



**U.S. Department of Homeland Security**  
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 Compliance Inspection

Enforcement and Removal Operations  
ERO Salt Lake City Field Office  
Henderson Detention Center  
Henderson, Nevada

August 11–13, 2015

**COMPLIANCE INSPECTION  
for the  
HENDERSON DETENTION CENTER  
HENDERSON, NEVADA**

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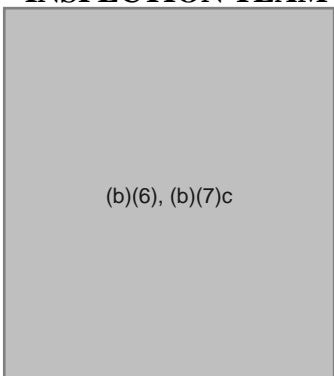
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## EXECUTIVE SUMMARY

The Office of Detention Oversight (ODO) conducted a compliance inspection of the Henderson Detention Center (HDC) in Henderson, Nevada, from August 11 to 13, 2015.<sup>1</sup> HDC opened in 1994 and is owned and operated by the Henderson Police Department (HPD). Enforcement and Removal Operations (ERO) began housing detainees at HDC in 2011, pursuant to an Intergovernmental Services Agreement (IGSA), under the oversight of ERO’s Field Office Director (FOD) in Salt Lake City, Utah.

A Detention Services Manager is the only ERO employee assigned to the facility. An HDC Superintendent is responsible for oversight of daily facility operations and is supported by (b)(7)e personnel. HDC provides food services and Corizon Correctional Healthcare provides medical services. The facility holds no accreditations. The facility is not contractually obligated to comply with ICE Performance-Based National Detention Standards (PBNDS) 2011, Sexual Abuse and Assault Prevention and Intervention (SAAPI) standard but made efforts to comply.<sup>2</sup>

Capacity and Population Statistics	Quantity
Total Bed Capacity	540
ICE Detainee Bed Capacity	250
Average Daily Population	492
Average ICE Detainee Population	236
Average Length of Stay (Days)	27
Male Detainee Population (as of 08/11/2015)	176
Female Detainee Population (as of 08/11/15)	14

### OVERALL FINDINGS

In May 2013, ODO conducted an inspection of HDC under the National Detention Standards (NDS) 2000, reviewing the facility’s compliance with 17 standards and finding the facility compliant with nine standards. There were a total of 15 deficiencies in the remaining eight standards.

Inspection Results Compared	FY 2013 (NDS 2000)	FY2015 (NDS 2000)
Standards Reviewed	17	15
Deficient Standards	8	11
Overall Number of Deficiencies	15	23
Deficient Priority Components	N/A	N/A

In FY2015, ODO conducted an inspection of HDC under the NDS 2000, reviewing the facility’s compliance with 15 standards and finding the facility compliant with four standards.<sup>3</sup> ODO found 23 deficiencies, three of which were repeat deficiencies, under the remaining 11 standards.<sup>4</sup>

<sup>1</sup> Male and female detainees with low, medium and high security classification levels are detained at the facility for longer than 72 hours.

<sup>2</sup> The facility has a SAAPI compliance manger and written policy, Preventing, Detecting, and Responding to Sexual Misconduct, 4420.1, which addresses requirements outlined in the SAAPI standard. Staff is required to complete training on sexual abuse and assault upon initial hire and annually. The training curriculum meets the requirements outlined in the SAAPI standard.

<sup>3</sup> Corrective actions, where immediately implemented, best practices and ODO recommendations, as applicable, are identified in the Inspections Findings section and annotated with a “C”, “BP”, or “R”, respectively.

<sup>4</sup> ODO identified repeat deficiencies from the May 2013 ODO inspection in the following standards: Food Service (1) and Environmental Health and Safety (2).

## FINDINGS BY NDS 2000 MAJOR CATEGORIES

NDS 2000 STANDARDS INSPECTED <sup>5</sup>	DEFICIENCIES
<b>Part 1 – Detainee Services</b>	
Access to Legal Material	2
Admission and Release	1
Detainee Classification System	1
Detainee Grievance Procedures	0
Detainee Handbook	0
Food Service	2
Funds and Personal Property	1
Staff-Detainee Communication	0
Telephone Access	1
<b>Sub-Total</b>	<b>8</b>
<b>Part 2 – Security and Control</b>	
Environmental Health and Safety	3
Special Management Unit (Administrative)	2
Special Management Unit (Disciplinary)	3
Use of Force	1
<b>Sub-Total</b>	<b>9</b>
<b>Part 3 – Health Services</b>	
Medical Care	6
Suicide Prevention and Intervention	0
<b>Sub-Total</b>	<b>6</b>
<b>Total Deficiencies</b>	<b>23</b>

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

## INSPECTION PROCESS

Every fiscal year, the Office of Detention Oversight (ODO), a unit within U.S. Immigration and Customs Enforcement's (ICE) Office of Professional Responsibility (OPR), conducts compliance inspections at detention facilities in which detainees are accommodated for periods in excess of 72 hours and with an average daily population greater than ten to determine compliance with the applicable ICE National Detention Standards (NDS) 2000, or the Performance-Based National Detention Standards (PBNDS) 2008 or 2011.

During the compliance inspection, ODO reviews each facility's compliance with those detention standards that directly affect detainee health, safety, and/or well-being.<sup>6</sup> Any violation of written policy specifically linked to ICE detention standards, ICE policies, or operational procedures that ODO identifies is noted as a deficiency. ODO will highlight any deficiencies found involving those standards that ICE has designated with either the PBNDS 2008 or 2011 to be "priority components."<sup>7</sup> ICE considers those components to be of critical importance, given their impact on facility security and/or the health and safety, legal rights, and quality of life of detainees in ICE custody.

Immediately following an inspection, ODO hosts a closeout briefing in person with both facility and ERO field office management to discuss their preliminary findings, which are summarized and provided to ERO in a preliminary findings report. Thereafter, ODO provides ERO with a final compliance inspection report to: (i) assist ERO in working with the facility to develop a corrective action plan to resolve identified deficiencies; and (ii) provide senior ICE and ERO leadership with an independent assessment of the overall state of ICE detention facilities. The reports enable senior agency leadership to make decisions on the most appropriate actions for individual detention facilities nationwide.

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<sup>6</sup> ODO reviews the facility's compliance with selected standards in their entirety.

<sup>7</sup> Priority components have not been identified for the NDS 2000.

## DETAINEE RELATIONS

ODO interviewed 30 detainees, who volunteered to participate. None of the detainees made allegations of mistreatment, abuse, or discrimination. The majority of detainees reported being satisfied with facility services, with the exception of the complaints below:

- *Admission and Release:* One detainee alleged he did not receive free hygiene kit replacements. Another detainee alleged she did not receive an adequate number of feminine hygiene products for overnight.
  - o Action Taken: ODO witnessed the distribution of hygiene kits in the housing units, and detainees were not charged. ODO determined feminine hygiene products are available for free in the housing units.
- *Food Service:* Three detainees stated the food portions for lunch and dinner meals are too small. One detainee stated the food was raw and inedible.
  - o Action Taken: ODO determined the food menu is overseen by a dietitian, and the three meals provide 2,400 calories, which meets the requirements in the standard. ODO measured the food temperature during lunch service and determined food is properly cooked and served at the appropriate temperatures.
- *Medical Care:* Several detainees alleged they were not receiving appropriate medical care. Three detainees alleged they must purchase medication. Two detainees alleged it takes a month to receive dental care, and in order to receive dental services, they must first request the services through ICE, prior to asking medical.
  - o Action Taken: Medical services notified ODO that detainees are not charged for medications, but if a detainee would like a personal supply of Tylenol they have to purchase it through the commissary. ODO reviewed both claims for dental care and determined that due to dental services being provided off-site, ICE needs to authorize the requests. ODO also determined the dental schedule is done in order of severity of dental issues.

# INSPECTION FINDINGS

## DETAINEE SERVICES

### ACCESS TO LEGAL MATERIAL (ALM)

An interview with staff revealed, the facility does not have a designated officer assigned to inspect the equipment weekly to ensure the equipment is in good working order and to stock supplies (**Deficiency ALM-1**<sup>8</sup>).

A review of the documents posted in the law library revealed a list of the library's holdings was lacking (**Deficiency ALM-2**<sup>9</sup>).

### ADMISSION AND RELEASE (AR)

ODO reviewed detention files and confirmed in an interview with a senior lieutenant, the facility does not record strip searches on Form G-1025, Record of Search, with supporting details, supervisory approval, and outcome of the search (**Deficiency AR-1**<sup>10</sup>).

### DETAINEE CLASSIFICATION SYSTEM (DCS)

A review of the detainee handbook found it does not notify detainees of the different classification levels and the conditions and restrictions applicable to each (**Deficiency DCS-1**<sup>11</sup>).

### FOOD SERVICE (FS)

ODO confirmed knives were secured to workstations when in use; however, the knives do not have steel shanks as required by the standard (**Deficiency FS-1**<sup>12</sup>).

Inspection found the food carts were unsecured. (**Deficiency FS-2**<sup>13</sup>).

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<sup>8</sup> "The facility shall designate an employee with responsibility to inspect the equipment at least weekly and ensure that it is in good working order, and to stock sufficient supplies." See ICE NDS 2000, Standard, Access to Legal Material, Section (III)(B).

<sup>9</sup> "The facility shall post a list of its holdings in the law library." See ICE NDS 2000, Standard, Access to Legal Material, Section (III)(C).

<sup>10</sup> "If information developed during admissions processing supports reasonable suspicion for a full search, the information supporting that suspicion should be documented in detail on Form G-1025, Record of Search." See Change Notice Admission and Release-National Detention Standard Strip Search Policy, dated October 15, 2007.

<sup>11</sup> "The detainee handbook's section on classification will include the following: 1. An explanation of the classification levels, with the conditions and restrictions applicable to each." See ICE NDS 2000, Standard, Detainee Classification System, Section (III)(I)(1).

<sup>12</sup> "To be authorized for use in the food service department, a knife must have a steel shank through which a metal cable can be mounted." See ICE NDS 2000, Standard, Food Service, Section (III)(B)(2). **This is a repeat deficiency.**

<sup>13</sup> "Food will be delivered from one place to another in covered containers. These may be individual containers, such as pots with lids, or larger conveyances that can move objects in bulk, such as enclosed, satellite feeding carts. Food carts must have locking devices." See ICE NDS 2000, Standard, Food Service, Section (III)(C)(2)(g).

## FUNDS AND PERSONAL PROPERTY (F&PP)

The NDS requires that each facility shall have a written procedure for the auditing of detainee funds, valuables, and personal property. An audit process is not addressed in HDC policy, and there is no documentation reflecting audits are conducted (**Deficiency F&PP-1**<sup>14</sup>).

## TELEPHONE ACCESS (TA)

ODO verified ERO conducted serviceability checks by reviewing the ERO weekly telephone serviceability worksheets. ODO reviewed the Telephone Serviceability Worksheets from March 2015 to August 2015 and determined they were not completed weekly (**Deficiency TA-1**<sup>15</sup>).

## SECURITY AND CONTROL

### ENVIRONMENTAL HEALTH AND SAFETY

The inspection found hazardous substances were not inventoried and stored in accordance with the NDS. There was no running inventory of the hazardous substances stored in master receiving, and aerosol products were not inventoried in the booking area and unit four (**Deficiency EH&S-1**<sup>16</sup>).

The aerosol products were stored on shelves and in cabinets not constructed for combustible substances (**Deficiency EH&S-2**<sup>17</sup>).

Documentation of monthly fire drills was present; however, the drills are simulated and do not involve evacuation of detainees. In addition, emergency keys are not drawn and tested (**Deficiency EH&S-3**<sup>18</sup>).

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<sup>14</sup> “Each facility shall have a written procedure for inventory and audit of detainee funds, valuables, and personal property.” See ICE NDS 2000, Standard, Funds and Personal Property, Section (III)(F).

<sup>15</sup> “The Field Office Director (FOD) shall ensure that all phones in all applicable facilities are tested on a weekly basis.” See Memorandum for: Field Office Directors, Detainee Telephone Services, dated April 4, 2007.

<sup>16</sup> “Every area will maintain a running inventory of the hazardous (flammable, toxic, or caustic) substances used and stored in that area. Inventory records will be maintained separately for each substance, with entries for each logged on a separate card (or equivalent).” See ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(A). **This is a repeat deficiency.**

<sup>17</sup> “Any liquid or aerosol labeled ‘Flammable’ or ‘Combustible’ must be stored and used as prescribed on the label, in accordance with the Federal Hazardous Substances Labeling Act, to protect both life and property.” See ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(F)(1). **This is a repeat deficiency.**

<sup>18</sup> “b. Detainees will be evacuated during fire drills, except in areas where security would be jeopardized or in medical areas where patient health could be jeopardized or, in individual cases when evacuation of patients is logistically not feasible. Staff-simulated drills will take place instead in the areas where detainees are not evacuated. Emergency-key drills will be included in each fire drill, and timed. c. Emergency-key drills will be included in each fire drill, and timed. Emergency keys will be drawn and used by the appropriate staff to unlock one set of emergency exit doors not in daily use. NFPA recommends a limit of four and one-half minutes for drawing keys and unlocking emergency doors.” See ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(L)(4)(b)&(c).



## **SPECIAL MANAGEMENT UNIT – ADMINISTRATIVE SEGREGATION (SMU-AS)**

Activities, services and privileges are recorded in HDC’s electronic jail management system. A review of entries found medical staff did not visit every detainee in the SMU at least three times a week, nor did a shift supervisor see each segregated detainee daily (**Deficiency SMU AS-1**<sup>19</sup>).

In addition, the log did not consistently record whether each detainee was given meals, showered, and had recreation, telephone, and visitation privileges (**Deficiency SMU AS-2**<sup>20</sup>).

## **SPECIAL MANAGEMENT UNIT – DISCIPLINARY SEGREGATION (SMU-DS)**

A review of entries found detainees on disciplinary segregation do not receive recreation privileges in accordance with the standard (**Deficiency SMU DS-1**<sup>21</sup>).

In addition, review found medical staff did not visit every detainee in the SMU at least three times a week, nor did a shift supervisor see each segregated detainee daily (**Deficiency SMU DS-2**<sup>22</sup>).

The electronic log did not consistently record whether each detainee was given meals, showered, and had recreation, telephone, and visitation privileges (**Deficiency SMU DS-3**<sup>23</sup>).

## **USE OF FORCE (UOF)**

ODO’s review of training files for (b)(7) randomly selected officers confirmed current training in these devices. The files also documented training in all but one subject required by the standard, which was confrontation avoidance (**Deficiency UOF-1**<sup>24</sup>).

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<sup>19</sup> “A medical professional shall visit every detainee in administrative segregation at least three times a week. In addition to the direct supervision afforded by the unit officer, the shift supervisor shall see each segregated detainee daily, including weekends and holidays.” See ICE NDS 2000, Standard, Special Management Unit – Administrative Segregation, Section (III)(D)(12).

<sup>20</sup> “A permanent log will be maintained in the SMU. The log will record all activities concerning the SMU detainees, e.g., meals served, recreation, visitors, etc.” See ICE NDS 2000, Standard, Special Management Unit – Administrative Segregation, Section (III)(E)(1).

<sup>21</sup> “Recreation shall be provided to detainees in disciplinary segregation in accordance with the ‘Recreation’ standard.” See ICE NDS 2000, Standard, Special Management Unit – Disciplinary Segregation, Section (III)(D)(13).

<sup>22</sup> “A medical professional shall visit every detainee in administrative segregation at least three times a week. In addition to the direct supervision afforded by the unit officer, the shift supervisor shall see each segregated detainee daily, including weekends and holidays.” See ICE NDS 2000, Standard, Special Management Unit – Disciplinary Segregation, Section (III)(D)(16).

<sup>23</sup> “A permanent log will be maintained in the SMU. The log will record all activities concerning the SMU detainees, e.g., meals served, recreation, visitors, etc.” See ICE NDS 2000, Standard, Special Management Unit – Administrative Segregation, Section (III)(E)(1).

<sup>24</sup> “To control a situation involving an aggressive detainee, all staff must be made aware of their responsibilities through ongoing training. All detention personnel shall also be trained in approved methods of self-defense, confrontation avoidance techniques, and the use of force to control detainees. Staff will be made aware of prohibited use-of-force acts and techniques.” See ICE NDS 2000, Standard, Use of Force, Section (III)(O).

# HEALTH SERVICES

## MEDICAL CARE

During intake screening, officers were observed standing in close proximity of the detainees being screened. When questioned about this practice, the Health Service Administrator (HSA) explained it is the facility's policy that officers must be within arm's length of all civilians having contact with incarcerated individuals, including medical and mental healthcare staff (**Deficiency MC-1**<sup>25</sup>).

In the 30 medical records reviewed, a registered nurse (RN) conducted the initial health appraisal within 14 days of detainee arrival; however, in ten cases, the physician did not complete the process by documenting his review within this time period (**Deficiency MC-2**<sup>26</sup>).

In the 30 medical records reviewed, all records documented initial dental screening; however, the facility does not have a dentist on-site and the screenings were conducted by a registered nurse (RN) (**Deficiency MC-3**<sup>27</sup>).

Nurses distribute and collect sick call requests twice daily during medication distribution in the housing units. The requests are available in English and Spanish. A review of five sick call requests found one was not responded to by medical personnel (**Deficiency MC-4**<sup>28</sup>).

A review of five electronic medication administration records showed two did not have all dosages recorded (**Deficiency MC-5**<sup>29</sup>).

A review of the mental health assessments found two detainees receiving psychotropic medications did not sign specific consent forms (**Deficiency MC-6**<sup>30</sup>).

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<sup>25</sup> "Adequate space and equipment will be furnished in all facilities so that all detainees may be provided basic health examinations and treatment in private." See ICE NDS 2000, Standard, Medical Care, Section (III)(B).

<sup>26</sup> "Health appraisals will be performed according to NCCHC and JCAHO standards." See ICE NDS 2000, Standard, Medical Care, Section (III)(D).

<sup>27</sup> "An initial dental screening exam should be performed within 14 days of the detainee's arrival. If no on-site dentist is available, the initial dental screening may be performed by a physician, physician assistant, or nurse practitioner." See ICE NDS 2000, Standard, Medical Care, Section (III)(E).

<sup>28</sup> "The health care provider will review the request slips and determine when the detainee will be seen." See ICE NDS 2000, Standard, Medical Care, Section (III)(F).

<sup>29</sup> "Distribution of medication will be according to the specific instructions and procedures established by the health care provider. Officers will keep written records of all medication given to detainees." See ICE NDS 2000, Standard, Medical Care, Section (III)(I).

<sup>30</sup> "As a rule, medical treatment will not be administered against the detainee's will. The facility health care provider will obtain signed and dated consent forms from all detainees before any medical examination or treatment, except in emergency circumstances." See ICE NDS 2000, Standard, Medical Care, Section (III)(L).