



**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  
Follow-Up Compliance Inspection

Enforcement and Removal Operations  
ERO Boston Field Office

Wyatt Detention Center  
Central Falls, Rhode Island

May 3-6, 2021

**FOLLOW-UP COMPLIANCE INSPECTION**  
**of the**  
**WYATT DETENTION CENTER**  
Central Falls, Rhode Island

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## FOLLOW-UP COMPLIANCE INSPECTION TEAM MEMBERS

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## FACILITY OVERVIEW

The U.S. Immigration and Customs Enforcement (ICE) Office of Professional Responsibility (OPR) Office of Detention Oversight (ODO) conducted a follow-up compliance inspection of the Wyatt Detention Center (WDC) in Central Falls, Rhode Island, from May 3 to 6, 2021.<sup>1</sup> This inspection focused on the standards found deficient during ODO’s last inspection of WDC from October 26 to 29, 2020. The facility opened in 1993 and is owned and operated by the Central Falls Detention Facility Corporation. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at WDC in March 2019 under the oversight of ERO’s Field Office Director in Boston (ERO Boston). The facility operates under the National Detention Standards (NDS) 2019.

ERO has assigned deportation officers to the facility. A warden handles daily facility operations and manages █████ personnel. Aramark provides food and commissary services. WDC does not have a contract with a single specific health care provider, but instead, maintains individual contracts with medical staff. The facility was accredited by the American Correctional Association in February 2018 and was certified as a U.S. Department of Justice Prison Rape Elimination Act facility in October 2017.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity <sup>2</sup>	48
Average ICE Detainee Population <sup>3</sup>	████
Male Detainee Population (as of May 3, 2021)	████
Female Detainee Population (as of May 3, 2021)	N/A

During its last inspection, in October 2020, ODO found 4 deficiencies in the following areas: Admission and Release (1); Funds and Personal Property (2); and Use of Force (1).

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

<sup>2</sup> Data Source: ERO Facility List Report as of May 3, 2021

<sup>3</sup> *Ibid.*

## **FOLLOW-UP COMPLIANCE INSPECTION PROCESS**

ODO conducts oversight inspections of ICE detention facilities with an average daily population of 10 or more detainees, and where detainees are housed for longer than 72 hours, to assess compliance with ICE National Detention Standards. These inspections focus solely on facility compliance with detention standards that directly affect detainee life, health, safety, and/or well-being. In FY 2021, to meet congressional requirements, ODO began conducting follow-up inspections at all ICE ERO detention facilities, which ODO inspected earlier in the FY.

While follow-up inspections are intended to focus on previously identified deficiencies, ODO will conduct a complete review of several core standards, which include but are not limited to Medical Care, Hunger Strikes, Suicide Prevention, Food Service, Environmental Health and Safety, Emergency Plans, Use of Force and Restraints/Use of Physical Control Measures and Restraints, Admission and Release, Classification, and Funds and Personal Property. ODO may decide to conduct a second full inspection of a facility in the same FY based on additional information obtained prior to ODO's arrival on-site. Factors ODO will consider when deciding to conduct a second full inspection will include the total number of deficiencies cited during the first inspection, the number of deficient standards found during the first inspection, the completion status of the first inspection's UCAP, and other information ODO obtains from internal and external sources ahead of the follow-up compliance inspection. Conditions found during the inspection may also lead ODO to assess new areas and identify new deficiencies or areas of concern should facility practices run contrary to ICE standards. Any areas found non-compliant during both inspections are annotated as "Repeat Deficiencies" in this report.

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

## FINDINGS BY NATIONAL DETENTION STANDARDS 2019 MAJOR CATEGORIES

NDS 2019 Standards Inspected <sup>4&amp;5</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	1
Funds and Personal Property	0
Use of Force and Restraints	0
Special Management Units	0
<b>Sub-Total</b>	<b>1</b>
<b>Part 4 – Care</b>	
Food Service	0
Hunger Strikes	0
Medical Care	1
Significant Self-harm and Suicide Prevention and Intervention	0
<b>Sub-Total</b>	<b>1</b>
<b>Total Deficiencies</b>	<b>2</b>

<sup>4</sup> For greater detail on ODO’s findings, see the *Follow-Up Compliance Inspection Findings* section of this report.

<sup>5</sup> Beginning in FY 2021, ODO added Emergency Plans, Facility Security and Control, Population Counts, Hunger Strikes, and Staff Training as core standards. NDS 2019 does not include Emergency Plans, Population Counts, nor Staff Training as individual standards; however, those specific requirements are resident in other core standards.

## DETAINEE RELATIONS

ODO interviewed seven detainees, who each voluntarily agreed to participate. ODO could not conduct any additional detainee interviews because all remaining available detainees refused to be interviewed and no volunteers could be identified. 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 conducted detainee interviews via video teleconference and by telephone.

*Food Service:* Four out of seven detainees stated the meals served were cold or of poor quality and the portions were small.

- Action Taken: ODO interviewed the WDC food service administrator (FSA), observed photographs of the food being served at WDC, and reviewed the 35-day cycle menus with the corresponding nutritional adequacy report, dated October 16, 2019. ODO verified hot food temperature recordings were compliant, and photographs demonstrated the food portions appeared adequate. ODO's further review of the nutritional adequacy report confirmed approval by a registered dietician for all menus in meeting the required nutritional standards and in providing well-balanced meals.

## FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

### SECURITY

#### CUSTODY CLASSIFICATION SYSTEM (CCS)

ODO reviewed 12 detainee detention files and found 1 out of 12 classifications was not reviewed by a supervisor (**Deficiency CCS-6**<sup>6</sup>).

### CARE

#### MEDICAL CARE (MC)

ODO reviewed 13 initial dental screenings conducted by ■ registered nurses (RNs) and found no documentation of annual training for conducting a dental examination in ■ training files of the RNs (**Deficiency MC-45**<sup>7</sup>).

## CONCLUSION

During this inspection, ODO assessed the facility's compliance with 10 standards under NDS 2019 and found the facility in compliance with 8 of those standards. ODO found two deficiencies in the remaining two standards. ODO commends facility staff for its responsiveness during this inspection. ODO recommends ERO work with the facility to resolve any deficiencies that remain

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<sup>6</sup> "A supervisor will review each detainee's classification." See ICE NDS 2019, Standard, Custody Classification System, Section (II)(A)(4).

<sup>7</sup> "Such non-dental clinicians shall be trained annually on how to conduct the exam by a dentist." See ICE NDS 2019, Standard, Medical Care, Section (II)(H).

outstanding in accordance with contractual obligations.

<b>Compliance Inspection Results Compared</b>	<b>First FY 2021 (NDS 2019)</b>	<b>Second FY 2021 (NDS 2019)</b>
Standards Reviewed	18	10
Deficient Standards	3	2
Overall Number of Deficiencies	4	2
Repeat Deficiencies	0	0
Areas of Concern	0	0
Corrective Actions	3	0