



**U.S. Department of Homeland Security**  
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 Chicago Field Office  
Dodge County Jail  
Juneau, WI

August 1-3, 2017

**COMPLIANCE INSPECTION  
for the  
DODGE COUNTY JAIL  
Juneau, Wisconsin**

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**COMPLIANCE INSPECTION TEAM MEMBERS**

|                            |                                            |                      |
|----------------------------|--------------------------------------------|----------------------|
| <b>(b) (6), (b) (7)(C)</b> | Management and Program Analyst (Team Lead) | ODO                  |
|                            | Inspections and Compliance Specialist      | ODO                  |
|                            | Inspections and Compliance Specialist      | ODO                  |
|                            | Contractor                                 | Creative Corrections |
|                            | Contractor                                 | Creative Corrections |
|                            | Contractor                                 | Creative Corrections |
|                            | Contractor                                 | Creative Corrections |

## FACILITY OVERVIEW

The Office of Detention Oversight (ODO), a unit within the U.S. Immigration and Customs Enforcement (ICE) Office of Professional Responsibility (OPR), conducted a compliance inspection of the Dodge County Jail (DCJ), in Juneau, Wisconsin, from August 1-3, 2017<sup>1</sup>. The DCJ is owned by Dodge County and operated by the Dodge County Sheriff's Office. The Office of Enforcement and Removal Operations (ERO) started housing ICE detainees at DCJ in June 2003, pursuant to an Intergovernmental Service Agreement (IGSA), under the oversight of ERO's Field Office Director (FOD) in Chicago.

No ERO officers are assigned to the facility, though an ICE Detention Services Manager is on-site. A jail administrator is responsible for oversight of daily facility operations and is supported by (b) (7)(E) personnel. Aramark Correctional Services provides food service, and Correct Care Solutions provides detainee medical care. The facility has no accreditations.

| Capacity and Population Statistics            | Quantity |
|-----------------------------------------------|----------|
| ICE Detainee Bed Capacity <sup>2</sup>        | 265      |
| Average ICE Detainee Population <sup>3</sup>  | 194      |
| Male Detainee Population (as of 08/01/2017)   | 181      |
| Female Detainee Population (as of 08/01/2017) | 11       |

In FY 2014, ODO conducted a compliance inspection of DCJ under the National Detention Standards (NDS) 2000. ODO found 7 deficiencies in the following areas: Access to Legal Material (1 deficiency), Environmental Health and Safety (1), Food Service (2), Funds and Personal Property (2), and Use of Force (1).

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

<sup>2</sup> Data Source: ERO Facility List Report as of June 06, 2017.

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

## FY 2017 FINDINGS BY NDS 2000 MAJOR CATEGORIES

| NDS 2000 STANDARDS INSPECTED <sup>4</sup>            | DEFICIENCIES |
|------------------------------------------------------|--------------|
| <b>Part 1 – Detainee Services</b>                    |              |
| Access to Legal Material                             | 0            |
| Admission and Release                                | 0            |
| Detainee Classification System                       | 1            |
| Detainee Grievance Procedures                        | 0            |
| Detainee Handbook                                    | 0            |
| Food Service                                         | 0            |
| Funds and Personal Property                          | 1            |
| Staff-Detainee Communication                         | 0            |
| Telephone Access                                     | 0            |
| <b>Sub-Total</b>                                     | <b>2</b>     |
| <b>Part 2 – Security and Control</b>                 |              |
| Environmental Health and Safety                      | 0            |
| Special Management Unit (Administrative Segregation) | 0            |
| Special Management Unit (Disciplinary Segregation)   | 0            |
| Use of Force                                         | 0            |
| <b>Sub-Total</b>                                     | <b>0</b>     |
| <b>Part 3 – Health Services</b>                      |              |
| Medical Care                                         | 2            |
| Suicide Prevention and Intervention                  | 0            |
| <b>Sub-Total</b>                                     | <b>2</b>     |
| <b>PBNDS 2011 STANDARD INSPECTED</b>                 |              |
| Sexual Abuse and Assault Prevention and Intervention | 0            |
| <b>Sub-Total</b>                                     | <b>0</b>     |
| <b>Total Deficiencies</b>                            | <b>4</b>     |

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

## 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 over 72-hours to assess compliance with ICE National Detention Standards (NDS) 2000, or the Performance-Based National Detention Standards (PBNDS) 2008 or 2011, as applicable. 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 linked to ICE detention standards, ICE policies, or operational procedures as *deficiencies*. ODO also highlights instances when the facility resolves deficiencies prior to completion of the ODO inspection; these corrective actions are annotated with “C” under the Inspection Findings section of this report.

At the conclusion of each inspection, ODO holds a closeout briefing with facility and local ERO officials to discuss preliminary findings. A summary of these findings is also 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. Additionally, ODO findings inform ICE executive management decision making in better allocating resources across the agency’s entire detention inventory.

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

## DETAINEE RELATIONS

ODO interviewed 24 detainees, each of whom volunteered to participate. None of the detainees made allegations of mistreatment, abuse, or discrimination. The majority of detainees reported being satisfied with facility services; however, nearly half of the detainees interviewed complained about issues related to the provision of medical care as described below:

*Medical Care:* Six detainees indicated they had not received dental and/or optometry services.

- Action Taken: ODO found that dental and optometry services are not available due to ongoing fiscal coding issues originating with the providers. ERO staff members were aware of this issue prior to the inspection and engaged the ICE Health Services Corps for assistance with proper billing procedures. *See the Compliance Inspections Findings: Medical Care section of this report for further information.*

*Medical Care:* Eight detainees complained that medical staff did not respond to requests for medical appointments.

- Action Taken: Detainees are instructed to use a kiosk-based system to submit requests for medical care. During the course of the inspection, ODO found the kiosk and facility policies lack any mechanism to show whether or not health care personnel review and assess detainee medical requests submitted through this system to determine if/when a detainee will be seen. ODO found no documentation in the eight detainee's medical files indicating they had been seen by the medical provider. *See the Compliance Inspections Findings: Medical Care section of this report for further information.*

# COMPLIANCE INSPECTION FINDINGS

## DETAINEE SERVICES

### DETAINEE CLASSIFICATION SYSTEM (DCS)

During the course of the inspection, ODO found one instance of comingling in the housing unit with a level 1 (medium-low) detainee being housed in a level 3 (medium-high/high) pod (**Deficiency DCS-1<sup>6</sup>**).

*Corrective Action:* The facility initiated corrective action by moving the level 1 detainee into an appropriate housing unit (**DCS-1**).

ODO also identified that the facility handbook does not explain the classification levels and the conditions and restrictions applicable to each (**Deficiency DCS-2<sup>7</sup>**).

### FUNDS AND PERSONAL PROPERTY (F&PP)

ODO reviewed the facility's detainee handbook and interviewed senior facility staff. ODO determined the handbook does not contain rules for storing or mailing the type of detainee property not allowed at the facility (**Deficiency F&PP -1<sup>8</sup>**).

## HEALTH SERVICES

### MEDICAL CARE (MC)

Beaver Dam Community Hospital and the University of Wisconsin Medical Center provide all medical care beyond the scope of services available at DCJ. Mental health services are provided by a Licensed Clinical Social Worker (LCSW), a county mental health crisis intervention team (when needed), and two on-site physicians. A dentist and optometrist previously provided off-site care for detainees. However, the Health Services Administrator indicated these services were recently suspended due to ongoing coding issues originating with the vendors (**Deficiency MC-1<sup>9</sup>**).

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<sup>6</sup> "Level I Classification... may not be housed with Level 3 Detainees." See ICE NDS 2000, Standard, Detainee Classification System, Section (III)(E)(1)(a).

<sup>7</sup> "The detainee handbook's section on classification will include the following... An explanation of the classification levels, with the conditions and restrictions applicable to each." See ICE NDS 2000, Standard, Detainee Classification System, Section (III)(I)(1).

<sup>8</sup> "The detainee handbook or equivalent shall notify the detainees of the facility policies and procedures concerning personal property, including... the rules for storing or mailing property not allowed in their possession." See ICE NDS 2000, Standard, Funds and Personal Property, Section (III)(J)(3).

<sup>9</sup> "Every facility will provide its detainee population with initial medical screening, cost-effective primary medical care, and emergency care. The OIC will also arrange for specialized health care, mental health care, and hospitalization within the local community. All facilities will employ, at a minimum, a medical staff large enough to perform basic exams and treatments for all detainees. The OIC, with the cooperation of the Clinical Director, will negotiate and keep current arrangements with nearby medical facilities or health care providers to provide required health care not available within the facility. These arrangements will include securing appropriate custodial officers to transport and remain with the detainee for the duration of any off-site treatment or hospital admission." See ICE NDS 2000, Standard, Medical Care, Section (III)(A).

ODO’s review of 30 detainee medical records and 25 kiosk sick-call requests found medical personnel do not always respond to detainee requests. There was no electronic or other hand-written documentation available to verify sick call requests were received or triaged. Kiosk requests are *only* printed and placed in detainee’s medical files when the request results in a physician visit. ODO’s review of kiosk-based electronic requests dating from June 26, 2017 found 16 requests marked “pending action.” Consequently, ODO could not verify that a health care provider reviews the medical requests when submitted or that an assessment is completed to determine if and when a detainee will be seen (**Deficiency MC-2<sup>10</sup>**).

## CONCLUSION

During this inspection, ODO reviewed the facility’s compliance with 14 standards under NDS and found the facility compliant with eleven standards. ODO found 4 deficiencies in the remaining three standards. The facility initiated corrective action during the course of the inspection to resolve one of these deficiencies. While the overall number of deficiencies is low, ODO is particularly concerned with the lapses related to detainee medical care, especially considering the volume of detainees this facility takes in. ODO recommends ERO work with the facility to remedy these deficiencies as soon as possible, and in accordance with contractual obligations.

| <b>Compliance Inspection Results</b> | <b>FY 2014<br/>(NDS 2000)</b> | <b>FY 2017<br/>(NDS 2000)</b> |
|--------------------------------------|-------------------------------|-------------------------------|
| Standards Reviewed                   | 17                            | 14                            |
| Deficient Standards                  | 5                             | 3                             |
| Overall Number of Deficiencies       | 7                             | 4                             |
| Deficient Priority Components        | N/A                           | N/A                           |
| Corrective Action                    | 0                             | 1                             |

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<sup>10</sup> “The health care provider will review the request slips and determine when the detainee will be seen.” See ICE NDS 2000, Standard, Medical Care, Section (III)(F).