

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

Office of Detention Oversight Follow-Up Compliance Inspection 2023-012-123

Enforcement and Removal Operations ERO Saint Paul Field Office

Sherburne County Jail Elk River, Minnesota

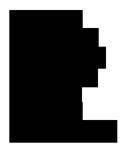
August 15-17, 2023

FOLLOW-UP COMPLIANCE INSPECTION of the SHERBURNE COUNTY JAIL Elk River, Minnesota

TABLE OF CONTENTS

FACILITY OVERVIEW	4
FOLLOW-UP COMPLIANCE INSPECTION PROCESS	5
FINDINGS BY NATIONAL DETENTION STANDARDS 2019 MAJOR CATEGORIES	6
DETAINEE RELATIONS	7
FOLLOW-UP COMPLIANCE INSPECTION FINDINGS	7
CONCLUSION	7

FOLLOW-UP COMPLIANCE INSPECTION TEAM MEMBERS



Team Lead Senior 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 Sherburne County Jail (SCJ) in Elk River, Minnesota, from August 15 to 17, 2023.¹ This inspection focused on the standards found deficient during ODO's last inspection of SCJ from February 14 to 16, 2023. The facility opened in 1979 and is owned by Sherburne County and operated by the Sherburne County Sheriff's Office. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at SCJ in 1989 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.

A jail commander handles daily facility operations and manages support personnel. Trinity Services provides food services, MEND Correctional Care provides medical care, and Sherburne County provides commissary services at the facility. The facility was accredited by the American Correctional Association in 2021 and the National Commission on Correctional Health Care in January 2022. In April 2022, SCJ was audited for the Department of Justice (DOJ) Prison Rape Elimination Act (PREA) and was DOJ PREA certified.

Capacity and Population Statistics	Quantity	
ICE Bed Capacity ²		
Average ICE Population ³		
Adult Male Population (as of August 15, 2023)		
Adult Female Population (as of August 15, 2023)		

During its last inspection, in Fiscal Year (FY) 2023, ODO found one deficiency in the following area: Transportation by Land (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 as of August 15, 2023.

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.⁴

While follow-up inspections are intended to focus on previously identified deficiencies, ODO will conduct a complete review of several core standards, which may 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 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.

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	0	
Transportation by Land	0	
Sub-Total	0	
Part 2 - Security		
Admission and Release	0	
Custody Classification System	0	
Facility Security and Control	0	
Funds and Personal Property	0	
Use of Force and Restraints	0	
Special Management Unit	0	
Staff-Detainee Communication	0	
Sub-Total	0	
Part 4 - Care		
Food Service	0	
Medical Care	0	
Significant Self-Harm and Suicide Prevention and Intervention	0	
Terminal Illness and Death	0	
Sub-Total	0	
Part 5 - Activities		
Recreation	0	
Telephone Access	0	
Sub-Total	0	
Part 6 - Justice		
Grievance System	0	
Sub-Total	0	
Total Deficiencies	0	

⁵ For greater detail on ODO's findings, see the *Follow-up Compliance Inspection Findings* section of this report.
⁶ Beginning in FY 2022, ODO instituted a process of rotating all standards on a 3-year basis. As a result, some standard components may not be present in all inspections.

DETAINEE RELATIONS

ODO requested an interview with the only detainee at the facility during the inspection, but the detainee declined ODO's request for an interview.

FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

ODO found no deficiencies during this inspection.

CONCLUSION

During this follow-up compliance inspection, ODO assessed the facility's compliance with 16 standards under NDS 2019 and found the facility in compliance with all 16 of those standards. Since SCJ's last full inspection in February 2023, the facility has maintained the high-level of compliance with the NDS 2019. SCJ went from one deficient standard and one deficiency in February 2023 to no deficient standards during this most recent inspection. The facility's improved performance was likely a result of completing the UCAP for ODO's last inspection of SCJ in February 2023. ODO recommends ERO Saint Paul continue working with the facility to ensure they maintain their high-level of compliance with the NDS 2019.

Compliance Inspection Results Compared	FY 2023 Full Inspection (NDS 2019)	FY 2023 Follow-Up Inspection (NDS 2019)
Standards Reviewed	19	16
Deficient Standards	1	0
Overall Number of Deficiencies	1	0
Priority Component Deficiencies	0	0
Repeat Deficiencies	0	0
Areas Of Concern	0	0
Corrective Actions	0	0
Facility Rating	Superior	N/A