



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
Compliance Inspection**

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

**Nye County Detention Center
Pahrump, Nevada**

November 30 - December 4, 2020

COMPLIANCE INSPECTION
of the
NYE COUNTY DETENTION CENTER
Pahrump, Nevada

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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 compliance inspection of the Nye County Detention Center (NCDC) in Pahrump, Nevada, from November 30 to December 4, 2020.¹ The facility opened in 2012 and is owned by Nye County and operated by Nye County Sheriff's Office. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at NCDC in 2019 under the oversight of ERO's Field Office Director in Salt Lake City (ERO Salt Lake City). The facility operates under the National Detention Standards (NDS) 2019.

ERO has assigned deportation officers to the facility. The warden manages daily facility operations and is supported by █ personnel. Summit provides food and commissary services and Serenity Health provides medical care at the facility. The facility does not have any accreditations from any outside entities.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity ²	100
Average ICE Detainee Population ³	█
Male Detainee Population (as of 11/30/2020)	█
Female Detainee Population (as of 11/30/2020)	█

During its last inspection, in Fiscal Year (FY) 2020, ODO found 42 deficiencies in the following areas: Environmental Health and Safety (5); Funds and Personal Property (8); Special Management Units (18); Food Service (7); Religious Practices (1); Visitation (3).

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 Data Source: ERO Facility List Report as of November 16, 2020.

³ *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.⁴

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.

⁴ ODO reviews the facility’s compliance with selected standards in their entirety.

FINDINGS BY NATIONAL DETENTION STANDARDS 2019 MAJOR CATEGORIES

NDS 2019 Standards Inspected ⁵	Deficiencies
Part 1 – Safety	
Environmental Health and Safety	0
Sub-Total	0
Part 2 – Security	
Admission and Release	1
Custody Classification System	1
Facility Security and Control	0
Funds and Personal Property	2
Special Management Units	3
Staff-Detainee Communication	0
Sexual Abuse and Assault Prevention and Intervention	0
Use of Force and Restraints	0
Sub-Total	7
Part 4 – Care	
Food Service	0
Medical Care	0
Hunger Strikes	0
Significant Self-harm and Suicide Prevention and Intervention	0
Disability Identification, Assessment, and Accommodation	0
Sub-Total	0
Part 5 – Activities	
Religious Practices	1
Telephone Access	0
Visitation	3
Sub-Total	4
Part 6 – Justice	
Grievance System	0
Law Libraries and Legal Material	0
Sub-Total	0
Total Deficiencies	11

⁵ 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 technological issues. As such, the detainee interviews were conducted via telephone.

Admission and Release: A detainee stated he had been strip searched at the facility upon arrival.

- Action Taken: ODO interviewed the facility sergeant and reviewed video surveillance of the intake department at the time the detainee arrived. ODO found no evidence of the detainee being strip searched and confirmed via video the detainee was allowed to change into facility clothing, privately.

Admission and Release: Seven detainees stated they did not receive the ICE National Handbook.

- Action Taken: ODO interviewed the facility sergeant, supervisory detention and deportation officer, and confirmed CDC is a paperless facility and utilizes electronic tablets for detainees to view the facility's Inmate Rules and Procedures Handbook and ICE National Handbook, order commissary items, file grievances, and submit detainee request forms. At intake, all detainees receive instructions on operating the tablets and must read and acknowledge receipt before they can use the other functions on the tablet. ODO reviewed facility documentation and confirmed the detainees received the handbook.

Sexual Abuse and Assault Prevention and Intervention: A detainee stated a facility staff member told him he was cute. The detainee filed a report but has yet to receive a response from the facility.

- Action Taken: ODO interviewed the facility captain and lieutenant and reviewed the documentation related to the incident. The facility leadership alerted Internal Affairs (IA) because the allegation was made against a facility staff member. The facility followed up with IA on the status of the investigation and IA advised the investigation will be completed soon. The facility updated the detainee on the status of the case on December 2, 2020.

Staff-Detainee Communication: Seven detainees stated they had very little or no contact with ICE employees.

- Action Taken: ODO reviewed the facility logbooks and interviewed the facility lieutenant and determined ICE employees visit the facility housing units, at least once a week.

Food Service: Five detainees complained of low-quality food and inadequate portion sizes.

- Action Taken: ODO reviewed the current 35-day cycle menu and determined the menu is nutritionally adequate and has been certified by a registered dietician.

Medical Care: A detainee stated he has not to seen an optometrist in a year and he has not received the eyeglasses he requested.

- Action Taken: ODO interviewed the health service administrator (HSA), reviewed the detainee's medical record, and determined the detainee was evaluated on October 8, 2020, by an outside optometrist, who prescribed the detainee specialty eyeglasses. The facility medical staff submitted a request for the eyeglasses to the ICE field medical coordinator, which is pending approval. Medical staff explained the reason for the delay to the detainee on December 3, 2020.

Medical Care: A detainee stated his request for shoes was approved by medical staff but later denied by the facility lieutenant. He also stated the quarantine pods were not cleaned after someone tested positive for COVID-19 and medical staff do not use personal protective equipment when coming into contact with new detainees.

- Action Taken: ODO interviewed the HSA and the facility lieutenant and determined there was miscommunication between the facility staff, medical staff, and the detainee. ODO received confirmation from the facility, the detainee would be receiving his shoes within 24 hours. The HSA stated all medical areas are cleaned after each use and maintenance is conducted by the Safety Department. A facility sergeant oversees the maintenance of all housing pods, including the quarantine pods. Additionally, the HSA stated all medical staff wear gloves and a mask for every patient encounter and clinical areas are wiped down after every patient encounter.

Medical Care: A detainee stated medical staff would not prescribe him medication he was receiving at a prior facility.

- Action Taken: ODO interviewed the HSA and reviewed the detainee's medical summary from ERO Salt Lake City. The medical summary did not document any medical issues or list medications. During the physical examination on November 15, 2020, the physician documented the detainee was a healthy male and no medications were required. Medical staff scheduled a follow-up evaluation with the detainee on December 4, 2020.

COMPLIANCE INSPECTION FINDINGS

SECURITY

ADMISSION AND RELEASE (A&R)

ODO reviewed the orientation video and the Inmate Rules handbook, and found they did not contain procedures for a detainee to contact their assigned ICE/ERO officer handling his/her case (**Deficiency A&R-24⁶**).

CUSTODY CLASSIFICATION SYSTEM (CCS)

ODO reviewed the Inmate Rules handbook and found it did not explain the classification levels, with the conditions and restrictions for each level (**Deficiency CCS-30⁷**).

FUNDS AND PERSONAL PROPERTY (F&PP)

ODO reviewed NCDC's booking procedures and interviewed the sergeant, and found the facility does not have written procedures for the inventory and audit of funds, valuables, and personal property (**Deficiency F&PP-18⁸**).

ODO reviewed NCDC's booking procedures and interviewed the sergeant, and found the facility does not have a written policy and procedure for detainee property reported missing or damaged (**Deficiency F&PP-28⁹**).

SPECIAL MANAGEMENT UNITS (SMU)

ODO found five out of nine detainee detention files did not contain administrative segregation orders (**Deficiency SMU-15¹⁰**).

ODO reviewed three disciplinary segregation files and found none contained disciplinary segregation orders (**Deficiency SMU-38¹¹**).

ODO reviewed three disciplinary segregation files and found none contained review documents

⁶ "The facility orientation shall also include the following information:

1. Procedures for the detainee to contact the ERO deportation officer handling his/her case." *See* ICE NDS 2019, Standard, Admission and Release (II)(H)(1).

⁷ "The facility shall include a classification section in its detainee handbook which will include the following:

1. An explanation of the classification levels, with the conditions and restrictions applicable to each." *See* ICE NDS 2019, Standard, Custody Classification System, Section (II)(H)(1).

⁸ "Each facility shall have a written procedure for inventory and audit of detainee funds, valuables, and personal property." *See* ICE NDS 2019, Standard, Funds and Personal Property, Section (II)(D). **This is a repeat deficiency.**

⁹ "Each facility shall have a written policy and procedure for detainee property reported missing or damaged." *See* ICE NDS 2019, Standard, Funds and Personal Property, Section (II)(F). **This is a repeat deficiency.**

¹⁰ "The completed order shall then be included in the detainee's detention file or maintained in a retrievable electronic format." *See* ICE NDS 2019, Standard, Special Management Units, Section (II)(A)(2)(c).

¹¹ "A written order shall be completed and signed by the chair of the IDP (or disciplinary hearing officer) before a detainee is placed into disciplinary segregation." *See* ICE NDS 2019, Standard, Special Management Units, Section (II)(B)(2).

(Deficiency SMU-48¹²).

ACTIVITIES

RELIGIOUS PRACTICES (RP)

ODO reviewed NCDC's policy and found detainees are not permitted to change their religious preference at any time (**Deficiency RP-10¹³**).

VISITATION (V)

ODO reviewed the facility visitation logs and found the facility does not maintain a log for general visitors, and a separate log for legal visitors (**Deficiency V-7¹⁴**).

ODO reviewed NCDC's policy and found the facility does not have a written procedure to allow legal service providers to call in advance to determine if an individual is detained at the facility (**Deficiency V-50¹⁵**).

ODO reviewed the facility visitation logs and found the facility does not have a separate log for legal visitors, which includes those denied access to the detainee (**Deficiency V-72¹⁶**).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 19 standards under NDS 2019 and found the facility in compliance with 13 of those standards. ODO found 11 deficiencies in the remaining 6 standards. ODO commends facility staff for their responsiveness during this inspection. ODO recommends ERO Salt Lake City work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations.

¹² "All review documents shall be placed in the detainee's detention file or maintained in a retrievable electronic format. After each formal review, the detainee shall be given a written copy of the reviewing officer's decision and the basis for his or her finding, unless such a copy may result in a compromise of institutional security. If a written copy cannot be delivered, the detainee shall be advised of the decision orally, and the detention file, or retrievable electronic record, shall so note, identifying the reasons why the notice was not provided in writing. The review decision shall be communicated to detainees in a language or manner that they understand." *See* ICE NDS 2019, Standard, Special Management Units, Section (II)(B)(3)(a)(2-3).

¹³ "By notifying the chaplain or other RSC, in writing, a detainee may request to change this designation at any time, and the change will be affected in a timely fashion." *See* ICE NDS 2019, Standard, Religious Practices, Section (II)(C).

¹⁴ "The facility shall maintain a log of all general visitors, and a separate log of legal visitors as described below." *See* ICE NDS 2019, Standard, Visitation, Section (II)(C). **This is a repeat deficiency.**

¹⁵ "Each facility shall establish a written procedure to allow legal service providers and legal assistants to telephone the facility in advance of a visit to determine whether a particular individual is detained in that facility." *See* ICE NDS 2019, Standard, Visitation, Section (II)(G)(6). **This is a repeat deficiency.**

¹⁶ "A separate log shall record all legal visitors, including those denied access to the detainee." *See* ICE NDS 2019, Standard, Visitation, Section (II)(G)(14). **This is a repeat deficiency.**

Compliance Inspection Results Compared	FY 2020 (NDS 2019)	FY 2021 (NDS 2019)
Standards Reviewed	19	19
Deficient Standards	6	6
Overall Number of Deficiencies	42	11
Repeat Deficiencies	0	5
Corrective Actions	0	0
Areas of Concern	0	0