



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
Compliance Inspection
2023-001-094**

**Enforcement and Removal Operations
ERO Saint Paul Field Office**

**Hall County Department of Corrections
Grand Island, Nebraska**

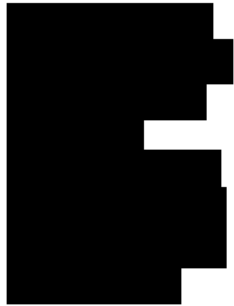
March 7-9, 2023

COMPLIANCE INSPECTION
of the
HALL COUNTY DEPARTMENT OF CORRECTIONS
Grand Island, Nebraska

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COMPLIANCE INSPECTION TEAM MEMBERS



Acting Team Lead	ODO
Senior Inspections and Compliance Specialist	ODO
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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 compliance inspection of the Hall County Department of Corrections (HCDC) in Grand Island, Nebraska, from March 7 to 9, 2023.¹ The facility opened in 2009 and is owned and operated by Hall County. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at HCDC 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 deportation officers assigned part-time to the facility and they are scheduled to visit the facility every Thursday from 11:00 am to 1:00 pm. A facility director handles daily operations and manages [REDACTED] support personnel. Summit Food Services provides food and commissary services, and Advanced Correctional Healthcare provides medical care at the facility. The facility does not hold any accreditations from any outside entities.

Capacity and Population Statistics	Quantity
ICE Bed Capacity ²	[REDACTED]
Average ICE Population ³	[REDACTED]
Adult Male Population (as of March 7, 2023)	[REDACTED]
Adult Female Population (as of March 7, 2023)	[REDACTED]

During its last full inspection, in Fiscal Year (FY) 2022, ODO found 37 deficiencies in the following areas: Environmental Health and Safety (3); Admission and Release (6); Custody Classification System (1); Funds and Personal Property (4); Post Orders (5); Searches of Detainees (2); Food Service (5); Hunger Strikes (1); Medical Care (6); Personal Hygiene (1); Correspondence and Other Mail (2); and Detention Files (1).

¹ This facility holds female and male 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 February 27, 2023.

³ *Ibid.*

COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population of 10 or more, and where detainees are housed for over 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.⁴

ODO identifies violations of ICE detention standards, ICE policies, or operational procedures, as “deficiencies.” ODO highlights instances when the facility resolves deficiencies prior to completion of the ODO inspection. Where applicable, these corrective actions are annotated with “C” under the *Compliance Inspection Findings* section of this report.

Upon completion of each inspection, ODO conducts a closeout briefing with facility and local ERO officials to discuss preliminary findings. A summary of these findings is shared with ERO management officials. Thereafter, ODO provides ICE leadership with a final compliance inspection report to: (i) assist ERO in developing and initiating corrective action plans; and (ii) provide senior executives with an independent assessment of facility operations. ODO’s findings inform ICE executive management in their decision-making to better allocate resources across the agency’s entire detention inventory.

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
Funds and Personal Property	0
Hold Rooms in Detention Facilities	0
Use of Force and Restraints	0
Special Management Units	0
Sexual Abuse and Assault Prevention and Intervention	0
Sub-Total	0
Part 3 - Order	
Disciplinary System	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
Disability Identification, Assessment, and Accommodation	1
Sub-Total	1
Part 5 - Activities	
Correspondence and Other Mail	0
Recreation	0
Visitation	0
Sub-Total	0
Part 6 - Justice	
Detainee Handbook	1
Sub-Total	1
Total Deficiencies	2

⁵ For greater detail on ODO’s findings, see the *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 standards.

DETAINEE RELATIONS

ODO interviewed 11 detainees, who each voluntarily agreed to participate. A 12th detainee declined ODO's request for an interview. None of the detainees made allegations of discrimination, mistreatment, or abuse. All detainees reported satisfaction with facility services.

COMPLIANCE INSPECTION FINDINGS

CARE

DISABILITY IDENTIFICATION, ASSESSMENT, AND ACCOMMODATION (DIAA)

ODO reviewed the facility's orientation program and found no reference to the facility's disability accommodations policy, including a detainee's right to request reasonable accommodations nor how to make such a request (**Deficiency DIAA-50⁷**).

JUSTICE

DETAINEE HANDBOOK (DH)

ODO reviewed the facility handbook and found no information regarding available services for disability accommodations (**Deficiency DH-2⁸**). **This is a priority component.**

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 19 standards under NDS 2019 and found the facility in compliance with 17 of those standards. ODO found two deficiencies in the remaining two standards. Since HCDC's last full inspection in March 2022, the facility's overall compliance with ICE NDS 2019 has improved significantly. HCDC went from 12 deficient standards and 37 deficiencies in March 2022 to 2 deficient standards and 2 deficiencies during this most recent full inspection, and a previous final rating of "failure" to an current final rating of "superior." ODO did not review the DH nor DIAA standards during the March 2022 inspection as they were not FY 2022 core standards, and these standards accounted for the two deficiencies found during this most recent inspection. The facility's improved performance was a result of completing the uniform corrective action plans for the full inspection in March 2022 and the

⁷ "The facility orientation program shall notify and inform detainees about the facility's disability accommodations policy, including their right to request reasonable accommodations and how to make such a request, in a language and/or manner they can understand." See ICE NDS 2019, Standard, Disability Identification, Assessment, and Accommodation, Section (II)(I).

⁸ "The facility handbook will specify in detail the rules, regulations, policies, and procedures with which every detainee must comply and include information about available services such as: personal hygiene rules, recreation, correspondence and other mail, visitation, library/legal access, telephone use, sexual abuse and assault prevention and intervention program, disability accommodations, restricted areas, contraband, housekeeping, disciplinary rules and sanctions, grievance and appeal procedures, health care access, religious services, canteen and commissary, property, and so forth." See ICE NDS 2019, Standard, Detainee Handbook, Section (II)(B).

follow-up inspection in August 2022. ODO recommends ERO Saint Paul continue to work with the facility to resolve the deficiencies that remain outstanding in accordance with contractual obligations.

Compliance Inspection Results Compared	FY 2022 Full Inspection (NDS 2019)	FY 2023 Full Inspection (NDS 2019)
Standards Reviewed	19	19
Deficient Standards	12	2
Overall Number of Deficiencies	37	2
Priority Component Deficiencies	N/A	1
Repeat Deficiencies	15	0
Areas Of Concern	1	0
Corrective Actions	0	0
Facility Rating	Failure	Superior