



U.S. Department of Homeland Security
U.S. Immigration and Customs Enforcement
Office of Professional Responsibility
Inspections and Detention Oversight Division
Washington, DC 20536-5501

Office of Detention Oversight
Follow-Up Compliance Inspection

Enforcement and Removal Operations
ERO Salt Lake City Field Office

Washoe County Jail
Reno, Nevada

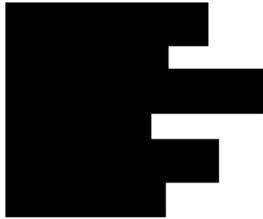
April 26-30, 2021

FOLLOW-UP COMPLIANCE INSPECTION
of the
WASHOE COUNTY JAIL
Reno, Nevada

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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 Washoe County Jail (WCJ) in Reno, Nevada, from April 26 to 30, 2021.¹ The facility opened in December 1988 and is owned and operated by the Washoe County Sheriff's Office. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at WCJ in December 2008 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) 2000.²

ERO has assigned deportation officers to the facility. A WCJ facility administrator handles daily facility operations and is supported by [REDACTED] personnel. The Washoe County Sheriff's Office provides food services, Naphcare provides medical care, and Keefe provides commissary services at the facility. The facility was accredited by the National Commission on Correctional Health Care in September 2019.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity ³	86
Average ICE Detainee Population ⁴	[REDACTED]
Male Detainee Population (as of April 26, 2021)	[REDACTED]
Female Detainee Population (as of April 26, 2021)	0

During its last inspection, in November 2020, ODO found 15 deficiencies in the following areas: Admission and Release (4); Custody Classification System (1); Sexual Abuse and Assault Prevention and Intervention (1); Special Management Units (6); Use of Force (1); and Telephone Access (2).

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

² ODO inspected WCJ in November 2020 against the NDS 2019; however, ERO Custody Management provided ODO with an updated list of United States Marshals Service facilities and standards to inspect those facilities to, which changed WCJ from NDS 2019 back to NDS 2000. As such, ODO conducted this follow-up inspection in accordance with NDS 2000.

³ Data Source: ERO Facility List Report as of April 26, 2021.

⁴ *Ibid.*

⁵ Per the ERO Facility List Report as of March 1, 2021, WCJ has an FY2020 average daily population of 12 detainees, which justified ODO to schedule WCJ for an inspection in FY2021. Although the facility's population count during the inspection was three, the facility has a current contract to house ICE detainees which served as further justification for ODO to continue with the inspection.

FOLLOW-UP COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population (ADP) 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 inspections at all ICE ERO detention facilities, which ODO inspected earlier in the FY.

While follow-up 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.

ODO was unable to conduct an on-site inspection of this facility, as a result of the COVID-19 pandemic, and instead, conducted a remote inspection of the facility. During this remote inspection, ODO interviewed facility staff, ERO field office staff, and detainees, reviewed files and detention records, and was able to assess compliance for at least 90 percent or more of the ICE national detention standards reviewed during the inspection.

FINDINGS BY NATIONAL DETENTION STANDARDS 2000 MAJOR CATEGORIES

NDS 2000 Standards Inspected ^{6&7}	Deficiencies
Part 1 – Detainee Services	
Admission and Release	6
Detainee Classification System	8
Funds and Personal Property	4
Telephone Access	1
Sub-Total	19
Part 2 – Security and Control	
Emergency Plans	3
Environmental Health and Safety	7
Special Management Unit (Administrative Segregation)	0
Special Management Unit (Disciplinary Segregation)	0
Use of Force	2
Sub-Total	12
Part 3 – Health Services	
Hunger Strikes	2
Medical Care	1
Suicide Prevention and Intervention	1
Sub-Total	4
Total Deficiencies	35

⁶ For greater detail on ODO’s findings, see the *Compliance Inspection Findings* section of this report.

⁷ Beginning in FY 2021, ODO added Emergency Plans, Facility Security and Control, Population Counts, Hunger Strikes, and Staff Training as core standards. NDS 2019 does not include Emergency Plans, Population Counts, nor Staff Training as individual standards; however, those specific requirements are resident in other core standards.

DETAINEE RELATIONS

The facility's ICE detainee population count was [REDACTED] during the entire inspection, and the [REDACTED] detainees declined to participate in the ODO interview process. Although the facility's population count was [REDACTED] the facility has an active contract to house detainees, and its FY 2020 ADP was 12, which met the ODO inspection criteria for an ADP of 10 or more detainees.

FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

DETAINEE SERVICES

ADMISSION AND RELEASE (AR)

ODO reviewed 12 detainee admission files and found 5 out of 12 files did not contain an Order to Detain or Release form (Form I-203) with an appropriate ERO Salt Lake City official signature and 1 out of 12 detainee admission files did not contain a Form I-203 (AR-34⁸).

ODO interviewed the facility's deputy and found the facility completed a Washoe County Liability & Property Loss Report form for a detainee's missing or lost property but did not complete the Report of Detainee's Missing Property form (Form I-387) (AR-51⁹).

ODO interviewed the facility's deputy and found the facility does not forward the completed Form I-387 to ERO Salt Lake City (AR-52¹⁰).

ODO interviewed the facility's deputy and found no ERO Salt Lake City approval of the facility's admission orientation procedures (AR-54¹¹).

ODO reviewed 10 detainee release files and found 2 out of 10 detainee release files did not contain the detainee's signature for the return of personal property upon release (AR-72¹²).

ODO interviewed the facility's deputy and found no ERO Salt Lake City approval for the facility's release procedures (AR-73¹³).

⁸ "An order to detain or release (Form I-203 or I-203a) bearing the appropriate official signature shall accompany the newly arriving detainee." See ICE NDS 2000, Standard, Admission and Release, Section (III)(H).

⁹ "The officer shall complete a Form I-387, "Report of Detainee's Missing Property" when any newly arrived detainee claims his/her property has been lost or left behind." See ICE NDS 2000, Standard, Admission and Release, Section (III)(I).

¹⁰ "IGSA facilities shall forward the completed I-387s to INS." See ICE NDS 2000, Standard, Admission and Release, Section (III)(I).

¹¹ "In IGSA's the INS office of jurisdiction shall approve all orientation procedures." See ICE NDS 2000, Standard, Admission and Release, Section (III)(J).

¹² "Necessary steps include completing and processing forms, closing files, fingerprinting; returning personal property; and reclaiming facility-issued clothing, bedding, etc." See ICE NDS 2000, Standard, Admission and Release, Section (III)(2nd J).

¹³ "INS will approve the IGSA release procedures." See ICE NDS 2000, Standard, Admission and Release, Section (III)(2nd J).

DETAINEE CLASSIFICATION SYSTEM (DCS)

ODO interviewed the facility's classification specialist, reviewed 12 detainee files, and found the facility completed 2 out of 12 detainee classification without ERO Salt Lake City-provided data (**DCS-4**¹⁴).

ODO interviewed the facility's deputy, reviewed the facility's staff training log, and found no training for classification officers on the facility's classification process (**DCS-5**¹⁵).

ODO reviewed 12 detainee classification files and found 2 out of 12 detainee classification files did not contain a first-line supervisory review and approval of each detainee's classification (**DCS-10**¹⁶).

ODO reviewed 12 detainee classification files and found 2 out of 12 detainee classification files did not have a supervisor review of the intake/processing officer's classification files for accuracy and completeness (**DCS-19**¹⁷).

ODO reviewed 12 detainee classification files and found 12 out of 12 detainee classification files without the reviewing officer's overview to ensure the facility assigned each detainee to the appropriate housing unit (**DCS-20**¹⁸).

ODO interviewed the classification specialist, reviewed 12 detainee files, and found ERO Salt Lake City did not provide the facility with the necessary information needed to classify ICE detainees in 2 out of 12 instances (**DCS-23**¹⁹).

ODO reviewed 12 detainee classification files and found 1 out of 12 files did not receive timely reclassification. Specifically, the detainee's last reclassification was June 2020 (**DCS-37**²⁰).

ODO reviewed the facility's detainee handbook and found the classification section does not contain an explanation of the facility's classification levels, with the conditions and restrictions applicable to each, nor the procedures by which a detainee may appeal his/her classification (**DCS-**

¹⁴"The classification system ensures: ...

1. All detainees are classified upon arrival, before being admitted into the general population. INS will provide CDFs and IGSA facilities with the data they need from each detainee's file to complete the classification process." *See* ICE NDS 2000, Standard, Detainee Classification System, Section (III)(A)(1).

¹⁵ "All officers assigned to classification duties shall be trained in the facility's classification process." *See* ICE NDS 2000, Standard, Detainee Classification System, Section (III)(A)(1).

¹⁶ "The classification system ensures: ...

3. The first-line supervisor will review and approve each detainee's classification." *See* ICE NDS 2000, Standard, Detainee Classification System, Section (III)(A)(3).

¹⁷ "In all detention facilities, a supervisor will review the intake/processing officer's classification files for accuracy and completeness." *See* ICE NDS 2000, Standard, Detainee Classification System, Section (III)(C).

¹⁸ "Among other things, the reviewing officer shall ensure that each detainee has been assigned to the appropriate housing unit." *See* ICE NDS 2000, Standard, Detainee Classification System, Section (III)(C).

¹⁹ "INS offices shall provide non-INS facilities with the necessary information for the facility to classify INS detainees." *See* ICE NDS 2000, Standard, Detainee Classification System, Section (III)(D).

²⁰ "All facility classification systems shall ensure that a detainee may be reclassified any time and the classification level redetermined." *See* ICE NDS 2000, Standard, Detainee Classification System, Section (III)(G).

50²¹).

FUNDS AND PERSONAL PROPERTY (FPP)

ODO interviewed the facility's sheriff support specialist and found the facility places detainee identity documents in the detainee's valuable property storage and does not turn over to ERO Salt Lake City for inclusion in the detainee's noncitizen file (FPP-12²²).

ODO interviewed the facility's deputy, reviewed the secure storage and clothing/property control policy, and found no written procedures for the inventory and audit of detainee funds, valuables, nor personal property (FPP-54²³).

ODO reviewed the facility's secure storage and clothing/property control policy and found no written procedures for loss of nor damage to properly received detainee property (FPP-80²⁴).

ODO reviewed the facility's detainee handbook and found none of the required information concerning personal property; specifically, items that may remain in a detainee's possession (FPP-89²⁵).

TELEPHONE ACCESS (TA)

ODO reviewed the TA section in the facility's detainee handbook and found no written telephone access rules for the detainee (TA-2²⁶).

²¹ "The detainee handbook's section on classification will include the following: ...

1. An explanation of the classification levels, with the conditions and restrictions applicable to each.
2. The procedures by which a detainee may appeal his/her classification." *See* ICE NDS 2000, Standard, Detainee Classification System, Section (III)(I)(1-2).

²² "Identity documents, such as passports, birth certificates, etc., will be held in the detainee's A-file." *See* ICE NDS 2000, Standard, Funds and Personal Property, Section (III)(B)(3).

²³ "Each facility shall have a written procedure for inventory and audit of detainee funds, valuables, and personal property." *See* ICE NDS 2000, Standard, Funds and Personal Property, Section (III)(F).

²⁴ "All CDFs and IGSA facilities will have and follow a policy for loss of or damage to properly received detainee property, as follows: ...

2. Supervisory staff will conduct the investigation;
5. They will promptly reimburse detainees for all validated property losses caused by facility negligence;
6. They will not arbitrarily impose a ceiling on the amount to be reimbursed for a validated claim; and
7. The senior contract officer will immediately notify the designated INS officer of all claims and outcomes." *See* ICE NDS 2000, Standard, Funds and Personal Property, Section (III)(H)(1-7).

²⁵ "The detainee handbook or equivalent shall notify the detainees of facility policies and procedures concerning personal property, including: ...

2. That, upon request, they will be provided an ICE-certified copy of any identity document (passport, birth certificate, etc.) placed in their A-files;
4. The procedure for claiming property upon release, transfer, or removal;
5. The procedures for filing a claim for lost or damaged property." *See* ICE NDS 2000, Standard, Funds and Personal Property, Section (III)(J)(2,4,5).

²⁶ "As described in the "General Provisions" standard, the facility shall provide telephone access rules in writing to each detainee upon admittance, and also shall post these rules where detainees may easily see them." *See* ICE NDS 2000, Standard, Telephone Access, Section (III)(B).

SECURITY AND CONTROL

EMERGENCY PLANS (EP)

ODO reviewed the facility's contingency plan development – basic planning policy and found the contingency plans do not comply with ERO Salt Lake City standards for confidentiality. Specifically, the plans did not include a statement prohibiting unauthorized plan disclosure (EP-4²⁷).

ODO reviewed 12 facility contingency plans and found 12 out of 12 contingency plans did not include a statement prohibiting unauthorized plan disclosure (EP-23²⁸).

ODO interviewed a facility sergeant and found the facility does not have an approved individual contingency plan; specifically, contingency plans regarding a work/food strike (EP-93²⁹).

ENVIRONMENTAL HEALTH AND SAFETY (EHS)

ODO interviewed the facility's safety authority, reviewed the [REDACTED] and found the facility did not provide a copy of the [REDACTED] to the local fire department (EHS-11³⁰).

ODO interviewed the facility's safety authority, reviewed the [REDACTED] and found the facility does not maintain documentation of their [REDACTED] reviews in the [REDACTED] information system (EHS-12³¹).

ODO interviewed the facility's safety authority and found nothing to indicate the facility conducts [REDACTED] fire and safety inspections (EHS-60³²).

ODO interviewed the facility's safety authority and found nothing to indicate the facility conducts [REDACTED] fire drills within each department (EHS-65³³).

ODO interviewed the facility's safety authority and found the facility did not [REDACTED] [REDACTED] in the facility's fire drill reports nor were the fire drills timed (EHS-69³⁴).

²⁷ "All plans will comply with the INS standards for confidentiality." See ICE NDS 2000, Standard, Emergency Plans, Section (III)(B)(1)(a).

²⁸ "Every plan will include a statement prohibiting unauthorized plan disclosure. This applies equally to developmental stages and to the finished plans." See ICE NDS 2000, Standard, Emergency Plans, Section (III)(B)(4).

²⁹ "All facilities will compile INS approved individual contingency plans, as needed, in the following order: ...
2. Work/Food Strike." See ICE NDS 2000, Standard, Emergency Plans, Section (III)(D)(2).

³⁰ "He/she will maintain this information in the safety office (or equivalent), with a copy to the local fire department." See ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(C).

³¹ "Documentation of the [REDACTED] reviews will be maintained in the MSDS master file." See ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(C).

³² "A qualified departmental staff member will conduct [REDACTED] fire and safety inspections; the maintenance (safety) staff will conduct monthly inspections." See ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(L)(2).

³³ "[REDACTED] fire drills will be conducted and documented separately in each department." See ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(L)(4).

³⁴ "[REDACTED] will be included in each fire drill, and timed." See ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(L)(4)(c).

ODO interviewed the facility's safety authority and found facility staff does not [REDACTED] (EHS-70³⁵).

ODO interviewed the facility's safety authority and found the facility's emergency generator does not receive quarterly testing nor servicing from an external generator-service company (EHS-80³⁶).

USE OF FORCE (UOF)

ODO interviewed a facility lieutenant, reviewed the 2020 annual staff continuing education training spreadsheet, and found the facility does not provide UOF team technique training to all facility staff members (UOF-12³⁷).

ODO interviewed a facility lieutenant, reviewed the facility's UOF policy, and found the facility does not pattern its incident review process after ERO Salt Lake City. Specifically, the facility's after-action review team did not include the health services administrator nor an ERO representative (UOF-102³⁸).

HEALTH SERVICES

HUNGER STRIKES (HS)

ODO reviewed the facility's HS policy and found the facility's policy did not limit the decision to require staff to measure and record all food and water intake and output to the clinical director (CD). Specifically, the policy also allowed a physician, nurse practitioner, physician, and or dentist to continue measuring and monitoring food and water intake and output (HS-19³⁹).

ODO reviewed the facility's HS policy and found it did not limit the decision to release a detainee from hunger strike to the CD (HS-45⁴⁰).

MEDICAL CARE (MC)

ODO reviewed [REDACTED] health care staff credential files and found [REDACTED] health care staff licenses were either unavailable, not current, or not primary source verified. Specifically, [REDACTED] of the licenses were not primary source verified, [REDACTED] licensure fields were blank and unaccounted for,

³⁵ [REDACTED] will be included in each fire drill, and timed. [REDACTED]

[REDACTED] " See ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(L)(4)(c).

³⁶ "The emergency generator will also receive quarterly testing and servicing from an external generator-service company." See ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(O).

³⁷ "To use human resources most effectively, the OIC will provide use-of-force team technique training for all staff members." See ICE NDS 2000, Standard, Use of Force, Section (III)(A)(4)(b).

³⁸ "IGSA will pattern their incident review process after INS." See ICE NDS 2000, Standard, Use of Force, Section (III)(K).

³⁹ "After consultation with the CD, the OIC may require staff to measure and record food and water intake and output. This measuring and monitoring will continue until ended by the CD." See ICE NDS 2000, Standard, Hunger Strikes, Section (III)(C).

⁴⁰ "The CD may order that a detainee be released from hunger strike evaluation and treatment." See ICE NDS 2000, Standard, Hunger Strikes, Section (III)(E).

█ licenses could not be located by the credentialing office, and █ licenses were expired (MC-18⁴¹).

SUICIDE PREVENTION AND INTERVENTION (SPI)

ODO reviewed the SPI program and found the decision to remove a detainee from suicide watch does not require written authorization from the CD (SPI-20⁴²).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 12 standards under NDS 2000 and found the facility in compliance with 2 of those standards. ODO found 35 deficiencies in the remaining 10 standards. ODO commends facility staff for their responsiveness during this inspection. ODO recommends ERO work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations.

Compliance Inspection Results Compared	First FY 2021 (NDS 2019)	Second FY 2021 (NDS 2000)
Standards Reviewed	18	12
Deficient Standards	6	10
Overall Number of Deficiencies	15	35
Repeat Deficiencies	0	0
Areas of Concern	0	0
Corrective Actions	0	0

⁴¹ "The health care staff will have a valid professional licensure and or certification." *See* ICE NDS 2000, Standard, Medical Care, Section (III)(C).

⁴² "A detainee formerly under a suicide watch may be returned to general population, upon written authorization from the CD." *See* ICE NDS 2000, Standard, Suicide Prevention and Intervention, Section (III)(C).