. On November 24, 2022, an MHC completed a mental health check on the detainee by focusing on de-catastrophizing situations to help reduce anxiety symptoms and forgiveness to help alleviate the grief process. The detainee participated in the session and accepted feedback. The MHC prescribed no medication but scheduled the detainee for a visit the following week to work on symptoms of anxiety and grief.

*Personal Hygiene:* A detainee stated facility staff did not provide him with soap and toothpaste after verbally requesting these items on October 7, 2022. The detainee also stated he must repeatedly ask facility staff to replace hygiene items.

• <u>Action Taken</u>: ODO interviewed a facility sergeant and confirmed the facility provides detainees with hygiene kits. ODO observed the hygiene kits, provided by the facility to detainees upon admission. On November 17, 2022, ODO reviewed the detainee's

electronic booking record and found the facility issued the detainee toilet paper, towel, toothpaste, comb, toothbrush, and shower gel upon admission on October 6, 2022. A facility sergeant confirmed detainees may request additional hygiene items via tablet or by asking facility staff to issue the needed items. At the request of ODO, the facility issued the detainee another hygiene kit on November 17, 2022.

*Staff-Detainee Communication:* Two detainees stated that ERO Salt Lake City staff did not respond to their ICE requests in a reasonable time frame.

• <u>Action Taken</u>: ODO contacted an ERO Salt Lake City supervisory detention and deportation officer (SDDO) to request the detainee's complaints from October 17 to November 17, 2022, and found ERO Salt Lake City did not respond to detainee requests in a timely manner. The detainee submitted the first request on October 18, 2022, and ERO Salt Lake City responded on October 27, 2022. The detainee submitted a second request on October 27, 2022, with a response on November 10, 2022. The other detainee sent a request for information on November 4, 2022, and another on November 8, 2022. ERO Salt Lake City responded to the detainee's requests on November 15, 2022. ODO reminded ERO Salt Lake City that procedures require detainees to receive an answer in an acceptable time frame. At this time, ERO Salt Lake City has responded to all the detainee's current requests for information.

*Staff-Detainee Communication:* Four detainees stated ERO Salt Lake City staff do not visit the facility, and three stated they have had no interaction with the staff since arriving at NCDC. The detainees requested to meet with their assigned deportation officers to discuss their cases.

• <u>Action Taken</u>: ODO spoke to the SDDO who stated that ERO staff arrive every Monday and Wednesday to serve paperwork and answer questions. The SDDO encouraged detainees to submit requests via a written request as it allows the officers to access court cases, ICE regulations, and other systems inaccessible at the facility ODO reviewed ICE communication request records and found ERO Salt Lake City responded to both detainees to discuss their cases, the first detainee on November 15, 2022, and the other detainee on November 9 and 15, 2022.

*Staff-Detainee Communication:* A detainee stated he never received an item he ordered from the commissary via tablet nor has the facility responded to his request for a refund.

• <u>Action Taken</u>: ODO reviewed the commissary request history and found the detainee made a purchase on November 1, 2022, and received a refund for the purchased item on November 17, 2022.

# **COMPLIANCE INSPECTION FINDINGS**

# **SECURITY**

#### **ADMISSION AND RELEASE (AR)**

ODO reviewed NCDC Policy 0032, "Booking Procedures," dated December 4, 2019, the facility handbook, dated November 26, 2019, and the facility orientation video, and found no instruction in the facility orientation video to make telephone calls (Deficiency AR-24<sup>8</sup>). This is a repeat deficiency.

#### FUNDS AND PERSONAL PROPERTY (FPP)

ODO reviewed NCDC Policy 0071, "Facility Inspections," dated November 30, 2019, reviewed the quarterly inventory logs, dated April 19 and November 16, 2022, interviewed a facility lieutenant, and found the facility administrator or designee did not conduct an inventory of detainee baggage and other non-valuable property at least once each quarter. Specifically, ODO found 6 months and 28 days elapsed between the last two inventories (Deficiency FPP-19<sup>9</sup>).

ODO Reviewed NCDC Policy 0071, "Facility Inspections," dated November 30, 2019, reviewed the quarterly inventory logs, dated April 19 and November 16, 2022, interviewed a detention lieutenant, and found facility quarterly inventory logs did not indicate the date, time, nor name of the officer(s) conducting the inventory (**Deficiency FPP-20**<sup>10</sup>).

#### SPECIAL MANAGEMENT UNITS (SMU)

ODO reviewed seven detainee SMU files, interviewed a facility lieutenant, and found in two out of seven files, the facility did not include a completed administrative segregation order in the detainee's detention file nor in a retrievable electronic format (**Deficiency SMU-20**<sup>11</sup>).

ODO reviewed seven SMU detainee records and found in five out of seven records, the SMU officer did not immediately record whether the detainees received meals. Specifically, the officers did not record whether they offered or served 17 out of 53 meals to the detainees (Deficiency SMU-65<sup>12</sup>). This is a repeat deficiency.

<sup>&</sup>lt;sup>8</sup> "The facility orientation shall also include the following information: ...
2. How to use the telephone system to make telephone calls."

See ICE NDS 2019, Standard, Admission and Release, Section (II)(H)(1-2).

<sup>&</sup>lt;sup>9</sup> "An inventory of detainee baggage and other non-valuable property will be conducted by the facility administrator or designee at least once each quarter." *See* ICE NDS 2019, Standard, Funds and Personal Property, Section (II)(D). <sup>10</sup> "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).

<sup>&</sup>lt;sup>11</sup> "When the detainee is released from administrative segregation, the releasing officer shall indicate the date and time of release on the administrative segregation order. The completed order shall then be included in the detainee's detention file or maintained in a retrievable electronic format." *See* ICE NDS 2019, Standard, Special Management Unit, Section (II)(A)(2)(c).

<sup>&</sup>lt;sup>12</sup> "The special housing unit officer shall immediately record:

ODO reviewed SMU 30-minute observation logs from June 30 to September 30, 2022, and found SMU staff did not observe and log observations at least every 30-minutes on an irregular schedule. Specifically, staff conducted 30-minute observations in 1,032 recorded instances but should have had at least 1,920 recorded instances of 30-minute observations during this 93-day period (Deficiency SMU-84<sup>13</sup>). This is a priority component.

#### **STAFF-DETAINEE COMMUNICATION**

ODO interviewed two detainees who stated that ERO Salt Lake City did not respond to their requests within a reasonable time frame. ODO reviewed the detainees' requests from October 17 to November 17, 2022, and found the facility did not respond to their requests in a timely manner. Specifically, one detainee submitted a request on October 18, 2022, and ERO Salt Lake City responded on October 27, 2022, and a second request on October 27, 2022, with ERO Salt Lake City responding on November 10, 2022. The other detainee submitted two requests for information on November 4, 2022, and another on November 8, 2022, and ERO Salt Lake City responded to the detainee's requests on November 15, 2022. ODO noted this as an Area of Concern.

#### SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION (SAAPI)

ODO observed six NCDC housing units and found in two out of six units:

• The facility did not post sexual abuse and assault awareness notices on housing-unit bulletin boards nor any contact information of the facility prevention of sexual assault (PSA) compliance manager and local organizations that assist detainees victimized by sexual abuse and assault (Deficiency SAAPI-52<sup>14</sup>);

*Corrective Action:* Prior to the completion of the inspection, NCDC posted all required notices on the housing unit bulletin boards and ODO verified they were posted to the bulletin boards (C-1);

• The facility did not post information for local or national organizations that assist detainees victimized by sexual abuse and assault (Deficiency SAAPI-53<sup>15</sup>);

<sup>1)</sup> Whether the detainee ate, showered, recreated and took any medication; and

<sup>2)</sup> Any additional information, such as whether the detainee has a medical condition, or has expressed or exhibited suicidal/assaultive ideation, intent, or behavior.

<sup>3)</sup> The officer that conducts the activity shall print his or her name and sign the record."

See ICE NDS 2019, Standard, Special Management Unit, Section (II)(D)(2)(a)(1-2).

<sup>&</sup>lt;sup>13</sup> "SMU staff shall observe and log observations at least every 30 minutes on an irregular schedule." *See* ICE NDS 2019, Standard, Special Management Unit, Section (II)(K).

<sup>&</sup>lt;sup>14</sup> "ICE/ERO will provide a sexual abuse and assault awareness notice to be posted on all housing-unit bulletin boards, as well as a 'Sexual Assault Awareness Information' pamphlet to be distributed. The facility shall post with this notice the name of the facility PSA Compliance Manager and information about local organizations that can assist detainees who have been victims of sexual abuse and assault, including mailing addresses and telephone numbers (including toll-free hotline numbers where available)." *See* ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(F)(3).

<sup>&</sup>lt;sup>15</sup> "If no such local organizations exist, the facility shall make available the same information about national organizations." *See* ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section

*Corrective Action:* Prior to the completion of the inspection, NCDC posted all required notices on the housing unit bulletin boards and ODO verified they were posted to the bulletin boards (C-2); and

• The facility did not post sexual abuse and assault awareness notices on housing-unit bulletin boards in any language (Deficiency SAAPI-54 <sup>16</sup>).

### <u>ORDER</u>

#### **DISCIPLINARY SYSTEM (DS)**

ODO reviewed the NCDC Inmate Rules and Regulations and found no mention of a detainee's right to protection from personal abuse, corporal punishment, unnecessary or excessive use of force, personal injury, disease, property damage, and harassment (**Deficiency DS-45**<sup>17</sup>).

*Corrective Action:* Prior to the completion of the inspection, the facility provided an updated copy to staff and detainees of the NCDC Inmate Rules and Regulations, advising detainees of their right to protection from personal abuse, corporal punishment, unnecessary or excessive use of force, personal injury, disease, property damage, and harassment (C-3).

### **CARE**

#### FOOD SERVICE (FS)

ODO interviewed the food service administrator (FSA) and found the facility did not implement written procedures for the administrative or FS personnel to conduct weekly inspections of all FS areas, including dining, storage, equipment, and food-preparation areas. Specifically, the FSA informed ODO the facility staff did not conduct weekly inspections of the FS areas and had no written weekly inspection procedure (**Deficiency FS-116**<sup>18</sup>).

<sup>(</sup>II)(F)(3).

<sup>&</sup>lt;sup>16</sup> "This information will be provided in English and Spanish, and to other segments of the detainee population with limited English proficiency through translations or oral interpretation." *See* ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(F)(3).

<sup>&</sup>lt;sup>17</sup> "M. Notice to Detainees: The facility handbook shall provide notice of the facility's rules of conduct, and of the sanctions imposed for violations of the rules. Among other things, the handbook shall advise detainees of the following, and the contents shall be communicated to detainees in a language or manner that they understand:

<sup>1.</sup> The right to protection from personal abuse, corporal punishment, unnecessary or excessive use of force, personal injury, disease, property damage, and harassment;"

See ICE NDS 2019, Standard, Disciplinary System, Section (II)(M)(1).

<sup>&</sup>lt;sup>18</sup> "The facility shall implement written procedures for the administrative or food service, personnel conducting the weekly inspections of all food service areas, including dining, storage, equipment, and food-preparation areas." *See* ICE NDS 2019, Standard, Food Service, Section (II)(I)(11)(a).

# **ACTIVITIES**

#### VISITATION (V)

ODO reviewed the facility-specific detainee handbook and found no mention of visitation hours (Deficiency V-2<sup>19</sup>).

ODO observed the detainee housing units and found the facility did not post visitation rules and hours where detainees can easily see them. Specifically, ODO toured four detainee housing units and found in four out of four units, the facility did not post rules and hours for visitation. ODO interviewed a facility lieutenant and found the facility did not post the rules and hours for visitation in the housing units nor in the visitor waiting room (**Deficiency V-3**<sup>20</sup>).

ODO interviewed a facility sergeant and found the following deficiencies:

- The facility did not make the visitation schedule and procedures available to the public telephonically (**Deficiency V-4**<sup>21</sup>);
- No live voice or recorded message to provide telephone callers the rules and hours for all categories of visitation (Deficiency V-5<sup>22</sup>);
- Facility staff did not verify each visitor's identity (through driver's license, photo identification, etc.) before admitting him or her to the facility (**Deficiency V-21**<sup>23</sup>);
- The facility admitted adult visitors without requiring positive identification (Deficiency V-22<sup>24</sup>); and
- The facility did not provide notification of the rules and hours for legal visitation nor post the rules prominently in the visiting room (Deficiency V-35<sup>25</sup>).

ODO reviewed the NCDC written legal visitation procedures and found the facility did not provide for the exchange of documents between detainee and legal representative (or legal assistant) when contact visitation rooms are unavailable (**Deficiency V-58**<sup>26</sup>).

<sup>&</sup>lt;sup>19</sup> "The facility handbook shall include visitation rules and hours." *See* ICE NDS 2019, Standard, Visitation, Section (II)(B).

<sup>&</sup>lt;sup>20</sup> "The facility shall also post the rules and hours where detainees can easily see them, including in the housing units." *See* ICE NDS 2019, Standard, Visitation, Section (II)(B).

<sup>&</sup>lt;sup>21</sup> "Each facility shall make the schedule and procedures available to the public, both in written form on the facility's website (if available) and posted in the visitors' waiting area, and telephonically." *See* ICE NDS 2019, Standard, Visitation, Section (II)(B).

<sup>&</sup>lt;sup>22</sup> "A live voice or recording shall provide telephone callers the rules and hours for all categories of visitation." *See* ICE NDS 2019, Standard, Visitation, Section (II)(B).

 $<sup>^{23}</sup>$  "Staff shall verify each visitor's identity (through driver's license, photo identification, etc.) before admitting him or her to the facility. Photo identification must be a valid state or government-issued photo identification." *See* ICE NDS 2019, Standard, Visitation, Section (II)(F)(2).

<sup>&</sup>lt;sup>24</sup> "No adult visitor shall be admitted without positive identification." *See* ICE NDS 2019, Standard, Visitation, Section (II)(F)(2).

 $<sup>^{25}</sup>$  "The facility shall provide notification of the rules and hours for legal visitation and post the rules prominently in the visiting room." *See* ICE NDS 2019, Standard, Visitation, Section (II)(G)(2).

<sup>&</sup>lt;sup>26</sup> "The facility's written legal visitation procedures must provide for the exchange of documents between detainee and legal representative (or legal assistant) even when contact visitation rooms are unavailable." *See* ICE NDS 2019,

ODO observed four detainee housing units and found the facility did not post the current pro bono list in detainee housing units. Specifically, ODO found in two out of four housing units (C and D), the facility did not post the pro bono list. Furthermore, the facility posted the July 2022 pro bono lists in two out of four housing units (B and L) but the October 2022 pro bono list is the most current list (Deficiency V-69<sup>27</sup>).

ODO interviewed a facility sergeant and found the following:

- The facility did not require individuals with criminal records and individuals in removal proceedings to notify the facility before registering for visitation privileges (**Deficiency V-130**<sup>28</sup>);
- The facility did not weigh the nature and extent of an individual's criminal record and prior conduct against in determining visitation privileges (Deficiency V-131<sup>29</sup>); and
- Facility visitation policy permits detainees visitation everyday (to include weekends and holidays) from 6:30 a.m. to 9:30 p.m., but the facility website states on-site visits, Monday through Friday, 6:00 a.m. 9:00 p.m., and permits online visits Monday through Friday 6:00 a.m. 9:00 p.m. ODO's review of visitation logs confirmed weekend visits, but policy and website visitation times need to agree with each other. ODO noted this as an **Area of Concern**.

# **JUSTICE**

#### LAW LIBRARIES AND LEGAL MATERIAL (LLLM)

ODO reviewed the NCDC electronic detainee request log, interviewed a facility lieutenant, and found the facility did not permit a detainee to use the designated law library for a minimum of 5 hours per week, during a reasonable time of day. Specifically, ODO found one detainee submitted 18 requests to use the law library from November 10 to 16, 2022; however, the facility only permitted the detainee 3 hours of access to the law library (Deficiency LLLM-18<sup>30</sup>). This is a priority component.

Standard, Visitation, Section (II)(G)(9).

<sup>&</sup>lt;sup>27</sup> "The facility shall post the current list in detainee housing units and other appropriate areas." *See* ICE NDS 2019, Standard, Visitation, Section (II)(G)(13).

<sup>&</sup>lt;sup>28</sup> "Former ICE/ERO detainees, individuals with criminal records, and individuals in removal proceedings shall not be automatically excluded from visiting. Individuals in any of these categories must notify the facility before registering for visitation privileges." *See* ICE NDS 2019, Standard, Visitation, Section (II)(M)(2).

<sup>&</sup>lt;sup>29</sup> "The facility shall weigh the nature and extent of an individual's criminal record and/or prior conduct against the benefits of visitation in determining visitation privileges." *See* ICE NDS 2019, Standard, Visitation, Section (II)(M)(2).

<sup>&</sup>lt;sup>30</sup> "Each detainee shall be permitted to use the designated law library for a minimum of five (5) hours per week during a reasonable time of day." *See* ICE NDS 2019, Standard, Law Libraries and Legal Material, Section (II)(F).

# CONCLUSION

During the inspection, ODO assessed the facility's compliance with 20 standards under NDS 2019 and found the facility in compliance with 12 of those standards. ODO found 23 deficiencies in the remaining 8 standards. ODO commends the facility staff members for their responsiveness during the inspection. ODO recommends ERO work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations. ERO provided ODO with the uniform corrective action plan for ODO's last inspection of NCDC on June 7, 2022.

Compliance Inspection Results Compared	FY 2022 (NDS 2019)	FY 2023 (NDS 2019)
Standards Reviewed	16	20
Deficient Standards	8	8
Overall Number of Deficiencies	14	23
Priority Components	0	2
Repeat Deficiencies	5	2
Areas Of Concern	0	2
Corrective Actions	0	3
Facility Rating	Good	Good