



**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

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**Office of Detention Oversight  
Compliance Inspection**

**Enforcement and Removal Operations  
ERO Salt Lake City Field Office**

**Henderson Detention Center  
Henderson, Nevada**

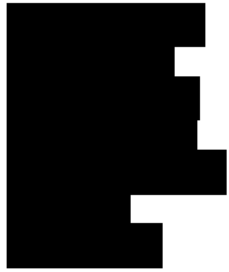
**April 5-7, 2022**

**COMPLIANCE INSPECTION**  
**of the**  
**HENDERSON DETENTION CENTER**  
Henderson, Nevada

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## COMPLIANCE INSPECTION TEAM MEMBERS



Team Lead	ODO
Inspections and Compliance Specialist	ODO
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Contractor	Creative Corrections
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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 compliance inspection of the Henderson Detention Center (HDC) in Henderson, Nevada, from April 5 to 7, 2022.<sup>1</sup> HDC opened in 1994 and is owned and operated by the Henderson Police Department. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at HDC in 2009 under the oversight of ERO's Field Office Director (FOD) in Salt Lake City (ERO Salt Lake City). The facility operates under the National Detention Standards (NDS) 2000.

ERO has assigned deportation officers (DOs) and a detention services manager to the facility. An HDC captain handles daily facility operations and manages █████ support personnel. The City of Henderson provides food services, Naphcare provides medical care, and Keefe provides commissary services at the facility. HDC does not hold any accreditations from outside entities.

Capacity and Population Statistics	Quantity
ICE Bed Capacity <sup>2</sup>	█████
Average ICE Population <sup>3</sup>	█████
Adult Male Population (as of April 5, 2022)	█████
Adult Female Population (as of April 5, 2022)	█████

During its last inspection, in Fiscal Year (FY) 2021, ODO found 12 deficiencies in the following areas: Admission and Release (3); Detainee Classification System (4); Emergency Plans (1); Environmental Health and Safety (1); Funds and Personal Property (2); and Use of Force (1).

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<sup>1</sup> This facility holds detainees with security classification levels for periods greater than 72 hours.

<sup>2</sup> Data Source: ERO Facility List as of April 11, 2022.

<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 its decision-making to better allocate resources across the agency’s entire detention inventory.

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<sup>4</sup> ODO reviews the facility’s compliance with selected standards in their entirety.

## FINDINGS BY NATIONAL DETENTION STANDARDS 2000 MAJOR CATEGORIES

NDS 2000 Standards Inspected <sup>5,6</sup>	Deficiencies
<b>Part 1 - Detainee Services</b>	
Admission and Release	1
Correspondence and Other Mail	2
Detainee Classification System	0
Food Service	0
Funds and Personal Property	1
Group Presentations on Legal Rights	0
Issuance and Exchange of Clothing, Bedding and Towels	1
Marriage Requests	0
Non-Medical Emergency Escorted Trips	0
Recreation <sup>7</sup>	1
Voluntary Work Program	6
<b>Sub-Total</b>	<b>12</b>
<b>Part 2 - Security and Control</b>	
Detention Files	3
Detainee Transfers	10
Emergency Plans	1
Environmental Health and Safety	2
Post Orders	6
Special Management Unit (Administrative Segregation)	0
Special Management Unit (Disciplinary Segregation)	0
Use of Force	0
<b>Sub-Total</b>	<b>22</b>
<b>Part 3 - Health Services</b>	
Hunger Strikes	1
Medical Care	1
Suicide Prevention and Intervention	1
<b>Sub-Total</b>	<b>3</b>
<b>Other Standards Reviewed</b>	
Sexual Abuse and Assault Prevention and Intervention (NDS 2019)	0
<b>Sub-Total</b>	<b>0</b>
<b>Total Deficiencies</b>	<b>37</b>

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

<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>7</sup> The deficiency in Recreation was identified during detainee interviews, ODO did not inspect the Recreation standard in its entirety.

## DETAINEE RELATIONS

ODO interviewed 24 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.

*Access to Legal Material:* Four detainees stated they did not know how to access the law library.

- Action Taken: ODO interviewed the HDC accreditation officer and informed her of the detainees' concerns. On April 6, 2022, an HDC sergeant met with the detainees and instructed them on access and use of the law library. Additionally, HDC staff communicate the procedures to access the law library during the detainees' orientation process and include the procedure in the facility detainee handbook.

*Admission and Release:* One detainee stated HDC staff strip searched her during intake processing in October 2021.

- Action Taken: ODO interviewed the HDC booking lieutenant (LT), sergeant, and the HDC accreditation manager and found facility staff admitted the detainee on October 28, 2021. HDC staff discovered the detainee's criminal history of drug charges after a review of documents from ERO Salt Lake City. ODO reviewed the detainee's detention file and confirmed a reasonable suspicion strip search of the detainee by a staff member of the same gender upon admission due to her criminal history and in accordance with the ICE Change Notice, Strip Search Memo, dated October 15, 2007. However, the strip search of the detainee did not have prior supervisory approval, and staff did not document the strip search as required. ODO cited this as a deficiency in the *Admission and Release* section of this report.

*Admission and Release:* One detainee stated her concern over the HDC staff strip searching her twice: once during intake and again during a medical visit on or about April 2, 2022.

- Action Taken: ODO interviewed the HDC booking LT, sergeant, and HDC accreditation manager and found HDC staff admitted the detainee on March 30, 2022. After reviewing the detainee's detention file, ODO confirmed a pat search upon admission, but found no evidence of a strip search upon arrival to HDC. ODO checked with HDC medical staff, reviewed all jail management system logs, and found no evidence of a medical visit or any other event notification on or about April 2, 2022. ODO found no evidence to support the detainee's claims of undergoing a strip search in the booking area or during a regular medical visit.

*Admission and Release:* One detainee stated HDC staff strip searched her in the presence of one female officer on or about February 23, 2022.

- Action Taken: ODO interviewed the HDC booking LT, sergeant, and facility accreditation manager and confirmed HDC staff admitted the detainee on February 23, 2022. HDC staff discovered the detainee's prior murder charge after a review of

documents from ERO Salt Lake City. ODO reviewed the detainee's detention file and confirmed a reasonable suspicion strip search of the detainee by a staff member of the same gender upon admission due to her criminal history and in accordance with the ICE Change Notice, Strip Search Memo, dated October 15, 2007. However, the strip search of the detainee did not have prior supervisory approval, and staff did not document the strip search as required. ODO cited this as a deficiency in the *Admission and Release* section of this report.

*Admission and Release:* One detainee stated HDC staff strip searched her on two separate occasions: one during the intake process and again during a search of her housing unit.

- Action Taken: ODO interviewed the HDC booking LT, sergeant, and the HDC accreditation manager and found facility staff admitted the detainee on March 30, 2022. HDC staff discovered the detainee's violent criminal history after a review of documents from ERO Salt Lake City. ODO reviewed the detainee's detention file and confirmed a reasonable suspicion strip search of the detainee by a staff member of the same gender upon admission due to her criminal history and in accordance with the ICE Change Notice, Strip Search Memo, dated October 15, 2007. As for the second strip search claim, ODO interviewed the HDC booking LT, reviewed the jail management system logs, and found no evidence of a strip search during a search of her housing unit. However, the strip search of the detainee during admission did not have prior supervisory approval, and staff did not document the strip search as required. ODO cited this as a deficiency in the *Admission and Release* section of this report.

*Correspondence and Other Mail:* One detainee stated the facility did not collect the mail on a consistent basis.

- Action Taken: ODO interviewed the HDC booking LT and reviewed the section of the HDC handbook on outgoing mail procedures. HDC collects mail during the evening shift at 8 p.m. and instructs detainees to leave mail in the designated area for collection. On April 7, 2022, an HDC sergeant spoke with the detainee and instructed her on the procedures for outgoing mail collection.

*Medical Care:* One detainee stated he has received no response after submitting a medical request on or about March 22, 2022, for sleeping problems.

- Action Taken: ODO reviewed the detainee's medical record and found he arrived at HDC on March 16, 2022. HDC medical staff screened the detainee upon arrival and reported no sleep disorder history. ODO found no documentation in the detainee's medical file of a sick call request. On April 7, 2022, an HDC licensed clinical social worker evaluated the detainee for his reported sleeping issues and found him to have an unspecified anxiety disorder. The social worker referred the detainee to a mental health provider (MHP) for further evaluation for medication, and the staff scheduled the detainee's next appointment for the week of April 11, 2022. The medical staff advised the detainee to return to medical if he had any concerns prior to his MHP evaluation. On April 19, 2022, the detainee met with the HDC mental health staff and



reported sleeping and anxiety issues. The mental health staff prescribed medication for the detainee to take twice per day as needed. The medical staff scheduled him a follow-up visit to occur on May 10, 2022.

*Medical Care:* One detainee stated he requested medication to treat his kidney during intake and the staff documented his condition. He also stated that he had a right inner ear problem, and the staff treated him with only medication.

- Action Taken: ODO reviewed the detainee's HDC medical record and found the detainee arrived at HDC on February 2, 2022. HDC medical staff evaluated the detainee, noted his history of kidney stones, and referred him to an HDC doctor for further evaluation. On February 18, 2022, an HDC nurse practitioner (NP) examined the detainee, ordered a urinalysis, and noted negative test results for acute kidney stones. The detainee also stated his right ear felt better, but he still experienced occasional dizziness. The medical staff placed the detainee on antibiotics for a chronic ear infection and advised him to increase his fluid intake. The medical staff scheduled blood work and an ultrasound of his kidneys for April 6, 2022, and would re-evaluate his status after reviewing his lab work results. The medical staff advised the detainee to follow-up with a sick call request if his condition worsened prior to his next visit. On April 7, 2022, the lab results arrived, and the medical staff noted normal results except for immature white blood cells and an increased platelet count. On April 15, 2022, the detainee completed an ultrasound appointment, and the results showed a moderate-to-severe left blockage in the kidney tube. The medical staff discussed all the results with the detainee. The staff ordered a magnetic resonance image test on the same day, and the order is pending approval by ERO Salt Lake City.

*Recreation:* Two detainees housed in general population stated the facility did not provide them access to recreation.

- Action Taken: On April 6, 2022, ODO spoke with the HDC booking LT and found the facility cohorted this housing unit and did not provide access to recreation because of COVID-19. Per ERO Salt Lake City, the field office provided no documentation approving discontinuation of recreation and cell restriction. The ERO COVID-19 Pandemic Response Requirements (PRR), Version 8.0, dated April 4, 2022, states, "cohorting, quarantining, and holding in medical isolation is not punitive in nature and must be operationally distinct from administrative or disciplinary segregation, insofar as cells and units for those forms of segregation may be used, but detainees are provided access to TV, reading materials, recreation, and telephones to the fullest extent possible." As such, ODO cited the facility not providing access to recreation as a deficiency in the *Recreation* section of this report.

*Sexual Abuse and Assault Prevention and Intervention:* Several detainees stated HDC officers of the opposite gender did not always make an announcement when entering the housing unit.

- Action Taken: ODO interviewed the HDC Prison Rape Elimination Act (PREA) compliance manager and found, per HDC policy and procedures, the requirement for

employees to announce themselves prior to entering a house of the opposite gender. ODO visited an HDC housing unit and did not observe any signage that reinforced the policy. Additionally, a female inspector accompanied facility staff on a tour of the facility, and no HDC officer announced her presence prior to entering the male housing units. ODO cited this as an area of concern in the *Sexual Abuse and Assault Prevention and Intervention* section of this report.

*Telephone Access:* Two detainees reported an inoperable telephone in their housing unit.

- Action Taken: ODO interviewed the HDC booking LT and found HDC had submitted a telephone repair order on March 29, 2022. On April 4, 2022, Securus, an HDC contractor, repaired the phone. During the inspection, ODO checked the phone and found it inoperable. HDC informed the detainees of the pending work order for the telephone. As of April 25, 2022, Securus had not repaired the phone and HDC submitted another work order. The inoperable phone did not drop the HDC housing unit below the required 1:25 ratio for phones to detainees.

## COMPLIANCE INSPECTION FINDINGS

### DETAINEE SERVICES

#### ADMISSION AND RELEASE (AR)

ODO reviewed █ detainee detention files and found in █ out of █ files, facility staff conducted a reasonable suspicion strip search. However, ODO found no supervisory approval for nor documentation of the three strip searches (**Deficiency AR-13<sup>8</sup>**).

#### CORRESPONDENCE AND OTHER MAIL (COM)

ODO reviewed the HDC handbook and found it did not specify the following:

- Opening and inspecting general incoming correspondence and other mail in the detainees' presence;
- Opening special correspondence in the detainees' presence, but no reading of the content;
- Definition of special correspondence;
- Notification that the facility considers identity documents sent through the mail as contraband, ERO Salt Lake City may use them as evidence, and the facility forbids detainees from keeping such items in their possession;
- The rules for providing indigent and certain other detainees free postage (**Deficiency COM-5<sup>9</sup>**).

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<sup>8</sup> "If information developed during admissions processing supports reasonable suspicion for a full search, the information supporting that suspicion should be documented in detail on Form G-1025, Record of Search)." See ICE NDS 2000, Standard, Admission and Release, Section (See Change Notice – Strip Search – October 15, 2007).

<sup>9</sup> "The facility shall notify detainees of its policy on correspondence and other mail through the detainee handbook or

ODO interviewed the HDC booking LT, reviewed the HDC handbook and the HDC policy on inmate mail, and found HDC used the City of Henderson mail services through city hall, which only processes and delivers outgoing detainee correspondence Monday through Thursday. As a result, outgoing detainee correspondence the facility receives on Thursdays, the facility does not deliver to the postal service until the following Monday (**Deficiency COM-10<sup>10</sup>**).

## FUNDS AND PERSONAL PROPERTY (FPP)

ODO reviewed HDC policy, Correctional Procedures Manual (CPM) 4524, Inmate Property Processing, and found no written procedures for loss or damage to properly receipted detainee property. Specifically, the policy did not contain the following required procedures:

- Supervisory staff conducts the investigation;
- The senior facility contract officer processes all detainee claims for lost or damaged property promptly;
- The official deciding the claim is at least one level higher in the chain of command than the official investigating the claim;
- The facility promptly reimburses detainees for all validated property losses caused by facility negligence;
- The facility imposes no arbitrary ceiling on the amount they will reimburse for a validated claim; and
- The senior contract officer will immediately notify the designated INS (ICE/ERO) officer of all claims and outcomes (**Deficiency FPP-80<sup>11</sup>**). **This is a repeat deficiency.**

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equivalent provided to each detainee upon admittance. At a minimum, the notification shall specify: ...

3. That general correspondence and other mail addressed to detainees shall be opened and inspected in the detainee's presence, unless the OIC authorizes inspection without the detainee's presence for security reasons;
4. That special correspondence may only be opened in the detainee's presence, and may be inspected for contraband, but not read;
5. The definition of special correspondence, including instructions on the proper labeling for special correspondence, without which it will not be treated as special mail. The notification shall clearly state that it is the detainee's responsibility to inform senders of special mail of the labeling requirement.
7. A description of mail which may be rejected by the facility and which the detainee will not be permitted to keep in his/her possession (for additional information refer to Section III.G., below). The notification will state that identity documents, such as passports, birth certificates, etc., are contraband and may be used by the INS as evidence or as otherwise appropriate. The notification will state that if detainees are not allowed to keep an identity document in their possession, they will be provided with a copy of the document, certified by an INS officer to be a true and correct copy;
8. How to obtain writing implements, paper, and envelopes; and
9. The procedure for purchasing postage (if any), and the rules for providing indigent and certain other Detainees' free postage."

*See ICE NDS 2000, Standard, Correspondence and Other Mail, Section (III)(B)(3-5, 7-9).*

<sup>10</sup> "...Outgoing correspondence shall be delivered to the postal service no later than the day after it is received by facility staff or placed by the detainee in a designated mail depository, excluding weekends and holidays." *See ICE NDS 2000, Standard, Correspondence and Other Mail, Section (III)(C).*

<sup>11</sup> "All CDFs and IGSA facilities will have and follow a policy for loss of or damage to properly receipted detainee property, as follows:

1. All procedures for investigating and reporting property loss or damage will be implemented as specified

## ISSUANCE AND EXCHANGE OF CLOTHING, BEDDING AND TOWELS (IECBT)

ODO reviewed HPD Division Procedure for Inmate Uniforms and Linens, CPM 4551, interviewed the HDC booking LT, and found HDC did provide detainees with 2 pairs of socks and undergarments; however, they do not exchange them daily to ensure detainees have sufficient clean socks and undergarments on a daily basis. Specifically, HDC staff followed a laundry exchange schedule, which allowed detainees to exchange their clothing every other day (**Deficiency IECBT-20**<sup>12</sup>).

## RECREATION (R)

ODO interviewed the HDC booking LT and found the facility denied outdoor recreation to cohorted detainees because of COVID-19, and HDC staff nor ERO Salt Lake City informed them of the restriction. Specifically, during detainee interviews, ODO identified two detainees for whom the facility suspended access to outdoor recreation; however, HDC had no documentation from ERO Salt Lake City approving the suspension of recreation and ERO's PRR requires facilities provide cohorted detainees access to recreation to the fullest extent possible (**Deficiency R-3**<sup>13</sup>).

## VOLUNTARY WORK PROGRAM (VWP)

ODO interviewed the HDC booking LT and staff and found:

- HDC did not permit detainees to volunteer to work in their VWP (**Deficiency VWP-1**<sup>14</sup>);
- A detainee's classification level did not determine their eligibility for the type of work assignment(s) (**Deficiency VWP-2**<sup>15</sup>);
- HDC did not develop site-specific rules for selecting work detail volunteers

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in this standard;

2. Supervisory staff will conduct the investigation;
3. The senior facility contract officer will process all detainee claims for lost or damaged property promptly;
4. The official deciding the claim will be at least one level higher in the chain of command than the official investigating the claim;
5. The facility will promptly reimburse detainees for all validated property losses caused by facility negligence;
6. The facility will not arbitrarily impose a ceiling on the amount to be reimbursed for a validated claim;
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).*

<sup>12</sup> "Socks and undergarments will be exchanged daily, outer garments at least twice weekly and sheets, towels, and pillowcases at least weekly." *See ICE NDS 2000, Standard, Issuance and Exchange of Clothing, Bedding and Towels, Section (III)(E).*

<sup>13</sup> "If outdoor recreation is available at the facility, each detainee shall have access for at least one hour daily, at a reasonable time of day, five days a week, weather permitting." *See ICE NDS 2000, Standard, Recreation, Section (III)(B)(1).*

<sup>14</sup> "Detainees who are physically and mentally able to work will be provided the opportunity to participate in any voluntary work program." *See ICE NDS 2000, Standard, Voluntary Work Program, Section (III)(A).*

<sup>15</sup> "The detainee's classification level will determine the type of work assignment for which he/she is eligible." *See ICE NDS 2000, Standard, Voluntary Work Program, Section (III)(A).*

(Deficiency VWP-6<sup>16</sup>);

- Detainees with less severe disabilities did not have the opportunity to participate in the voluntary work program (Deficiency VWP-12<sup>17</sup>);
- HDC did not consider the precise limitations of a disabled individual before rejecting certain work assignments (Deficiency VWP-13<sup>18</sup>); and
- HDC did not establish procedures for informing detainee volunteers of on-the-job responsibilities and reporting procedures (Deficiency VWP-26<sup>19</sup>).

## **SECURITY AND CONTROL**

### **DETENTION FILES (DF)**

ODO interviewed the HDC detainee classification technician (DCT), reviewed █ detainee detention files, and found in █ out of █ files, no classification levels of the detainees (Deficiency DF-1<sup>20</sup>).

ODO interviewed the HDC DCT, reviewed █ detainee detention files, and found in █ out of █ files, nothing to indicate the facility marked the files as active (Deficiency DF-5<sup>21</sup>).

ODO reviewed █ detainee detention files and found various omissions:

- █ out of █ files did not include the non-citizen booking record;
- █ out of █ files did not include 1 or more original photographs attached;
- █ out of █ files did not include a classification worksheet;
- █ of █ files did not include a housing identification card; and
- █ out of █ files did not include a baggage check form (Form I-77) (Deficiency DF-9<sup>22</sup>).

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<sup>16</sup> “The OIC shall develop site-specific rules for selecting work detail volunteers.” See ICE NDS 2000, Standard, Voluntary Work Program, Section (III)(E).

<sup>17</sup> “While some of these individuals’ medical restrictions will prevent them from working, those with less severe disabilities will have the opportunity to participate in the voluntary work program, in appropriate work projects.” See ICE NDS 2000, Standard, Voluntary Work Program, Section (III)(G).

<sup>18</sup> “The selecting official must consider the precise limitations of a disabled individual before rejecting certain work assignments.” See ICE NDS 2000, Standard, Voluntary Work Program, Section (III)(G).

<sup>19</sup> “The OIC will establish procedures for informing detainee volunteers about on-the-job responsibilities and reporting procedures.” See ICE NDS 2000, Standard, Voluntary Work Program, Section (III)(M).

<sup>20</sup> “The file will contain the classification level and any copies of receipts for items issued to/surrendered by the detainee.” See ICE NDS 2000, Standard, Detention Files, Section (III).

<sup>21</sup> “The officer completing the admissions portion of the detention file will note that the file has been activated. The note may take the form of a generic statement in the Acknowledgment Form (see section III.B.1 h, below).” See ICE NDS 2000, Standard, Detention Files, Section (III)(A)(2).

<sup>22</sup> “The file will, at a minimum, contain the following:

- a. I-385, Alien Booking Record; one or more original photograph(s) attached;
- b. Classification Work Sheet;
- d. Housing Identification Card; and
- f. I-77, Baggage Check(s).”

See ICE NDS 2000, Standard, Detention Files, Section (III)(B)(1)(a, b, d, f).

## DETAINEE TRANSFERS (DT)

ODO interviewed the ERO Salt Lake City Supervisory Detention and Deportation Officers (SDDOs) and found a record of the legal counsel notification in the ENFORCE Alien Removal Management System (EARM), but no record of notification in the non-citizen file (**Deficiency DT-2**<sup>23</sup>).

ODO interviewed the ERO Salt Lake City SDDOs and found they did not use DT notification sheets for all DTs. Specifically, ERO Salt Lake City did not use DT notification sheets for transfers within its area of responsibility (AOR) (**Deficiency DT-11**<sup>24</sup>).

Since ERO Salt Lake City did not use DT notification sheets for transfers within its AOR, they did not place a detainee transfer notification sheet in the detainee's detention file (**Deficiency DT-13**<sup>25</sup>).

ODO interviewed ERO Salt Lake City SDDOs and found ERO Salt Lake City did not complete a detainee transfer checklist nor file it in the detainee's detention file. Specifically, ERO Salt Lake City did not use the DT checklist for transfers within its AOR (**Deficiency DT-31**<sup>26</sup>).

ODO interviewed ERO Salt Lake City SDDOs and found ERO Salt Lake City did not complete a DT checklist. Specifically, if any procedure remained incomplete prior to the transfer of the detainee, ERO Salt Lake City made no note of the waiver for the procedure on the DT checklist (**Deficiency DT-32**<sup>27</sup>).

ODO interviewed the ERO Salt Lake City SDDOs and found ERO Salt Lake City updated the EARM prior to a detainee's transfer but did not obtain and place the detainee non-citizen file in the proper order prior to transfer (**Deficiency DT-33**<sup>28</sup>).

ODO interviewed the ERO Salt Lake City SDDOs and found ERO Salt Lake City did not keep all completed Official Detail forms (Form G-391) readily available for review. Specifically, ODO requested the Form G-391s and did not receive them for review (**Deficiency DT-86**<sup>29</sup>).

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<sup>23</sup> "This notification shall be recorded in the detainee's A-file, if available, or work file and the notification shall be notated in the comments screen in DACS." See ICE NDS 2000, Standard, Detainee Transfers, Section (III)(A)(1).

<sup>24</sup> "At the time of the transfer, ICE will provide the detainee, in writing, with the name, address and telephone number of the facility he/she is being transferred to. The attached Detainee Transfer Notification Sheet shall be used for this purpose." See ICE NDS 2000, Standard, Detainee Transfers, Section (III)(A)(3).

<sup>25</sup> "A copy of the transfer notification sheet will be placed in the detainee's detention file." See ICE NDS 2000, Standard, Detainee Transfers, Section (III)(A)(3).

<sup>26</sup> "The attached Detainee Transfer Checklist shall be filled out in order to ensure that all procedures are completed and shall be placed in the detainee's A-file or work folder." See ICE NDS 2000, Standard, Detainee Transfers, Section (III)(D).

<sup>27</sup> "If any procedure cannot be completed prior to the transfer of the detainee, that transfer will not take place unless the authorized official at the receiving field office has expressly agreed to waive that portion of the procedure. This waiver should be noted on the checklist." See ICE NDS 2000, Standard, Detainee Transfers, Section (III)(D).

<sup>28</sup> "Prior to transfer, the A-file will be obtained and put in good order. File consolidations will be completed prior to transfer." See ICE NDS 2000, Standard, Detainee Transfers, Section (III)(D)(1).

<sup>29</sup> "All completed G-391s shall be filed in order (monthly) and the forms for the previous month shall be readily available for review." See ICE NDS 2000, Standard, Detainee Transfers, Section (III)(D)(8).

ODO interviewed ERO Salt Lake City SDDOs and found ERO Salt Lake City did not keep on file Form G-391 for a 3-year minimum. Specifically, ERO Salt Lake City did not have the Form G-391s prior to October 2020 (**Deficiency DT-87**<sup>30</sup>).

ODO interviewed the ERO Salt Lake City SDDOs and found ERO Salt Lake City did not transfer detainee personal property with the detainee to HDC. Specifically, ERO Salt Lake City kept the personal property at the sub-office in Las Vegas (**Deficiency DT-88**<sup>31</sup>).

ODO interviewed the ERO Salt Lake City SDDOs and found ERO Salt Lake City did not transfer personal property, including legal materials, to HDC. Specifically, ERO Salt Lake City kept legal material relating to immigration proceedings at the field office and transported any detainee requesting access back to that field office (**Deficiency DT-89**<sup>32</sup>).

## **EMERGENCY PLANS (EP)**

ODO reviewed the HDC emergency plans, interviewed the HDC accreditation officer, and found the facility had 12 out of 14 individual contingency plans. However, ERO Salt Lake City approved none of the 12 plans, and HDC did not have individual contingency plans for search (internal) and service-wide lockdown (**Deficiency EP-93**<sup>33</sup>). **This is a repeat deficiency.**

## **ENVIRONMENTAL HEALTH AND SAFETY (EHS)**

ODO reviewed the monthly generator test reports from October 2021 to March 2022 and found testing of the emergency electrical generators ran for less than an hour. HDC had a waiver for the testing of the generators monthly instead of biweekly; however, HDC conducted the tests for 30 minutes instead of 1 hour. Specifically, tests of the electrical emergency generators lasted between

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<sup>30</sup> “All G-391s shall be retained for a minimum of 3 years.” *See* ICE NDS 2000, Standard, Detainee Transfers, Section (III)(D)(8).

<sup>31</sup> “The following items shall always accompany a detainee to the receiving SPC, CDF, or IGSA facility: cash, and small valuables such as jewelry, address books, phone lists, correspondence, dentures, prescription glasses, small religious items, pictures, etc.” *See* ICE NDS 2000, Standard, Detainee Transfers, Section (III)(E)(1).

<sup>32</sup> “A detainee’s legal material relating to Immigration proceedings shall always accompany them to the receiving SPC, CDF, or IGSA facility. This includes items such as Notice to Appear, hearing evidence and hearing transcripts.” *See* ICE NDS 2000, Standard, Detainee Transfers, Section (III)(E)(1).

<sup>33</sup> “All facilities will compile INS approved individual contingency plans, as needed, in the following order:

1. Fire
2. Work/Food Strike
3. Disturbance
4. Escape
5. Hostages (Internal)
6. Search (Internal)
7. Bomb Threat
8. Adverse Weather
9. Civil Disturbance
10. Environmental Hazard
11. Detainee Transportation System Emergency
12. Evacuation
13. Service wide Lockdown
14. Site-specific concerns, if any?”

*See* ICE NDS 2000, Standard, Emergency Plans, Section (III)(D)(1-14).

10 to 19 minutes per test (**Deficiency EHS-78**<sup>34</sup>). **This is a repeat deficiency.**

ODO reviewed HDC policy, CPM 4312, Housekeeping and Sanitation, and 15 weekly fire safety inspections, toured HDC, and found HDC did not maintain environmental health conditions to recognized standards. Specifically, ODO observed the facility did not thoroughly clean showers in the housing units and found evidence of lime buildup. ODO also noted dusty and tape-covered air vents, rusted light fixtures, and dirty clothing draped over telephones and railings and piled in corners of housing unit areas (**Deficiency EHS-127**<sup>35</sup>).

## **POST ORDERS (PO)**

ODO interviewed the HDC accreditation officer, reviewed 10 HDC POs, and found HDC did not have a written policy providing official time for personnel to read the applicable PO upon assuming a new post (**Deficiency PO-6**<sup>36</sup>).

ODO interviewed the HDC accreditation officer, reviewed 10 HDC POs, and found HDC did not have a written policy to ensure all officers read the applicable PO (**Deficiency PO-7**<sup>37</sup>).

ODO reviewed 10 HDC POs and found the facility did not update 10 out of 10 PO duties assigned to HDC staff. Specifically, HDC provided ODO with 10 out of 10 POs from the pre-inspection documentation request, signed by an HDC captain on March 21, 2022. However, the signed copies of the POs ODO found at each post had HDC leadership signature dates ranging from 2012 to 2021 (**Deficiency PO-13**<sup>38</sup>).

ODO interviewed the HDC booking LT, reviewed three armed and perimeter-access POs, and found three out of three POs did not describe nor explain the proper care and safe handling of firearms. The three armed and perimeter-access POs also did not describe nor explain the circumstances and conditions authorizing the use of firearms. Specifically, the booking, lobby, and transportation officers' PO did not mention the use of firearms although the officers assigned to the three areas performed armed perimeter checks (**Deficiency PO-29**<sup>39</sup>).

ODO reviewed three armed and perimeter-access POs and found three out of three POs did not mention disregarding any directive given by an HDC staff member taken hostage (**Deficiency PO-**

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<sup>34</sup> “The biweekly test of the emergency electrical generator will last one hour.

See approved waiver from ERO Washington, DC, dated March 19, 2012, and approved April 2, 2012, (approved waiver grants generator tests monthly, not biweekly, and lasting at least 30 minutes, not one hour).” See ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(O).

<sup>35</sup> “Environmental health conditions will be maintained at a level that meets recognized standards of hygiene.” See ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(R)(1).

<sup>36</sup> “Each facility shall implement a written policy providing official time for personnel to read the applicable post orders upon assuming a new post.” See ICE NDS 2000, Standard, Post Orders, Section (III)(B).

<sup>37</sup> “All facilities shall have written procedures to ensure that all officers read applicable post orders.” See ICE NDS 2000, Standard, Post Orders, Section (III)(B).

<sup>38</sup> “Post orders will be kept current at all times. Post orders will be reviewed and updated yearly or sooner when deemed necessary.” See ICE NDS 2000, Standard, Post Orders, Section (III)(D).

<sup>39</sup> “Post orders for armed and perimeter-access posts assignment will, among other things, describe and explain:

a. The proper care and safe handling of firearms; and

b. Circumstances and conditions when use of firearms is authorized.”

See ICE NDS 2000, Standard, Post Orders, Section (III)(F)(a, b).



34<sup>40</sup>).

ODO reviewed three armed and perimeter-access POs and found one out of three POs did not include instructions for escape attempts. Specifically, the booking officer's PO did not include such instructions (**Deficiency PO-35**<sup>41</sup>).

## **HEALTH SERVICES**

### **HUNGER STRIKES (HS)**

ODO interviewed the HDC health services administrator (HSA), reviewed the Naphcare policy, facility hunger strike documentation, and found an advanced practice provider, not the clinical director (CD), may release detainees from a hunger strike. The HSA confirmed the current policy authorizes someone other than the CD to release a detainee from a hunger strike (**Deficiency HS-45**<sup>42</sup>).

### **MEDICAL CARE (MC)**

ODO reviewed █ detainee medical records and found in █ out of █ records, the psychiatric NP did not obtain a signed and dated consent form from the detainees before any medical examination or treatment. Specifically, the medical staff administered psychotropic medications to three detainees, and ODO found no informed consent form signed by the detainees prior to medicating (**Deficiency MC-101**<sup>43</sup>).

### **SUICIDE PREVENTION AND INTERVENTION (SPI)**

ODO interviewed the HSA, reviewed Naphcare policy for suicide prevention and intervention and found HDC did not require written authorization from the CD to release detainees formerly under suicide watch to the general population. The HSA confirmed the current policy authorizes someone other than the CD to release a detainee from suicide watch (**Deficiency SPI-20**<sup>44</sup>).

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<sup>40</sup> "Post orders for armed posts, and for posts that control access to the institution perimeter, shall clearly state that any staff member who is taken hostage is considered to be under duress. Any order/directive issued by such a person, regardless of his or her position of authority, is to be disregarded." *See* ICE NDS 2000, Standard, Post Orders, Section (III)(F).

<sup>41</sup> "Specific instructions for escape attempts will be included in the post orders for armed posts." *See* ICE NDS 2000, Standard, Post Orders, Section (III)(F).

<sup>42</sup> "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).

<sup>43</sup> "The facility health care provider will obtain signed and dated consent forms from all detainees before any medical examination or treatment, except in emergency circumstances." *See* ICE NDS 2000, Standard, Medical Care, Section (III)(L).

<sup>44</sup> "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).

## **OTHER STANDARDS REVIEWED**

### **SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION (SAAPI) (NDS 2019)**

ODO reviewed the facility SAAPI program and noted the following observations as **Areas of Concern:**

- ODO reviewed HDC policy on preventing, detecting, and responding to sexual misconduct and found the policy did not include written procedures for housing detainees in accordance with their classification assessment;
- ODO observed HDC staff members entering the detainee housing units of the opposite gender without announcing their presence. Additionally, the facility posted no signage on the housing unit doors as required by HDC policy;
- ODO reviewed HDC policy on preventing, detecting, and responding to sexual misconduct and found the policy did not include written procedures for reporting sexual abuse allegations to the ERO Salt Lake City FOD;
- ODO reviewed HDC policy on preventing, detecting, and responding to sexual misconduct and found the policy did not include written procedures for the discipline of assailants;
- ODO reviewed HDC policy on preventing, detecting, and responding to sexual misconduct and found the policy did not include written procedures for coordinating HDC internal administrative investigations with the assigned criminal investigative entity with the ICE Office of Professional Responsibility;
- ODO reviewed the HDC website and found HDC did not post its policy online or make its PREA protocols available to the public;
- ODO reviewed HDC training policy and found the facility did not conduct training on a biannual basis;
- ODO reviewed the HDC PowerPoint training presentation and found the training did not include the right of a detainee and staff to be free from sexual abuse and assault as well as from retaliation for reporting sexual abuse and assault;
- ODO observed HDC housing unit bulletin boards and found the SAAPI posters did not list the designated staff member for SAAPI and corresponding contact information. Additionally, the facility used only English language copies of the SAAPI posters;
- ODO interviewed the HDC PREA compliance manager, reviewed detainee detention files, and found HDC did not document a detainee's participation in the SAAPI instruction session;
- ODO interviewed the HDC PREA compliance manager and found the facility did not transmit the annual sexual abuse incident reviews to the ICE prevention of sexual assault coordinator;
- ODO reviewed HDC policy on preventing, detecting, and responding to sexual misconduct and found the policy did not include coordination with ICE/ERO and other appropriate investigative agencies;
- ODO found ERO Salt Lake City did not approve HDC medical staff training;
- ODO reviewed HDC policy on preventing, detecting, and responding to sexual misconduct and found the policy did not include procedures for disciplinary actions

- against staff who substantiated allegations of sexual abuse and assault;
- ODO reviewed HDC policy on preventing, detecting, and responding to sexual misconduct policy and found the policy did not include written procedures HDC required to cooperate with all ICE/ERO audits and monitoring of facility compliance with sexual abuse and assault policies and standards;
- ODO reviewed the HDC PowerPoint presentation for PREA training and found no statement on sexual abuse as never an acceptable consequence of detention;
- ODO interviewed the HDC facility accreditation supervisor, reviewed HDC policy on preventing, detecting, and responding to sexual misconduct, and found ERO Salt Lake City did not approve the policy;
- ODO reviewed the HDC PowerPoint presentation for PREA training and found the training did not cover how to ensure and safeguard evidence from destruction; and
- ODO reviewed the HDC housing unit bulletin boards and found they did not contain the HDC PREA compliance manager’s information. Additionally, the facility did not distribute the SAAPI pamphlets provided by ERO Salt Lake City.

## CONCLUSION

During this inspection, ODO assessed the facility’s compliance with 22 standards under NDS 2000 and 1 standard under NDS 2019 and found the facility in compliance with 9 of those standards. ODO found 37 deficiencies in the remaining 14 standards. ODO commends facility staff members 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. ERO provided ODO with the uniform corrective action plan for ODO’s last inspection of HDC on January 24, 2022.

<b>Compliance Inspection Results Compared</b>	<b>FY 2021 (NDS 2000)</b>	<b>FY 2022 (NDS 2000/NDS 2019)</b>
Standards Reviewed	15	22/1
Deficient Standards	6	14
Overall Number of Deficiencies	12	37
Repeat Deficiencies	0	3
Areas Of Concern	1	19
Corrective Actions	2	0
Facility Rating	N/A	Acceptable