

Office of Detention Oversight Compliance Inspection

Enforcement and Removal Operations ERO Salt Lake City Field Office

> Henderson Detention Center Henderson, Nevada

March 29-April 2, 2021

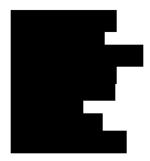
COMPLIANCE INSPECTION of the HENDERSON DETENTION CENTER

Henderson, Nevada

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COMPLIANCE INSPECTION TEAM MEMBERS



Team Lead	ODO
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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 March 29 to April 2, 2021. The facility opened in 1994, is owned by the City of Henderson, and is 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 in Salt Lake City, Utah (ERO Salt Lake City). The facility operates under the National Detention Standards (NDS) 2000.

ERO has assigned a detention services manager to the facility. An HDC captain handles daily facility operations and is supported by personnel. The City of Henderson provides food services, Naphcare provides medical care, and Trinity Service Group provides commissary services at the facility. The facility does not hold any accreditations from any outside entities.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity ³	540
Average ICE Detainee Population ⁴	
Male Detainee Population (as of 3/29/2021)	•
Female Detainee Population (as of 3/29/2021)	

During its last inspection, in Fiscal Year (FY) 2020, ODO found 18 deficiencies in the following areas: Recreation (2); Admissions and Release (4); Telephone Access (3); Funds and Personal Property (1); Environmental Health and Safety (1); Detainee Classification System (1); Detainee Grievance Procedures (2); Special Management Unit (Administrative Segregation) (1); Medical Care (1); and Sexual Abuse and Assault Prevention and Intervention (2).

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

² ERO Custody Management Division informed ODO on March 31, 2021, HDC was one of several U.S. Marshals Service Inter-governmental agreement facilities in which ODO should inspect under the NDS 2000 instead of the NDS 2019. ODO inspected HDC against NDS 2019 before receiving this updated guidance and ODO verified all findings against the NDS 2000 prior to citing as a deficiency in this report.

³ Data Source: ERO Facility List Report as of March 29, 2021.

⁴ Ibid.

COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population greater than ten, 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.⁵

ODO identifies violations of ICE detention standards, ICE policies, or operational procedures as "deficiencies." ODO also highlights instances in which 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.

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.

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⁵ ODO reviews the facility's compliance with selected standards in their entirety.

FINDINGS BY NATIONAL DETENTION STANDARDS 2000 MAJOR CATEGORIES

NDS 2000 Standards Inspected ⁶	Deficiencies			
Part 1 – Detainee Services				
Access to Legal Material	1			
Admission and Release	0			
Detainee Classification System	1			
Detainee Grievance Procedures	1			
Food Service	3			
Funds and Personal Property	3			
Facility Security & Control	0			
Religious Practices	0			
Staff-Detainee Communication	0			
Telephone Access	3			
Population Counts	0			
Sub-Total	12			
Part 2 – Security and Control				
Environmental Health and Safety	1			
Special Management Unit (Administrative Segregation)	2			
Special Management Unit (Disciplinary Segregation)	0			
Use of Force	0			
Sub-Total	3			
Part 3 – Health Services				
Hunger Strikes	1			
Medical Care	0			
Suicide Prevention and Intervention	2			
Sub-Total	3			
NDS 2019 Standard Inspected				
Sexual Abuse and Assault Prevention and Intervention	0			
Sub-Total	0			
Federal Performance-Based Detention Standards (FPBDS), Section A.7	0			
Disability Identification, Assessment, and Accommodation	0			
Sub-Total	0			
Total Deficiencies	18			

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

DETAINEE RELATIONS

ODO interviewed 12 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. ODO attempted to conduct detainee interviews via video teleconference; however, the ERO field office and facility were not able to accommodate this request due to technology issues. As such, the detainee interviews were conducted via telephone.

Medical Care: One female detainee stated she requested to see an off-site optometrist on January 6, 2021, for an eye examination for prescription glasses because her vision is badly impaired without glasses and she experiences headaches. She further stated she is waiting for ERO Salt Lake City to approve her off-site eye exam.

Action Taken: ODO interviewed the health services administrator (HSA) who stated the detainee's medical record documented she arrived at HDC on January 6, 2021. On the same day, during the intake screening and subsequent physical assessment with the HDC's registered nurse, the detainee did not voice any complaints about eye issues. The detainee first complained about blurred vision at sick call on January 23, 2021, with the HDC's licensed practical nurse (LPN). The facility scheduled the detainee for an eye test for January 26, 2021. The nurse practitioner (NP) evaluated the detainee for a complaint of genital sores, and the detainee stated no concerns about eye issues. The medical assistant conducted the eye test on January 26, 2021, with the following results: 20/50 in the left eye, 20/100 in the right eye, and 20/50 for both eyes. On the following day, the NP reviewed the eye test results and documented the medical staff would continue to monitor the detainee's vision. During the pill-pass process on February 13, 2021, the detainee stated to the LPN, she needed eyeglasses. The facility scheduled the detainee an appointment with the NP for February 14, 2021, who requested a referral to an off-site optometrist. On February 17, 2021, the NP met with the detainee on a scheduled appointment and wrote a referral to an off-site optometrist. On February 22, 2021, ERO Salt Lake City approved the optometrist referral and scheduled an eye exam to occur in April 2021. HDC's nursing staff informed the detainee on March 31, 2021, that an appointment had been scheduled for her.

Telephone Access: One male detainee stated he had problems contacting some of the consulate telephone numbers. The detainee stated the numbers were not connecting and the caller received responses saying the numbers were no longer in service. On March 27, 2021, the detainee tried to help other detainees contact the Venezuelan and Philippine consulates, but could not connect with either consulate.

• Action Taken: On April 2, 2021, HDC's ICE detention services manager reached out to a Talton Communications technician regarding the phones. According to the technician, the Venezuelan consulate number was deleted from the phone system by presidential executive order and with no follow-up instruction to re-list it. The Philippine consulate number had a 3 to 4-second delay before the detainee's calls connected with the consulate. On April 16, 2021, ERO Salt Lake City advised ODO there were no Philippine detainees in custody at HDC. However, ERO Salt Lake City would have informed the detainees of the phone delay. ERO Salt Lake City further added the detainee from Venezuela would be informed

of the telephone systems disconnect with the consulate. On April 16, 2021, ERO Salt Lake City deportation officers informed the detainee about the telephone system disconnection from the Venezuelan consulate.

COMPLIANCE INSPECTION FINDINGS

DETAINEE SERVICES

ACCESS TO LEGAL MATERIAL (ALM)

HDC did not have a policy nor procedures in place to assist detainees with contacting pro bono legal-assistance organizations from the contact list provided by ERO Salt Lake City (**Deficiency ALM-54**⁷).

ADMISSION AND RELEASE (AR)

ODO reviewed HDC's Inmate Property Processing policy and interviewed an HDC supervisor. There were no instances of the facility failing to forward completed forms to ERO Salt Lake City nor does the standard specify this must be in the facility's written policy or procedures. ODO cited this as an **Area of Concern**.

DETAINEE CLASSIFICATION SYSTEM (DCS)

ODO reviewed HDC's Inmate Classification policy, 12 Detainee Movement Cards, 12 detainee files, and interviewed an HDC lieutenant. ODO found 10 out of 12 Detainee Movement Cards did not indicate an HDC supervisor reviewed the detainee's classification (**Deficiency DCS-10**8).

DETAINEE GREIVANCE PROCEDURES (DGP)

ODO reviewed HDC's inmate rules and regulations document and found the grievance section of HDC's detainee handbook did not provide notice of the opportunity to file an informal grievance. Additionally, the grievance section of the HDC detainee handbook did not provide notice of the availability of assistance in preparing a grievance nor the procedures for resolving a grievance or appeal (Deficiency DGP-72⁹). This is a repeat deficiency.

⁷ "Facilities shall establish procedures to meet this obligation, such as: ...

^{2.} assisting in contacting *pro bono* legal-assistance organizations from the INS-provided list." *See* ICE NDS 2000, Standard, Access to Legal Material, Section (III)(L)(2).

⁸ "The first-line supervisor will review and approve each detainee's classification." See ICE NDS 2000, Standard, Detainee Classification System, Section (III)(A)(3).

⁹ "The grievance section of the detainee handbook will provide notice of the following:

^{1.} The opportunity to file a grievance, both informal and formal.

^{2.} The procedures for filing a grievance and appeal, including the availability of assistance in preparing a grievance." *See* ICE NDS 2000, Standard, Detainee Grievance Procedures, Section (III)(G)(1-2). **This is a Repeat Deficiency**.

FOOD SERVICE (FS)

ODO interviewed HDC staff, reviewed the HDC's common-fare menu, and found it was not based on a 14-day cycle nor were their special menus for the 10 federal holidays (**Deficiency FS-194**¹⁰).

ODO reviewed the documentation submitted for religious services, which included a religious fasting schedule and religious program schedule; however, there was no documentation a ceremonial meal schedule had been developed for the subsequent calendar year (**Deficiency FS-226**¹¹).

ODO interviewed HDC staff and found the facility has not developed a ceremonial meal schedule, which includes the date, religious group, estimated number of participants, and special foods required (**Deficiency FS-227** ¹²).

FUNDS AND PERSONAL PROPERTY (FPP)

ODO reviewed 12 detainee files, interviewed an HDC lieutenant, and found the facility did not obtain a forwarding address from the detainee in 12 out of 12 files reviewed (**Deficiency FPP-22** ¹³).

ODO reviewed HDC's Inmate Property Processing policy, interviewed an HDC lieutenant, and found HDC did not have written procedures for the inventory and audit of detainee funds, valuables, or property (**Deficiency FPP-54** ¹⁴).

ODO reviewed HDC's detainee handbook and found it did not cover the following areas: rules for storing or mailing property; procedures for claiming property upon release, transfer, or removal; and procedures for filing a claim for lost or damaged property (**Deficiency FPP-89** 15). **This is a repeat deficiency**.

¹⁰ "The common-fare menu is based on a 14-day cycle, with special menus for the 10 Federal holidays." *See* ICE NDS 2000, Standard, Food Service, Section (III)(E)(2).

¹¹ "The Chaplain, in consultation with the local religious leaders, if necessary, shall develop the ceremonial-meal schedule for the next calendar year, providing it to the OIC." *See* ICE NDS 2000, Standard, Food Service, Section (III)(E)(10).

¹² "This schedule shall include the date, religious group, estimated number of participants, and special foods required." See ICE NDS 2000, Standard, Food Service, Section (III)(E)(10).

¹³ "Standard operating procedure will include obtaining a forwarding address from every detainee who has personal property that could be lost or forgotten in the facility after the detainee's release, transfer, or removal." *See* ICE NDS 2000, Standard, Funds and Personal Property, Section (III)(C).

¹⁴ "Each facility shall have a written standard procedure for inventory and receipt of detainee funds and valuables." *See* ICE NDS 2000, Standard, Funds and Personal Property, Section (III)(D).

¹⁵ "The detainee handbook or equivalent shall notify the detainees of facility policies and procedures concerning personal property, including: ...

^{3.} The rules for storing or mailing property not allowed in their possession;

^{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)(3-5). **This is a Repeat Deficiency**.

TELEPHONE ACCESS (TA)

ODO found HDC's telephone rules were provided in the HDC detainee handbook. However, photographs of the posted telephone rules on the bulletin board showed other posted documents obstructed the telephone rules, making them difficult to see (Deficiency TA-2 ¹⁶).

ODO interviewed HDC's staff and found HDC did not permit detainees to speak by telephone to immediate family members detained in another facility (**Deficiency TA-36** ¹⁷).

ODO interviewed HDC staff and found, although HDC permitted unmonitored legal and court related calls, HDC did not post procedures for how to obtain such unmonitored calls near the telephones (Deficiency TA-52 ¹⁸).

SECURITY AND CONTROL

ENVIRONMENTAL HEALTH AND SAFETY (EH&S)

ODO interviewed HDC's administrative lieutenant/acting safety officer, reviewed HDC's Safety Data Sheets (SDS) master file and found the SDS master file did not include documentation of completed semi-annual reviews (**Deficiency EH&S-7**¹⁹).

SPECIAL MANAGEMENT UNIT (ADMINISTRATIVE SEGREGATION) (SMU AS)

ODO reviewed HDC's Restrictive Housing Inmates, Inmate Hearings, and Inmate Classification policies, 12 detainee files, and interviewed an HDC lieutenant and classification technician. ODO found 12 out of 12 files did not document an interview with the detainee during an AS review (**Deficiency SMU AS-18**²⁰).

ODO found 12 out of 12 files did not contain a written record of the facility's decision nor the justification for the decision they made during the AS reviews (**Deficiency SMU AS-19**²¹).

ODO was unable to determine if the facility provided a copy of the AS review decision and justification to 12 detainees the facility had placed on AS. ODO cited this as an **Area of Concern**.

¹⁶ "...the facility shall provide telephone access rules in writing to each detainee upon admittance and shall post these rules where detainees may easily see them." *See* ICE NDS 2000, Standard, Telephone Access, Section (III)(B).

¹⁷ "Upon a detainee's request, the facility shall make special arrangements permitting the detainee to speak by telephone with an immediate family member detained in another facility." *See* ICE NDS 2000, Standard, Telephone Access, Section (III)(H).

¹⁸ "It shall also place a notice at each monitored telephone stating: ...

^{2.} the procedure for obtaining an unmonitored call to a court, legal representative, or for the purposes of obtaining legal representation." See ICE NDS 2000, Standard, Telephone Access, Section (III)(K)(2).

¹⁹ "Documentation of the semi-annual reviews will be maintained in the MSDS master file." *See* ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(C).

²⁰ "The review shall include an interview with the detainee." *See* ICE NDS 2000, Standard, Special Management Unit (Administrative Segregation), Section (III)(C).

²¹ "A written record shall be made of the decision and the justification." *See* ICE NDS 2000, Standard, Special Management Unit (Administrative Segregation), Section (III)(C).

HEALTH SERVICES

HUNGER STRIKES (HS)

ODO reviewed the medical records for three detainees on hunger strike, HDC's Hunger Strike policy, interviewed the HDC NP, and found a physician did not terminate hunger strike treatment for the three detainees (**Deficiency HS-17**²²).

SUICIDE PREVENTION AND INTERVENTION (SP&I)

ODO reviewed the medical records for two detainees on suicide watch and found a social worker returned both detainees to general population from constant monitoring (one-to-one) and there was no documentation the social worker consulted with the psychiatrist, physician, or psychiatric NP prior to returning the detainees to general population (Deficiency SP&I-10²³).

ODO reviewed the medical records for two detainees on suicide watch and found a social worker returned both detainees to general population from suicide precautions and there was no documentation the social worker consulted with the psychiatrist, physician, or psychiatric NP prior to returning the detainees to general population (**Deficiency SP&I-20**²⁴).

NDS 2019 STANDARD INSPECTED

SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION (SAAPI)

ODO noted the following 18 Areas of Concern:

ODO reviewed HDC's SAAPI written policy and procedures and found the policy did not include procedures for housing detainees in accordance with their classification assessment.

ODO reviewed HDC's SAAPI written policy and procedures and found the policy did not include procedures for reporting sexual abuse allegations to the ERO Salt Lake City FOD.

ODO reviewed HDC's SAAPI written policy and procedures and found the policy did not include procedures for the discipline of assailants.

ODO reviewed HDC's written policy and procedures and found the policy did not include procedures for coordinating with ERO Salt Lake City for all allegations of sexual abuse and assault.

ODO reviewed HDC's written policy and procedures and found the policy did not include procedures for coordination with ICE OPR.

²² "The clinical director may order that a detainee be released from hunger strike evaluation and treatment." *See* ICE NDS 2000, Standard, Hunger Strikes, Section (III)(E).

²³ "A detainee formerly under a suicide watch may be returned to general population, upon written authorization from the clinical director." *See* ICE NDS 2000, Standard, Suicide Prevention and Intervention, Section (III)(C).

²⁴ "A detainee formerly under a suicide watch may be returned to general population, upon written authorization from the clinical director." *See* ICE NDS 2000, Standard, Suicide Prevention and Intervention, Section (III)(C).

ODO reviewed HDC's written policy and procedures and found the policy did not include HDC's requirement to cooperate with all ICE audits and monitoring of HDC's compliance with sexual abuse and assault policies and standards.

ODO reviewed HDC's written policy and procedures and found they have not been reviewed and approved by ERO Salt Lake City.

ODO reviewed HDC's website and found the facility had not posted their protocols. HDC's website only states that the Henderson Detention Center has zero tolerance for sexual assault or abuse and provided a phone number for reporting a sexual assault or abuse that had occurred within the facility.

ODO reviewed HDC's policy and staff Prison Rape Elimination Act (PREA) training records, interviewed HDC staff, and found PREA refresher training was conducted annually, not biannually.

ODO reviewed HDC's FY 2020 PREA PowerPoint training and found employee training did not specifically include instruction that sexual abuse and/or assault is never an acceptable consequence of detention, nor did it include addressing vulnerable populations' potential vulnerability in the general population.

ODO reviewed HDC's FY 2020 PREA PowerPoint training and found the training did not include how to ensure evidence was not destroyed.

ODO reviewed HDC's FY 2020 PREA PowerPoint training and found there were some minimal instruction documentation and referral procedures; however, most of the instruction documentation and referral procedures located in HDC's policy were not in the training presentation.

ODO reviewed HDC's orientation video and found it did not inform detainees about the agency's and HDC's zero-tolerance policies for all forms of sexual abuse and assault.

ODO reviewed the Henderson Police Department Internal Investigations and the Preventing, Detecting, and Responding to Sexual Misconduct policies provided by HDC and found nothing to indicate the appropriate investigative office within the Department of Hom6eland Security is consulted prior to beginning an administrative investigation.

ODO reviewed the Henderson Police Department Internal Investigations and the Preventing, Detecting, and Responding to Sexual Misconduct policies provided by HDC and found the written procedures did not have provisions requiring the preservation of any available electronic monitoring data.

ODO reviewed the Henderson Police Department Internal Investigations and the Preventing, Detecting, and Responding to Sexual Misconduct policies provided by HDC. ODO found the written procedures did not have provisions requiring an assessment of the credibility of an alleged victim, suspect, or witness, without regard to the individual's status as detainee, staff, or employee, and without requiring any detainee who alleged sexual abuse and assault to submit to a polygraph.

ODO reviewed the Henderson Police Department Internal Investigations and the Preventing, Detecting, and Responding to Sexual Misconduct policies provided by HDC. ODO found all investigations were required to be documented, but there was no specification for the documentation to include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings.

ODO interviewed HDC staff and found HDC had no reports of sexual abuse and assault during the annual reporting period; HDC did not file a negative report.

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 18 standards under NDS 2000, one NDS 2019 standard, one FPBDS standard, and found the facility in compliance with 10 of those standards. ODO found 18 deficiencies in the remaining 10 standards. ODO cited 20 Areas of Concern: Admission and Release (1); Special Management Unit (Administrative Segregation) (1); and Sexual Abuse and Assault Prevention and Intervention (18). HDC was contractually obligated to comply with NDS 2000, and ODO verified each finding against the NDS 2000 standards, prior to citing the findings as deficiencies in this report. ODO recommends ERO work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations.

Compliance Inspection Results Compared	FY 2020 (NDS 2000)	FY 2021 (NDS 2000/NDS 2019/FPBDS)
Standards Reviewed	19	18/1/1
Deficient Standards	10	10
Overall Number of Deficiencies	18	18
Repeat Deficiencies	3	2
Areas of Concern	0	20
Corrective Actions	1	0