



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

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**Office of Detention Oversight  
Unannounced Compliance Inspection  
2024-004-314**

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

**Nevada Southern Detention Center  
Pahrump, Nevada**

**March 19-21, 2024**

**UNANNOUNCED COMPLIANCE INSPECTION**  
**of the**  
**NEVADA SOUTHERN DETENTION CENTER**  
Pahrump, Nevada

**TABLE OF CONTENTS**

<b>FACILITY OVERVIEW .....</b>	<b>4</b>
<b>UNANNOUNCED COMPLIANCE INSPECTION PROCESS.....</b>	<b>5</b>
<b>FINDINGS BY NATIONAL DETENTION STANDARDS 2019 MAJOR CATEGORIES.....</b>	<b>6</b>
<b>DETAINEE RELATIONS .....</b>	<b>7</b>
<b>UNANNOUNCED COMPLIANCE INSPECTION FINDINGS .....</b>	<b>7</b>
<b>CARE .....</b>	<b>7</b>
<b>MEDICAL CARE.....</b>	<b>7</b>
<b>SIGNIFICANT SELF-HARM AND SUICIDE PREVENTION AND INTERVENTION .....</b>	<b>7</b>
<b>CONCLUSION .....</b>	<b>7</b>

## COMPLIANCE INSPECTION TEAM MEMBERS

[REDACTED]	Team Lead	ODO
[REDACTED]	Senior Inspections and Compliance Specialist	ODO
[REDACTED]	Senior Inspections and Compliance Specialist	ODO
[REDACTED]	Senior Inspections and Compliance Specialist	ODO
[REDACTED]	Inspections and Compliance Specialist	ODO
[REDACTED]	Contractor	Creative Corrections
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[REDACTED]	Contractor	Creative Corrections
[REDACTED]	Contractor	Creative Corrections
[REDACTED]	Contractor	Creative Corrections

## FACILITY OVERVIEW

The U.S. Immigration and Customs Enforcement (ICE) Office of Professional Responsibility (OPR) Office of Detention Oversight (ODO) conducted an unannounced compliance inspection of the Nevada Southern Detention Center (NSDC) in Pahrump, Nevada, from March 19 to 21, 2024.<sup>1</sup> The facility opened in 2010 and is owned and operated by CoreCivic. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at NSDC in 2016 under the oversight of ERO's Field Office Director in Salt Lake City (ERO Salt Lake City). ICE is an authorized user of this facility under a United States Marshals Service intergovernmental agreement contract, which does not specify an ICE National Detention Standard (NDS), and ODO inspected to the NDS listed on the ERO Custody Management Division Authorized Facility List as of March 11, 2024. NSDC was inspected against the NDS 2019, and ODO's assigned rating is for ERO's informational purposes only.<sup>2</sup>

[REDACTED]

[REDACTED] A warden handles daily facility operations and manages [REDACTED] support personnel. Trinity Services provides food services, CoreCivic provides medical care, and Keefe Commissary provides commissary services at the facility. The facility was accredited by the American Correctional Association in August 2018 and the National Commission on Correctional Health Care in December 2018.

Capacity and Population Statistics	Quantity
ICE Bed Capacity <sup>3</sup>	[REDACTED]
Average ICE Population <sup>4</sup>	[REDACTED]
Adult Male Population (as of March 19, 2024)	[REDACTED]
Adult Female Population (as of March 19, 2024)	[REDACTED]

During its last full inspection, in Fiscal Year (FY) 2023, ODO found 4 deficiencies in the following areas: Admission and Release (1); Medical Care (1); Special Management Units (1); and Visitation (1).

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

<sup>2</sup> For ODO inspections in FY 2024, ERO Custody Management Division requested ODO inspect all United States Marshals Service Intergovernmental Agreement facilities, not contractually obligated to an ICE NDS, to NDS 2019.

<sup>3</sup> Data Source: ERO Custody Management Division Authorized Facility List as of March 18, 2024.

<sup>4</sup> *Ibid.*

## UNANNOUNCED COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population (ADP) of 10 or more, and where detainees are housed for over 72 hours, to assess compliance with ICE national detention standards. While these inspections focus on facility compliance with detention standards that directly affect detainee life, health, safety, and/or well-being, in FY 2024 ODO added additional standards to the scope of each full inspection to ensure ODO inspects every standard at each facility at least once every other year.<sup>5</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.

In FY 2022, ODO began conducting special reviews of under 72-hour ICE detention facilities with an ADP of 1 or more detainees and over 72-hour ICE detention facilities with an ADP of 1 to 9 detainees. Additionally, ODO began conducting unannounced inspections of ICE detention facilities, regardless of ADP of detainees, as well as reviews of ICE special/emerging detention facilities/programs. As such, these facility inspections will result in an ODO Inspection Compliance Rating; however, for facilities that are not contractually obligated to an ICE NDS, those ratings will be for ERO’s informational purposes. ODO will conduct a complete review of several core standards, in accordance with the facility’s contractually required ICE NDS or in accordance with the ICE NDS listed in the current ERO Custody Management Division Authorized Facility List for facilities that are not contractually obligated to an ICE NDS, which may include but are not limited to Medical Care/Health Care, Medical Care (Women)/Health Care (Females), Significant Self-harm and Suicide Prevention and Intervention, Hunger Strikes, Food Service, Environmental Health and Safety, Special Management Units (SMU) or Hold Rooms (if the facility does not have an SMU), Use of Force and Restraints/Use of Physical Control Measures, and Sexual Abuse and Assault Prevention and Intervention.

Upon completion of each special review or unannounced 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 uniform corrective action plans (UCAPs); 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.

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<sup>5</sup> ODO reviews the facility’s compliance with selected standards in their entirety.

## FINDINGS BY NATIONAL DETENTION STANDARDS 2019 MAJOR CATEGORIES

NDS 2019 Standards Inspected <sup>6,7,8</sup>	Deficiencies
<b>Part 1 - Safety</b>	
Environmental Health and Safety	0
<b>Sub-Total</b>	<b>0</b>
<b>Part 2 - Security</b>	
Admission and Release	0
Custody Classification System	0
Facility Security and Control	0
Funds and Personal Property	0
Post Orders	0
Searches of Detainees	0
Use of Force and Restraints	0
Special Management Unit	0
Staff-Detainee Communication	0
Sexual Abuse and Assault Prevention and Intervention	0
<b>Sub-Total</b>	<b>0</b>
<b>Part 4 - Care</b>	
Food Service	0
Hunger Strikes	0
Medical Care	1
Personal Hygiene	0
Significant Self-Harm and Suicide Prevention and Intervention	2
<b>Sub-Total</b>	<b>3</b>
<b>Part 5 - Activities</b>	
Correspondence and Other Mail	0
Religious Practices	0
Telephone Access	0
Voluntary Work Program	0
<b>Sub-Total</b>	<b>0</b>
<b>Part 6 - Justice</b>	
Grievance System	0
Law Libraries and Legal Material	0
<b>Sub-Total</b>	<b>0</b>
<b>Part 7 - Administration and Management</b>	

<sup>6</sup> For greater detail on ODO's findings, see the *Unannounced Compliance Inspection Findings* section of this report.

<sup>7</sup> Beginning in FY 2024, ODO instituted a process of rotating all standards every other year. As a result, some standards may not be present in all inspections.

<sup>8</sup> During an unannounced inspection, ODO will review a facility's compliance with at least 10 individual standards; however, unannounced full inspections will include a review of the same standards as announced full inspections.

Detention Files	0
Detainee Transfers	0
<b>Sub-Total</b>	<b>0</b>
<b>Total Deficiencies</b>	<b>3</b>

## DETAINEE RELATIONS

ODO interviewed 38 detainees who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. All 38 detainees reported satisfaction with facility services.

## UNANNOUNCED COMPLIANCE INSPECTION FINDINGS

### CARE

#### MEDICAL CARE (MC)

ODO reviewed the facility’s site-specific detainee handbook and found it did not state how a detainee or a detainee’s representative may request and receive medical records (**Deficiency MC-102<sup>9</sup>**).

#### SIGNIFICANT SELF-HARM AND SUICIDE PREVENTION AND INTERVENTION (SSHSPI)

ODO interviewed facility medical staff, reviewed 4 detainee suicide watch logs, and found in 1 out of 4 logs, 27 entries exceeded the 15-minute monitoring requirement (**Deficiency SSHSPI-21<sup>10</sup>**). **This is a priority component.**

ODO interviewed facility medical staff, reviewed a detainee suicide watch log for a detainee under close observation, and found 15 staggered check entries exceeded the 15-minute requirement (**Deficiency SSHSPI-27<sup>11</sup>**).

## CONCLUSION

During this unannounced compliance inspection, ODO assessed the facility’s compliance with 24 standards under NDS 2019 and found the facility in compliance with 22 of those standards. ODO found three deficiencies in the remaining two standards. In March 2024, NSDC transitioned from the Performance Based National Detention Standards 2008 to the NDS 2019, which resulted with the facility’s compliance in 18 out of 22 standards and upward trend. ODO recommends ERO

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<sup>9</sup> “Are detainees and their representatives allowed to request and receive medical records pursuant to facility policy, and is the policy communicated to the detainee in the facility handbook?” See ICE NDS 2019, Standard, Medical Care, Section (II)(P).

<sup>10</sup> “Is the monitoring documented at least every 15 minutes or more frequently if necessary?” See ICE NDS 2019, Standard, Significant Self-harm and Suicide Prevention and Intervention, Section (II)(F).

<sup>11</sup> The monitoring shall consist of staggered checks at intervals not to exceed 15 minutes and be documented.” See ICE NDS 2019, Standard, Significant Self-harm and Suicide Prevention and Intervention, Section (II)(F).

Salt Lake City continue to work with the facility to resolve the deficiencies that remain outstanding in accordance with contractual obligations.

<b>Compliance Inspection Results Compared</b>	<b>FY 2023 Full Inspection (PBNDS 2008)</b>	<b>FY 2024 Full Inspection (NDS 2019)</b>
Standards Reviewed	23	24
Deficient Standards	4	2
Overall Number of Deficiencies	4	3
Priority Component Deficiencies	0	1
Repeat Deficiencies	0	0
Areas Of Concern	0	0
Corrective Actions	1	0
Facility Rating	Superior	Good <sup>12</sup>

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<sup>12</sup> ODO revised their rating system at the end of FY 2023 and beginning in FY 2024, facilities rated as “Superior” will have no or very minimal deficiencies and will have no repeat or priority component deficiencies.