



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
Follow-Up Compliance Inspection**

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

**McHenry County Correctional Facility
Woodstock, Illinois**

September 14-16, 2021

FOLLOW-UP COMPLIANCE INSPECTION
of the
MCHENRY COUNTY CORRECTIONAL FACILITY
Woodstock, Illinois

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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/interim compliance inspection of the McHenry County Correctional Facility (MCCF) in Woodstock, Illinois, from September 14 to 16, 2021.¹ This inspection focused on the standards found deficient during ODO’s last inspection of MCCF from March 15 to 19, 2021. The facility opened in 1992, is owned by McHenry County, and operated by the McHenry County Sheriff’s Office. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at MCCF in 2005 under the oversight of ERO’s Field Office Director in Chicago (ERO Chicago). ODO’s last inspection of MCCF was March 15 to 19, 2021, during which the facility operated under the National Detention Standards (NDS) 2019. The facility now operates under the NDS 2000.

ERO has assigned deportation officers and a detention services manager to the facility. An MCCF chief handles daily facility operations and manages ██████ personnel. Aramark provides food and commissary services, and Wellpath provides medical care at the facility. The facility was accredited by the American Correctional Association in January 2020, the National Commission on Correctional Health Care in July 2019, and the Illinois Law Enforcement Accreditation Program in December 2020.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity ²	█████
Average ICE Detainee Population ³	█████
Male Detainee Population (as of September 13, 2021)	█████
Female Detainee Population (as of September 13, 2021)	█████

During its last inspection, in March 2021, ODO found 6 deficiencies in the following areas: Admission and Release (2); Detainee Classification System (2); and Funds and Personal Property (2).

¹ This facility holds male 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 September 13, 2021.

³ *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.

FINDINGS BY NATIONAL DETENTION STANDARDS 2000 MAJOR CATEGORIES

NDS 2000 Standards Inspected ⁴	Deficiencies
Part 1 – Detainee Services	
Admission and Release	0
Detainee Classification System	0
Food Service	0
Funds and Personal Property	0
Staff-Detainee Communication	0
Visitation	1
Sub-Total	1
Part 2 – Security and Control	
Emergency Plans	0
Environmental Health and Safety	0
Special Management Unit (Administrative Segregation)	0
Special Management Unit (Disciplinary Segregation)	0
Use of Force	3
Sub-Total	3
Part 3 – Health Services	
Hunger Strikes	0
Medical Care	4
Suicide Prevention and Intervention	0
Sub-Total	4
Total Deficiencies	8

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

DETAINEE RELATIONS

ODO interviewed 21 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.

Admission and Release: One detainee stated he received the ICE National Detainee Handbook and the facility handbook in English; however, English is not his native language, and he is not able to understand the contents of the handbooks. A second detainee stated she did not receive an ICE National Detainee Handbook and the facility provided her a facility handbook in Spanish, which she could not understand as Spanish is not her native language.

- Action Taken: ODO reviewed both detainees' detention files and found they signed an acknowledgment form stating they received both handbooks. On September 15, 2021, the facility assisted the detainees by placing them on the facility's language line and the translators read the facility handbook to them in their native languages. The facility also placed a copy of the ICE National Detainee Handbook on the housing unit kiosk in the detainees' native languages and informed the detainees the ICE National Detainee Handbook is now available on the kiosk system in their respective languages.

Admission and Release: One detainee stated she had submitted a request for a Spanish Bible but had not received it, nor could she remember when she submitted the request.

- Action Taken: ODO reviewed the detainee request log and found no request for a Spanish bible. ODO notified the facility staff about the detainee's concerns, and on September 15, 2021, the facility issued a Spanish Bible to the detainee.

Environmental Health and Safety: One detainee stated the facility does not allow the detainees to receive haircuts.

- Action Taken: ODO interviewed the facility compliance sergeant and facility housing officers and found the facility schedules haircuts on a once weekly basis has restricted scheduling to one housing unit per week due to COVID-19 pandemic concerns. The detainee's housing unit was scheduled for haircuts a few days prior to his arrival at the facility on August 28, 2021, and is scheduled for hair-cuts on September 28, 2021. ODO informed the detainee of this schedule on September 15, 2021, and the detainee acknowledged he understood.

Medical Care: One detainee stated he has been vomiting since eating the food at the facility and has informed several of the facility's nurses.

- ODO spoke with the health services administrator (HSA) and reviewed the detainee's medical record. The detainee arrived at MCCF on September 01, 2021, with no complaints to medical staff when the medical staff conducted his initial medical screening. On September 14, 2021, the detainee submitted a sick call request, and a nurse evaluated the detainee on the same day. The facility's medical staff prescribed the detainee Pepto Bismol for his symptoms and instructed him to submit another sick call request should he need further treatment.

Medical Care: One detainee stated he has tooth pain, which requires treatment outside of the facility; however, he has not received treatment.

- Action Taken: ODO spoke with the HSA and reviewed the detainee’s medical record. On May 18, 2021, the detainee submitted a sick call request for tooth pain. The facility nursing staff evaluated the detainee the same day and found he needed a root canal. Documentation showed the detainee refused the treatment the facility offered and indicated the detainee stated he would wait until he was no longer in the facility to receive treatment. On September 14, 2021, the facility’s medical staff met with the detainee and the detainee stated again he would wait until he leaves the facility to get the root canal he needs.

FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

DETAINEE SERVICES

VISITATION (V)

ODO reviewed the pro-bono legal services posting in each housing unit and found the facility had posted an update from January 2021 instead of from the most recent quarter (**Deficiency V-109⁵**).

STAFF-DETAINEE COMMUNICATIONS

ODO inspected detainee housing units and found the ERO scheduled visit posting contained the wrong visiting day. The posting stated Wednesday as the scheduled visiting day, however ERO Chicago has been conducting the visits on Thursdays as of April 2021. ODO cited this as an **Area of Concern**.

SECURITY AND CONTROL

USE OF FORCE (UOF)

ODO interviewed an ERO Chicago detention standards compliance officer and learned the facility did not submit the documentation pertaining to the one immediate UOF incident that occurred preceding ODO’s inspection to ERO Chicago (**Deficiency UOF-3⁶**).

ODO reviewed [REDACTED] staff training records and found in [REDACTED] records the staff members did not receive UOF team technique training (**Deficiency UOF-12⁷**).

ODO reviewed the file of the one immediate UOF incident that occurred during the inspection period, interviewed a facility lieutenant, and found staff did not immediately obtain and record

⁵ “INS shall provide the facility with the official list of pro bono legal organizations, which is updated quarterly by the Executive Office for Immigration Review.” See ICE NDS 2000, Standard, Visitation, Section (III)(I)(14).

⁶ “INS requires that all incidents of use of force be documented and forwarded to INS for review.” See ICE NDS 2000, Standard, Use of Force, Section (III)(A)(2)(b).

⁷ “To use human resources most effectively, the OIC will provide use-of-force team technique training for all staff members.” See ICE NDS 2000, Standard, Use of Force, Section (III)(A)(4)(b).

with a video camera the UOF incident (**Deficiency UOF-94⁸**).

HEALTH SERVICES

MEDICAL CARE (MC)

ODO reviewed [REDACTED] detainee medical files and found in [REDACTED] files the health care provider did not complete the initial physical examination within 14 days of the detainee's arrival. ODO found the health care provider completed the physical examinations 16 to 29 days after the detainees' arrival to the facility (**Deficiency MC-23⁹**).

ODO reviewed [REDACTED] detainee medical files and found in [REDACTED] files staff did not complete the initial dental screening exam within 14 days of the detainee's arrival. ODO found staff completed the initial dental screening exam 16 to 29 days after the detainees' arrival to the facility (**Deficiency MC-50¹⁰**).

ODO reviewed [REDACTED] detainee medical files and found in [REDACTED] files a registered nurse completed the initial dental screening instead of a physician, physician's assistant, or nurse practitioner (**Deficiency MC-51¹¹**).

ODO's reviewed [REDACTED] detainee medical files and found in [REDACTED] files the health care provider did not obtain a consent form from the detainee before administering an anti-depressant medication to the detainee (**Deficiency MC-101¹²**). The HSA obtained a signed informed consent form for the anti-depressant from the detainee during the inspection and ODO reviewed the signed consent form.

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 14 standards under NDS 2000 and found the facility in compliance with 11 of those standards. ODO found 8 deficiencies in the remaining 11 standards. ODO commends facility staff for their responsiveness during this inspection. ODO recommends ERO work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations. ERO provided ODO with the uniform corrective action plan for ODO's last inspection of MCCF in March 2021.

⁸ "Staff shall immediately obtain and record with a video camera any use-of-force incident, unless such a delay in bringing the situation under control would constitute a serious hazard to the detainee, staff, or others, or would result in a major disturbance or serious property damage."

See ICE NDS 2000, Standard, Use of Force, Section (III)(J)(3).

⁹ "The health care provider of each facility will conduct a health appraisal and physical examination on each detainee within 14 days of arrival at the facility." See ICE NDS 2000, Standard, Medical Care, Section (III)(D).

¹⁰ "An initial dental screening exam should be performed within 14 days of the detainee's arrival." See ICE NDS 201, Standard, Medical Care, Section (III)(E).

¹¹ "If no on-site dentist is available, the initial dental screening may be performed by a physician, physician's assistant or nurse practitioner." See ICE NDS 2000, Standard, Medical Care, Section, (III)(E).

¹² "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).

Compliance Inspection Results Compared	First FY 2021 (NDS 2000)/(NDS2019)	Second FY 2021 (NDS 2000)
Standards Reviewed	18/2	14
Deficient Standards	3	3
Overall Number of Deficiencies	6	8
Repeat Deficiencies	0	0
Areas of Concern	6	1
Corrective Actions	0	0