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

Office of Detention Oversight Follow-Up Compliance Inspection

Enforcement and Removal Operations ERO Saint Paul Field Office

Freeborn County Adult Detention Center Albert Lea, Minnesota

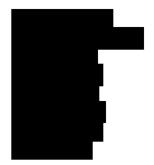
August 24-26, 2021

FOLLOW-UP COMPLIANCE INSPECTION of the FREEBORN COUNTY ADULT DETENTION CENTER Albert Lea, Minnesota

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FOLLOW-UP COMPLIANCE INSPECTION TEAM MEMBERS



Team Lead	ODO
Assistant Team Lead	ODO
Section Chief	ODO
Inspections and Compliance Specialist	ODO
Contractor	Creative Corrections

FACILITY OVERVIEW

The U.S. Immigration and Customs Enforcement (ICE) Office of Professional Responsibility (OPR) Office of Detention Oversight (ODO) conducted a follow-up inspection of the Freeborn County Adult Detention Center (FCADC) in Albert Lea, Minnesota, from August 24 to 26, 2021.¹

This inspection focused on the standards found deficient during ODO's last inspection of FCADC from March 15 to 19, 2021. The facility opened in 2004 and is owned and operated by Freeborn County. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at FCADC in 2009 under the oversight of ERO's Field Office Director in Saint Paul (ERO Saint Paul). The facility operates under the National Detention Standards (NDS) 2019.

ERO has assigned a deportation officer to the facility. An FCADC jail administrator handles daily facility operations and manages support personnel. Summit Food Services, LLC provides food services, Advanced Correctional Healthcare provides medical care, and Turnkey Corrections provides commissary services at the facility. The facility does not hold any accreditations from outside entities.

Capacity and Population Statistics	Quantity
ICE Bed Capacity ²	
Average ICE Population ³	
Adult Male Population (as of August 23, 2021)	
Adult Female Population (as of August 23, 2021)	

During its last inspection, in March 2021, ODO found 47 deficiencies in the following areas: Environmental Health and Safety (6); Facility Security and Control (1); Food Service (1); Funds and Personal Property (2); Hunger Strikes (1); Medical Care (9); Religious Practices (1); Sexual Abuse and Assault Prevention and Intervention (1); Significant Self-Harm and Suicide Prevention and Intervention (7); Special Management Unit (15); Telephone Access (1); and Use of Force and Restraints (2).

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

²Data Source: ERO Facility List as of August 23, 2021.

³Ibid.

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.

FINDINGS BY NATIONAL DETENTION STANDARDS (NDS) 2019 MAJOR CATEGORIES

NDS 2019 Standards Inspected ^{4&5}	Deficiencies
Part 1 - Safety	
Environmental Health and Safety	0
Sub-Total	0
Part 2 - Security	
Admission and Release	1
Facility Security and Control	0
Sexual Abuse and Assault Prevention and Intervention	0
Custody Classification System	1
Funds and Personal Property	0
Special Management Unit	4
Use of Force and Restraints	0
Sub-Total	6
Part 4 - Care	
Medical Care	0
Hunger Strikes	0
Significant Self-Harm and Suicide Prevention and Intervention	0
Food Service	0
Sub-Total	0
Part 5 - Activities	
Religious Practices	0
Telephone Access	1
Sub-Total	1
Total Deficiencies	7

⁴For greater detail on ODO's findings, see the Follow-up Inspection Findings section of this report.

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

DETAINEE RELATIONS

ODO interviewed 21 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, nor abuse. All detainees reported satisfaction with facility services.

FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

SECURITY

ADMISSION AND RELEASE (AR)

ODO reviewed released detainee records, interviewed FCADC's jail administrator and found FCADC does not complete fingerprinting procedures of a detainee prior to a detainee's release (Deficiency AR-28⁶).

CUSTODY CLASSIFICATION SYSTEM (CCS)

ODO examined detainee wristbands, interviewed FCADC's jail administrator and the ICE contract manager, and found FCADC did not have a system that readily identified a detainee's classification level. Specifically, the facility issues the same color uniforms to detainees of all classification levels and the detainee wristbands are not color-coded nor do they have any other form of visual differentiation in which facility staff can quickly identify the detainee's classification level (**Deficiency CCS-8**⁷).

SPECIAL MANAGEMENT UNIT (SMU)

ODO reviewed disciplinary segregation (DS) documentation for the detainees the facility placed in DS and found in files, the facility placed detainees in DS prior to an Institutional Disciplinary Panel (IDP) hearing (Deficiency SMU-34⁸). This is a repeat deficiency.

ODO reviewed DS documentation for the detainees the facility placed in DS and found in the facility placed detainees in DS prior to the chair of the IDP completing and signing a written order (Deficiency SMU-38⁹). This is a repeat deficiency.

⁶"Staff must complete certain procedures before any detainee's release, removal, or transfer from the facility. Necessary steps include completing fingerprinting." *See* ICE NDS 2019, Standard, Admission and Release, Section (II)(J)."

⁷"The classification system shall ensure:

^{6.} Each facility shall establish a system that readily identifies a detainee's classification level, for example, color-coded uniforms." *See* ICE NDS 2019, Standard, Custody Classification System, Section (II)(A)(6)."

⁸"A detainee may be placed in disciplinary segregation only by order of the Institutional Disciplinary Panel (IDP), or its equivalent, after a hearing in which the detainee has been found to have committed a prohibited act and only when alternative dispositions would inadequately regulate the detainee's behavior." *See* ICE NDS 2019, Standard, Special Management Unit, Section (II)(B)."

⁹"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 Unit, Section (II)(B)(2)."

ODO reviewed DS documentation for detainees the facility placed in DS and found in out of detainee detention files, the facility placed detainees in DS prior to the IDP's completion of the DS order to justify placement of the detainee in DS (Deficiency SMU-39¹⁰). This is a repeat deficiency.

ODO reviewed SMU detainee files and found the facility's SMU recreation is not scheduled at a reasonable time. Specifically, detainees assigned to SMU are scheduled daily recreation time between the hours of 12 a.m. and 3 a.m. (Deficiency SMU-120¹¹). This is a repeat deficiency.

ACTIVITIES

TELEPHONE ACCESS (TA)

ODO reviewed the facility's pro bono legal service information and found ERO Saint Paul has not provided the facility with current pro bono legal service information. The pro bono legal service information the facility has posted in the detainee housing units was revised in January 2021, and the current pro bono legal service information was revised in July 2021 (Deficiency TA-13¹²). This is a repeat deficiency.

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 14 standards under NDS 2019 and found the facility in compliance with 10 of those standards. ODO found seven deficiencies in the remaining four standards. ODO commends facility staff members for their responsiveness during this inspection. ERO provided ODO with the uniform corrective action plan for ODO's last inspection of FCADC on August 25, 2021.

¹⁰"Prior to a detainee's actual placement in disciplinary segregation, the IDP shall complete the disciplinary segregation order detailing the reasons for placing the detainee in disciplinary segregation. All relevant documentation must be attached to the order." *See* ICE NDS 2019, Standard, Special Management Unit, Section (II)(B)(2)(a)."

¹¹"Detainees in the SMU shall be offered at least one hour of recreation per day, outside their cells and scheduled at a reasonable time, at least five days per week." *See* ICE NDS 2019, Standard, Special Management Unit, Section (II)(V)."

¹²"All Field Offices are responsible for ensuring facilities which house ICE detainees under their jurisdiction are provided with current pro bono legal service information." *See* ICE NDS 2019, Standard, Telephone Access, Section (II)(E)."

Compliance Inspection Results Compared	First FY 2021 (NDS 2019)/(PBNDS 2011) (Revised 2016)	Second FY 2021 (NDS 2019)
Standards Reviewed	17/1	14
Deficient Standards	12	4
Overall Number of Deficiencies	47	7
Repeat Deficiencies	10	5
Areas of Concern	1	0
Corrective Actions	6	0