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U.S. Immigration and Customs Enforcement
Office of Professional Responsibility
ICE Inspections
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**Office of Detention Oversight
Compliance Inspection
2024-001-288**

**Enforcement and Removal Operations
ERO Boston Field Office**

**Wyatt Detention Center
Central Falls, Rhode Island**

March 26-28, 2024

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

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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 Wyatt Detention Center (WDC) in Central Falls, Rhode Island, from March 26 to 28, 2024.¹ 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 2019 under the oversight of ERO’s Field Office Director in Boston (ERO Boston). 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 25, 2024. WDC was inspected against the NDS 2019, and ODO’s assigned rating is for ERO’s informational purposes only.

[REDACTED] A warden handles daily facility operations and manages [REDACTED] support personnel. Trinity Services provides food services, Keefe Commissary provides commissary services, and the WDC facility staff provides medical care. The facility was accredited by the American Correctional Association in April 2021.

Capacity and Population Statistics	Quantity
ICE Bed Capacity ²	[REDACTED]
Average ICE Population ³	[REDACTED]
Adult Male Population (as of March 26, 2024)	[REDACTED]
Adult Female Population (as of March 26, 2024)	[REDACTED]

During its last full inspection, in Fiscal Year (FY) 2023, ODO found 12 deficiencies in the following areas: Detainee Handbook (1); Hold Rooms in Detention Facilities (1); Medical Care (3); Significant Self-Harm and Suicide Prevention and Intervention (3); and Visitation (4).

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

² Data Source: ERO Custody Management Division Authorized Facility List as of March 25, 2024.

³ *Ibid.*

COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population 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.⁴

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

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 ^{5,6}	Deficiencies
Part 1 - Safety	
Environmental Health and Safety	2
Sub-Total	2
Part 2 - Security	
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 Units	0
Staff-Detainee Communication	0
Sexual Abuse and Assault Prevention and Intervention	0
Sub-Total	0
Part 4 - Care	
Food Service	1
Hunger Strikes	0
Medical Care	0
Personal Hygiene	0
Significant Self-Harm and Suicide Prevention and Intervention	1
Sub-Total	2
Part 5 - Activities	
Correspondence and Other Mail	0
Religious Practices	0
Telephone Access	0
Voluntary Work Program	0
Sub-Total	0
Part 6 - Justice	
Grievance System	0
Law Libraries and Legal Material	0
Sub-Total	0
Part 7 - Administration and Management	
Detention Files	0

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

⁶ 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.

Detainee Transfers	0
Sub-Total	0
Total Deficiencies	4

DETAINEE RELATIONS

ODO interviewed 35 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. Most detainees reported satisfaction with the facility services except for the concerns listed below.

Staff-Detainee Communication: Two Wolof-speaking detainees stated facility staff issued them copies of the ICE National Detainee Handbook and facility-specific handbook in English and they could not read nor understand the handbooks.

- Action Taken: ODO interviewed the facility compliance manager and ERO Boston staff and found the facility had only English and Spanish copies of the handbooks in stock. In response to ODO’s inquiry, facility staff and ERO Boston staff scheduled a Wolof interpreter to translate the handbooks and review them with the detainees on March 27, 2024. On March 28, 2024, ODO verified the facility staff provided translation services and a review of the 2 handbooks for the detainees.

COMPLIANCE INSPECTION FINDINGS

SAFETY

ENVIRONMENTAL HEALTH AND SAFETY (EHS)

ODO toured the facility, inspected hazardous substance storage areas, interviewed the barbershop supervisor, and found the facility did not maintain perpetual inventory records for three hazardous substances used in the barber shop (Mar-V-Cide, Andis Blade Care Plus, and Andis Blade Care Plus Dip) (**Deficiency EHS-3**⁷).

ODO inspected the hazardous substance storage areas and inventories and found the following discrepancies between listed and actual on-hand quantities of the following products:

- Andis Clipper Oil, 5 bottles listed and 2 bottles on-hand;
- Steri-Dri Fumigant, 19 bottles listed and 15 bottles on hand;
- Clubman Talc Powder, 7 bottles listed and 17 bottles on hand; and
- Andis Blade Care Plus, 3 bottles listed and 24 bottles on hand (**Deficiency EHS-4**⁸).

⁷ “Every area will have a perpetual inventory of the hazardous (flammable, toxic, or caustic) substances used and stored in that area.” See ICE NDS 2019, Standard, Environmental Health and Safety, Section (II)(A).

⁸ “Inventory records will be maintained for each substance.” See ICE NDS 2019, Standard, Environmental Health and Safety, Section (II)(A).

CARE

FOOD SERVICE (FS)

ODO interviewed the FS administrator, toured the FS department, reviewed the FS department's refrigerator and water temperature logs, and found no recorded temperatures for:

- Unit 1 refrigerator for 14 out of 179 days;
- Unit 2 refrigerator for 10 out of 179 days; and
- The freezer for 10 out of 179 days (**Deficiency FS-117**⁹).

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

ODO reviewed the medical file of one detainee on suicide watch for 12 days (January 4-16, 2024) and found a mental health provider performed a welfare check only once daily on the following days: January 9, 11, 12 and 16 **Deficiency SSHSPI-22**¹⁰). **This is a repeat deficiency.**

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 24 standards under NDS 2019 and found the facility in compliance with 21 of those standards. ODO found four deficiencies in the remaining three standards. Since WDC's last full inspection in March 2023, the facility's overall compliance has trended upward. WDC went from 5 deficient standards and 12 deficiencies in March 2023 to 3 deficient standards and 4 deficiencies during this most recent full inspection, which included a repeat deficiency for no welfare check every 8 hours of a detainee on suicide watch. ODO received a completed uniform corrective action plan for the facility's last full inspection in March 2023, which likely contributed to resolving most of the 12 deficiencies from the previous inspection. ODO recommends ERO Boston continue to work with the facility to resolve all deficiencies that remain outstanding in accordance with contractual obligations.

⁹ "Staff shall check refrigerator and water temperatures daily, recording the results." See ICE NDS 2019, Standard, Food Service, Section (II)(I)(11)(a).

¹⁰ "A mental health provider will perform welfare checks every 8 hours." See ICE NDS 2019, Standard, Significant Self-harm and Suicide Prevention and Intervention, Section (II)(F).

Compliance Inspection Results Compared	FY 2023 Full Inspection (NDS 2019)	FY 2024 Full Inspection (NDS 2019)
Standards Reviewed	19	24
Deficient Standards	5	3
Overall Number of Deficiencies	12	4
Priority Component Deficiencies	0	0
Repeat Deficiencies	2	1
Areas Of Concern	0	0
Corrective Actions	8	0
Facility Rating	Acceptable/Adequate	Good. ¹¹

¹¹ 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.