



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 Saint Paul Field Office**

**Kandiyohi County Jail
Willmar, Minnesota**

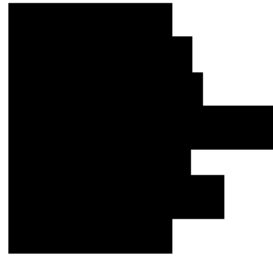
September 20-23, 2021

FOLLOW-UP COMPLIANCE INSPECTION
of the
KANDIYOHI COUNTY JAIL
Willmar, Minnesota

TABLE OF CONTENTS

FACILITY OVERVIEW	4
FOLLOW-UP COMPLIANCE INSPECTION PROCESS.....	5
FINDINGS BY NATIONAL DETENTION STANDARDS 2000	
MAJOR CATEGORIES	6
DETAINEE RELATIONS.....	7
FOLLOW-UP COMPLIANCE INSPECTION FINDINGS.....	7
DETAINEE SERVICES.....	7
Admission and Release.....	7
SECURITY AND CONTROL.....	7
Special Management Unit (Administrative Segregation).....	7
Special Management Unit (Disciplinary Segregation).....	7
HEALTH SERVICES	8
Medical Care.....	8
CONCLUSION	8

FOLLOW-UP COMPLIANCE INSPECTION TEAM MEMBERS



Team Lead
Inspections and Compliance Specialist
Inspections and Compliance Specialist
Contractor
Contractor
Contractor
Contractor

ODO
ODO
ODO
Creative Corrections
Creative Corrections
Creative Corrections
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 compliance inspection of the Kandiyohi County Jail (KCJ) in Willmar, Minnesota, from September 20 to 23, 2021.¹ This inspection focused on the standards found deficient during ODO’s last inspection of KCJ from March 8 to 11, 2021. The facility opened in 2001, is owned by Kandiyohi County, and is operated by Kandiyohi County Sheriff’s Office. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at KCJ in 2017 under the oversight of ERO’s Field Office Director in Saint Paul (ERO Saint Paul). The facility operates under the National Detention Standards (NDS) 2000.

ERO has not assigned deportation officers nor a detention services manager to the facility. A facility administrator handles daily facility operations and manages ■ support personnel. Summit provides food services, MEND Correctional Care provides medical care, and Turnkey Corrections provides commissary services at the facility. The facility holds no accreditations from any outside entities.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity ²	■
Average ICE Detainee Population ³	■
Male Detainee Population (as of September 20, 2021)	■
Female Detainee Population (as of September 20, 2021)	■

During its last inspection, in March 2021, ODO found two deficiencies in the following areas: Special Management Unit (Administrative Segregation) (1) and Use of Force (1).

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

² Data Source: ERO Facility List Report as of September 20, 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.

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 2000 MAJOR CATEGORIES

NDS 2000 Standards Inspected ⁴	Deficiencies
Part 1 – Detainee Services	
Admission and Release	2
Detainee Classification System	0
Food Service	0
Funds and Personal Property	0
Sub-Total	2
Part 2 – Security and Control	
Environmental Health and Safety	0
Special Management Unit (Administrative Segregation)	1
Special Management Unit (Disciplinary Segregation)	2
Use of Force	0
Sub-Total	3
Part 3 – Health Services	
Medical Care	1
Suicide Prevention and Intervention	0
Sub-Total	1
Total Deficiencies	6

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

DETAINEE RELATIONS

ODO interviewed 12 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. All detainees reported satisfaction with facility services. ODO conducted detainee interviews via video teleconference.

FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

DETAINEE SERVICES

ADMISSION AND RELEASE (AR)

ODO reviewed [REDACTED] detainee detention files and found in [REDACTED] files, the detainee did not receive a facility handbook upon admission to the facility (**Deficiency AR-65⁵**).

ODO reviewed [REDACTED] detainee detention files and found in [REDACTED] files, the detainee did not sign the facility's form, acknowledging receipt of the facility handbook upon admission to the facility (**Deficiency AR-68⁶**).

SECURITY AND CONTROL

SPECIAL MANAGEMENT UNIT (ADMINISTRATIVE SEGREGATION) (SMU AS)

ODO reviewed [REDACTED] detainee AS files and found in [REDACTED] files, facility staff did not record meals served to the detainee (**Deficiency SMU AS-78⁷**).

SPECIAL MANAGEMENT UNIT (DISCIPLINARY SEGREGATION) (SMU DS)

ODO reviewed [REDACTED] detainee DS files and found in [REDACTED] files, facility staff did not record meals served to the detainee (**Deficiency SMU DS-59⁸**).

ODO reviewed [REDACTED] detainee DS files and found in [REDACTED] files, facility staff did not record meals at all on the SMU Housing Record (**Deficiency SMU DS-65⁹**).

⁵ "Upon admission every detainee will receive a detainee handbook." See ICE NDS 2000, Standard, Admission and Release, Section (III)(K).

⁶ "As part of the admissions process, the detainee will acknowledge receipt of the handbook by signing where indicated on the back of the I-385 (or on a separate form)." See ICE NDS 2000, Standard, Admission and Release, Section (III)(K)(1).

⁷ "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).

⁸ "A permanent log will be maintained in the SMU. The log will note all activities concerning the SMU detainees, e.g., meals served, recreation, visitors, etc." See ICE NDS 2000, Standard, Special Management Unit (Disciplinary Segregation), Section (III)(E)(1).

⁹ "The special housing officer for each shift will record whether the detainee ate, showered, exercised and took any medication. The I-888 will also be used to record additional information, e.g., if the detainee has a medical condition, has exhibited suicidal/assaultive behavior, etc." See ICE NDS 2000, Standard, Special Management Unit (Disciplinary Segregation), Section (III)(E)(2).

HEALTH SERVICES

MEDICAL CARE (MC)

ODO reviewed [REDACTED] detainee medical records and found in [REDACTED] records, a health care provider did not complete a health appraisal within 14 days of the detainee's arrival at the facility. The health care provider initiated the health appraisals within 14 days but never completed them (**Deficiency MC-23¹⁰**).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 10 standards under NDS 2000 and found the facility in compliance with 6 of those standards. ODO found six deficiencies in the remaining four standards. ODO commends facility staff members 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 KCJ on July 28, 2021.

Compliance Inspection Results Compared	First FY 2021 (NDS 2000)/(NDS 2019)/(FPBDS)	Second FY 2021 (NDS 2000)
Standards Reviewed	18/1/1	10
Deficient Standards	2	4
Overall Number of Deficiencies	2	6
Repeat Deficiencies	0	0
Areas of Concern	0	0
Corrective Actions	0	0

¹⁰ "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).