



**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

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**Office of Detention Oversight  
Compliance Inspection**

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

**Chippewa County Correctional Facility  
Sault Saint Marie, Michigan**

**April 5-9, 2021**

**COMPLIANCE INSPECTION**  
**of the**  
**CHIPPEWA COUNTY CORRECTIONAL FACILITY**  
Sault Saint Marie, Michigan

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## COMPLIANCE INSPECTION TEAM MEMBERS



Acting Team Lead	ODO
Inspections and Compliance Specialist	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 compliance inspection of the Chippewa County Correctional Facility (CCCF) in Sault Sainte Marie, Michigan, from April 5 to 9, 2021.<sup>1</sup> The facility opened in 1954 and is owned and operated by Chippewa County. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at CCCF in 2004 under the oversight of ERO’s Field Office Director in Detroit (ERO Detroit). The facility operates under the National Detention Standards (NDS) 2019.

ERO has assigned deportation officers (DO) to the facility. A jail administrator handles daily facility operations and is supported by ██████ personnel. Chippewa County provides food services, WellPath provides medical care, and Swanson Corporation and Trinity Services provide commissary services at the facility. The facility does not hold any accreditations from any outside entities.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity <sup>2</sup>	17
Average ICE Detainee Population <sup>3</sup>	█████
Male Detainee Population (as of April 5, 2021)	█████
Female Detainee Population (as of April 5, 2021)	█████

During its last inspection, in Fiscal Year (FY) 2020, ODO found 30 deficiencies in the following areas: Environmental Health and Safety (1); Custody Classification System (1); Funds and Personal Property (3); Special Management Units (10); Food Service (2); Medical Care (9); Personal Hygiene (1); Recreation (1); Visitation (1); and Detainee Handbook (1).

<sup>1</sup> This facility holds male and female detainees with low, medium-low, medium-high, and high-security classification levels for periods longer than 72 hours.

<sup>2</sup> Data Source: ERO Facility List Report as of April 5, 2021.

<sup>3</sup> *Ibid.*

<sup>4</sup> Per the ERO Facility List Report of April 5, 2021, CCCF had an FY 2020 average daily population of 25 detainees, which is why ODO scheduled CCCF for an inspection in FY 2021. Although the facility’s population count during the inspection was less than 10, the facility has a current contract to house ICE detainees, which is why ODO continued with the inspection.

## COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population greater than ten, 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.<sup>5</sup>

ODO identifies violations of ICE detention standards, ICE policies, or operational procedures as “deficiencies.” ODO also highlights instances in which 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.

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.

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<sup>5</sup> ODO reviews the facility’s compliance with selected standards in their entirety.

## FINDINGS BY NATIONAL DETENTION STANDARDS 2019 MAJOR CATEGORIES

NDS 2019 Standards Inspected <sup>6&amp;7</sup>	Deficiencies
<b>Part 1 – Safety</b>	
Environmental Health and Safety	0
<b>Sub-Total</b>	<b>0</b>
<b>Part 2 – Security</b>	
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 Units	0
Staff-Detainee Communication	0
Sexual Abuse and Assault Prevention and Intervention	1
<b>Sub-Total</b>	<b>1</b>
<b>Part 4 – Care</b>	
Food Service	2
Hunger Strikes	0
Medical Care	0
Significant Self-harm and Suicide Prevention and Intervention	0
Disability Identification, Assessment, and Accommodation	0
<b>Sub-Total</b>	<b>2</b>
<b>Part 5 – Activities</b>	
Religious Practices	0
Telephone Access	0
<b>Sub-Total</b>	<b>0</b>
<b>Part 6 – Justice</b>	
Grievance Systems	1
Law Libraries and Legal Material	0
<b>Sub-Total</b>	<b>1</b>
<b>Total Deficiencies</b>	<b>4</b>

<sup>6</sup> For greater detail on ODO’s findings, see the *Compliance Inspection Findings* section of this report.

<sup>7</sup> Beginning in FY 2021, ODO added Emergency Plans, Facility Security and Control, Population Counts, Hunger Strikes, and Staff Training as core standards. NDS 2019 does not include Emergency Plans, Population Counts, nor Staff Training as individual standards; however, those specific requirements are resident in other core standards.

## DETAINEE RELATIONS

There were five detainees assigned to the facility during this inspection. ODO interviewed three detainees, who each voluntarily agreed to participate, and the remaining two detainees declined to interview. None of the detainees made allegations of discrimination, mistreatment, nor abuse. All detainees reported satisfaction with facility services except for the concerns listed below. ODO attempted to conduct detainee interviews via video teleconference; however, the ERO field office and facility were not able to accommodate this request due to technology issues. As such, the detainee interviews were conducted via telephone.

*Staff-Detainee Communication:* One detainee stated he requested a status update from his assigned DO regarding his immigration case but has not received any updates on his immigration status for several months.

- Action Taken: ODO interviewed the assigned DO, reviewed the ICE Facility Liaison Visit Checklist, the staff-detainee communication reports, and found the assigned DO spoke to the detainee on March 11, 2021, regarding the status of the detainee's Board of Immigration Appeal (BIA). On April 6, 2021, the assigned DO followed-up with the detainee and informed the detainee his BIA is still pending with no pending release order. The assigned DO reconfirmed with the detainee, upon receipt of a decision from BIA, ICE would promptly take action regarding that decision. Additionally, the assigned DO provided the detainee with a telephone number for BIA and informed him he could call to get a status of his pending BIA.

*Funds and Personal Property:* One detainee stated ICE lost all his property during transport to the facility, and he filed a property claim report on January 10, 2021. However, he has not heard anything regarding the status of his claim.

- Action Taken: ODO contacted ERO Detroit and found the contracted flight crew lost the detainee's property prior to his arrival at CCCF. ERO Detroit advised ODO they recovered the detainee's lost property and mailed the property to the forwarding address provided; however, the detainee's family no longer lived at that address and the property was no longer in ICE's possession. ERO Detroit provided the detainee with an explanation and tort claim with filing instructions. Moreover, since ERO Detroit handled the detainee's property prior to the detainee's arrival to CCCF, ERO Detroit is resolving the detainee's claim.

## COMPLIANCE INSPECTION FINDINGS

### SECURITY

#### SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION (SAAPI)

ODO reviewed the facility's SAAPI program and found ERO Detroit did not report a sexual assault incident to the OPR Joint Integrity Case Management System (JICMS). As of May 26, 2021, ERO Detroit has not reported the alleged sexual assault incident to JICMS (**Deficiency**)

SAAPI-112<sup>8</sup>).

## CARE

### FOOD SERVICE (FS)

ODO reviewed the facility's FS program and found the chaplain has not developed the facility's ceremonial meal schedule for the subsequent calendar year (**Deficiency FS-68<sup>9</sup>**). **This is a Repeat Deficiency.**

ODO reviewed the facility's FS program and found the facility's FS program does not have a ceremonial meal schedule (**Deficiency FS-69<sup>10</sup>**). **This is a Repeat Deficiency.**

## JUSTICE

### GRIEVANCE SYSTEM (GS)

ODO reviewed five detainee detention records and found two out of five records contained grievances not addressed within 5 business days (**Deficiency GS-15<sup>11</sup>**).

## CONCLUSION

During this inspection, ODO assessed the facility's compliance with 18 standards under NDS 2019 and found the facility in compliance with 15 of those standards. ODO found four deficiencies in the remaining three 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.

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<sup>8</sup> "When a detainee(s) is alleged to be the perpetrator, it is the facility administrator's responsibility to ensure that the incident is promptly referred to the appropriate law enforcement agency having jurisdiction for investigation (if the incident is potentially criminal) and reported to ICE/ERO (this notification must go directly to the FOD), which shall report it to the OPR Joint Intake Center." *See* ICE NDS 2019, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (II)(L)(1).

<sup>9</sup> "The chaplain, in consultation with local religious leaders, if necessary, shall develop the ceremonial-meal schedule for the subsequent calendar year, providing it to the facility administrator." *See* ICE NDS 2019, Standard, Food Service, Section (II)(F)(7).

<sup>10</sup> "This schedule shall include the date, religious group, estimated number of participants, and special foods required." *See* ICE NDS 2019, Standard, Food Service, Section (II)(F)(7).

<sup>11</sup> "Barring extraordinary circumstances, grievances shall be addressed within five business days. (II)(A)(2)(a)" *See* ICE NDS 2019, Standard, Grievance System, Section (II)(A)(2)(a).

<b>Compliance Inspection Results Compared</b>	<b>FY 2020 (NDS 2019)</b>	<b>FY 2021 (NDS 2019)</b>
Standards Reviewed	20	18
Deficient Standards	10	3
Overall Number of Deficiencies	30	4
Repeat Deficiencies	0	2
Areas of Concern	0	0
Corrective Actions	0	0