



**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 Saint Paul Field Office**

**Freeborn County Adult Detention Center  
Albert Lea, Minnesota**

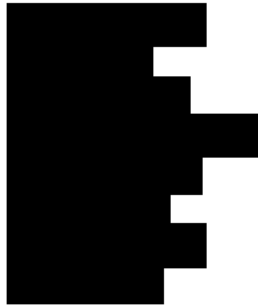
**March 7-10, 2022**

**COMPLIANCE INSPECTION**  
**of the**  
**FREEBORN COUNTY ADULT DETENTION CENTER**  
Albert Lea, Minnesota

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## COMPLIANCE INSPECTION TEAM MEMBERS



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
Observer	ODO

## 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 Freeborn County Adult Detention Center (FCADC) in Albert Lea, Minnesota, from March 7 to 10, 2022.<sup>1</sup> The facility opened in October 2004 and is owned and operated by the Freeborn County Sheriff's Office. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at FCADC 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 assigned a deportation officer to the facility. An FCADC facility administrator handles daily facility operations and manages support personnel. Summit Food Service provides food services, Advanced Correctional Healthcare provides medical care, and Turnkey Corrections provides 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>	
Average ICE Detainee Population <sup>3</sup>	
Male Detainee Population (as of March 7, 2022)	
Female Detainee Population (as of March 7, 2022)	

During its last inspection, in Fiscal Year (FY) 2021, ODO found seven deficiencies in the following areas: Admission and Release (1); Custody Classification System (1); Special Management Unit (4); and Telephone Access (1).

<sup>1</sup> This facility holds male 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 as of March 7, 2022.

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

## COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population greater than 10, 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.<sup>4</sup>

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 its 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>4</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>5,6</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	2
Custody Classification System	0
Funds and Personal Property	0
Post Orders	0
Searches of Detainees	0
Use of Force and Restraints	0
Special Management Units	0
Sexual Abuse and Assault Prevention and Intervention	0
<b>Sub-Total</b>	<b>2</b>
<b>Part 4 - Care</b>	
Food Service	0
Hunger Strikes	0
Medical Care	0
Personal Hygiene	0
Significant Self-Harm and Suicide Prevention and Intervention	0
<b>Sub-Total</b>	<b>0</b>
<b>Part 5 - Activities</b>	
Correspondence and Other Mail	1
Voluntary Work Program	0
<b>Sub-Total</b>	<b>1</b>
<b>Part 6 - Justice</b>	
Legal Rights Group Presentations	0
<b>Sub-Total</b>	<b>0</b>
<b>Part 7 - Administration and Management</b>	
Detention Files	1
Detainee Transfers	0
<b>Sub-Total</b>	<b>1</b>
<b>Total Deficiencies</b>	<b>4</b>

<sup>5</sup> For greater detail on ODO's findings, see the *Compliance Inspection Findings* section of this report.

<sup>6</sup> 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 interviewed 10 detainees, who each voluntarily agreed to participate with one detainee refusing to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. Most detainees reported satisfaction with facility services except for the concerns listed below. ODO conducted detainee interviews via video teleconference.

*Admission and Release:* Two detainees stated they did not receive their ICE National Detainee Handbook nor the facility's site-specific detainee handbook upon their admission to the facility.

- Action Taken: ODO reviewed the detainees' detention files and found no signed acknowledgement forms for receipt of the ICE National Detainee Handbook nor the facility's site-specific detainee handbook. On March 8, 2022, at the request of ODO, the facility staff issued both detainees copies of the ICE National Detainee Handbook and the facility's site-specific detainee handbook. ODO cited this as a deficiency in the *Admission and Release* and the *Detention Files* sections of the report.

*Food Service:* One detainee stated the facility does not serve him medical diet trays for his diabetes. Specifically, the detainee stated his food trays consist of the same high-sugar food items as the regular food trays.

- Action Taken: ODO interviewed the facility's ICE contract manager (CM), registered nurse (RN), food service director (FSD), and reviewed the facility's certified medical diets created by a registered dietician. The RN stated the facility identified the detainee as diabetic upon intake and prescribed an approved medical diet tray on December 12, 2021. ODO confirmed with the FSD that they served the detainee his required diet tray as prescribed. Upon review of the detainee's file, ODO found the detainee had not filed any formal grievances nor voiced any verbal complaints concerning the food items served for his medical diet. ODO found the meals prepared for the detainee population, including medical diet food items, to be diverse, well proportioned, and nutritionally adequate. On March 9, 2022, the CM instructed the detainee on submitting a grievance regarding his medical diet to the FSD or the facility's medical staff.

*Medical Care:* One detainee stated he submitted multiple dental requests regarding a hole in his tooth and the facility had not scheduled an appointment with an outside dentist.

- Action Taken: ODO interviewed the health services administrator (HSA) and reviewed the detainee's medical file. ODO found the detainee submitted a dental request regarding the hole in his tooth on February 17, 2022, and an RN evaluated the detainee on that same day and prescribed medication and mouthwash. However, the detainee refused both medical treatments because he did not want to attend the morning medication pass line. On February 24, 2022, the detainee submitted a second dental request regarding the hole in his tooth, and the RN evaluated the detainee the same day, provided pain medication as treatment, and scheduled the detainee an appointment with an outside dentist for March 14, 2022. On March 3, 2022, the detainee submitted a third dental request, and an RN evaluated him on that same day. The RN reminded the

detainee of his appointment with a dentist, scheduled for March 14, 2022. ODO followed up with the facility and found on March 22, 2022, the dentist extracted four of the detainee's teeth with no further recommendations.

*Medical Care:* One detainee stated the facility did not properly treat his diabetes. Specifically, the medical staff only gave him more insulin to control his blood sugar levels.

- Action Taken: ODO interviewed the HSA, reviewed the detainee's medical file, and found the facility's medical staff treated the detainee's type 2 diabetes, using the sliding scale insulin therapy method. This method consists of measuring the detainee's blood sugar level before a meal and providing the detainee with a precise amount of insulin based on the reading. The HSA stated the detainee had not submitted any formal grievances nor made any verbal complaints regarding the treatment for his diabetes. The HSA stated the detainee is on a medical diet and the facility's medical staff advised him to exercise control of his daily blood sugar level's spikes and dips. On March 9, 2022, the HSA met with the detainee to explain the sliding scale insulin therapy method and advised him to report any medical complaints or concerns to the facility's medical staff.

*Medical Care:* One detainee stated the facility gave him medication for arthritis instead of medication for gout.

- Action Taken: ODO interviewed the HSA, reviewed the detainee's medical file, and found the detainee submitted sick call requests regarding headache and dizziness on February 26 and 27, 2022. An RN evaluated and treated the detainee on both days for his headache and dizziness, but the detainee never mentioned his gout condition. On March 7, 2022, the facility medical provider examined the detainee for his sick call complaint of pain in his right toe, diagnosed his condition as gout, and prescribed steroids and anti-gout medication. After reviewing the detainee's medical records, ODO found no mention of the facility medical staff's diagnosis of and prescription for arthritis. On March 9, 2022, the facility's medical provider advised the detainee to report any ongoing medical issues to the facility medical staff since his medical condition now requires continuous monitoring.

## COMPLIANCE INSPECTION FINDINGS

### SECURITY

#### ADMISSION AND RELEASE (AR)

ODO interviewed the facility administrator, interviewed █ detainees and reviewed their respective detainee detention files, and found the facility did not issue the ICE National Detainee Handbook nor the facility's site-specific detainee handbook to █ out of █ detainees (**Deficiency**)



AR-26<sup>7</sup>).

ODO reviewed █████ released detainee detention files, interviewed the facility's ICE CM, and found the facility does not complete fingerprinting procedures of detainees prior to their release. Specifically, █████ out of █████ detention files did not include fingerprint cards for the released detainees, and the ICE CM stated the facility does not have fingerprinting capabilities for released detainees and ERO processes the release, transfer, or deportation of detainees at the ICE office outside of the facility (**Deficiency AR-28<sup>8</sup>**). **This is a repeat deficiency.**

## ACTIVITIES

### **CORRESPONDENCE AND OTHER MAIL (COM)**

ODO reviewed the facility's site-specific detainee handbook and found the handbook does not provide a description of the type of mail the facility may reject nor the type of mail the detainee may keep in his or her possession (**Deficiency COM-9<sup>9</sup>**).

## ADMINISTRATION AND MANAGEMENT

### **DETENTION FILES (DF)**

ODO interviewed the facility's ICE CM, reviewed █████ detainee detention files, and found none of the files contained acknowledgement forms documenting the detainees' receipts for the site-specific detainee handbook. Specifically, the ICE CM confirmed the facility does not require detainees to sign the acknowledgement forms upon issuance of the site-specific detainee handbook (**Deficiency DF-5<sup>10</sup>**).

## **CONCLUSION**

During this inspection, ODO assessed the facility's compliance with 19 standards under NDS 2019 and found the facility in compliance with 16 of those standards. ODO found four deficiencies in the remaining three standards. ODO commends facility staff members for their responsiveness during this inspection. ODO recommends ERO Saint Paul work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations. ODO has not received the uniform corrective action plan for ODO's last inspection of FCADC on August 24-

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<sup>7</sup> "Upon admission, every detainee will receive an ICE/ERO National Detainee Handbook and a facility handbook." See ICE NDS 2019, Standard, Admission and Release, Section (II)(I).

<sup>8</sup> "Staff must complete certain procedures before any detainee's release, removal, or transfer from the facility. Necessary steps include fingerprinting." See ICE NDS 2019, Standard, Admission and Release, Section (II)(J).

<sup>9</sup> "At a minimum, the notification shall specify: ...

7. A description of mail which may be rejected by the facility and which the detainee will not be permitted to keep in his or her possession."

See ICE NDS 2019, Standard, Correspondence and Other Mail, Section (II)(B)(7).

<sup>10</sup> "The detention file will generally include the following information unless the information is maintained in a retrievable electronic format: ...

h. Acknowledgment form, documenting receipt of handbook, orientation, etc."

See ICE NDS 2019, Standard, Detention Files, Section (II)(C)(2)(h).

26, 2021.

<b>Compliance Inspection Results Compared</b>	<b>FY 2021 (NDS 2019)</b>	<b>FY 2022 (NDS 2019)</b>
Standards Reviewed	14	19
Deficient Standards	4	3
Overall Number of Deficiencies	7	4
Repeat Deficiencies	5	1
Areas Of Concern	0	0
Corrective Actions	0	0
Facility Rating	N/A	Superior