

Office of Professional Responsibility

Dodge County Jail Inspection 2024-002-418

August 13–15, 2024



U.S. Immigration
and Customs
Enforcement



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
2024-002-418**

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

**Dodge County Jail
Juneau, Wisconsin**

August 13-15, 2024

FOLLOW-UP COMPLIANCE INSPECTION
of the
DODGE COUNTY JAIL
Juneau, Wisconsin

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FOLLOW-UP COMPLIANCE INSPECTION TEAM MEMBERS

[REDACTED]	Team Lead	ODO
[REDACTED]	Senior Inspections and Compliance Specialist	ODO
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[REDACTED]	Contractor	Creative Corrections
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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 follow-up compliance inspection of the Dodge County Jail (DCJ) in Juneau, Wisconsin, from August 13 to 15, 2024.¹ This inspection focused on the standards found deficient during ODO’s last inspection of DCJ from March 12 to 14, 2024. The facility opened in 2001 and is owned and operated by Dodge County. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at DCJ in 2002 under the oversight of ERO’s Field Office Director in Chicago (ERO Chicago). ICE is an authorized user of this facility under a United States Marshals Service Intergovernmental Agreement contract, which does not specify an ICE National Detention Standard (NDS), and ODO inspected to the NDS listed on the ERO Custody Management Division Authorized Facility List as of August 12, 2024. DCJ was inspected against the NDS 2019, and ODO’s assigned rating is for ERO’s informational purposes only.

[REDACTED] A facility administrator handles daily operations and manages [REDACTED] support personnel. Aramark provides food and commissary services, and Vital Core 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 August 13, 2024)	[REDACTED]
Adult Female Population (as of August 13, 2024)	[REDACTED]

During its last rated inspection, in Fiscal Year (FY) 2024, ODO found 8 deficiencies in the following areas: Admission and Release (1); Environmental Health and Safety (1); Funds and Personal Property (1); Hunger Strikes (1); Medical Care (2); Post Orders (1); and Special Management Units (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 Custody Management Division Authorized Facility List as of August 12, 2024.

³ *Ibid.*

FOLLOW-UP COMPLIANCE INSPECTION PROCESS

ODO conducts biannual oversight inspections of ICE detention facilities with an average daily population (ADP) of 10 or more detainees, and where detainees are housed for longer than 72 hours, to assess compliance with ICE National Detention Standards. In FY 2021, to meet congressional requirements, ODO began conducting follow-up inspections at all over-72-hour ICE detention facilities with an ADP of 10 or more detainees that ODO conducted a full inspection of earlier in the FY. Follow-up inspections focus on facility compliance with detention standards that directly affect detainee life, health, safety, and/or well-being, and other standards ODO found deficient during the previous rated inspection to assess the facility's corrective actions taken to address those previously cited deficiencies.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.

While follow-up inspections are intended to focus on previously identified deficiencies, ODO will conduct a complete review of several core standards, which 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 status of the first inspection's uniform corrective action plan (UCAP), and other information ODO 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 the full and follow-up inspection 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
Sub-Total	0
Part 2 - Security	
Admission and Release	1
Custody Classification System	0
Facility Security and Control	0
Funds and Personal Property	1
Post Orders	1
Use of Force and Restraints	0
Special Management Units	0
Staff-Detainee Communication	0
Sub-Total	3
Part 4 - Care	
Food Service	0
Hunger Strikes	0
Medical Care	0
Significant Self-Harm and Suicide Prevention and Intervention	0
Sub-Total	0
Part 5 - Activities	
Recreation	0
Telephone Access	0
Sub-Total	0
Part 6 - Justice	
Grievance System	1
Sub-Total	1
Total Deficiencies	4

⁵ For greater detail on ODO's findings, see the *Follow-up Compliance Inspection Findings* section of this report.

⁶ Beginning in FY 2024, ODO instituted a process of rotating all standards every other year. As a result, some standards may not be present in all inspections.

DETAINEE RELATIONS

ODO interviewed 10 detainees, who each voluntarily agreed to participate. ODO attempted to interview 20 additional detainees, but all 20 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.

FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

SECURITY

ADMISSION AND RELEASE (AR)

ODO reviewed █ detainee property files and found in █ out of █ files, facility staff did not photocopy identity documents for the files nor forward the originals to ERO Chicago (**Deficiency AR-12⁷**). **This is a repeat deficiency.**

FUNDS AND PERSONAL PROPERTY (FPP)

ODO reviewed █ detainee property files and found in █ out of █ files, facility staff did not photocopy identity documents for the files nor forward the originals to ERO Chicago (**Deficiency FPP-10⁸**). **This is a repeat deficiency.**

POST ORDERS (PO)

ODO reviewed facility PO and found facility staff did not sign and date the PO to indicate reading and understanding its provisions prior to assuming the post (**Deficiency PO-7⁹**). **This is a repeat deficiency.**

CARE

FOOD SERVICE (FS)

ODO interviewed the jail administrator, reviewed the facility's FS policy, one detainee administrative segregation file, and eight detainee disciplinary segregation files. ODO found the facility did not reduce food rations for detainees in segregation or change or use the rations as a disciplinary tool during the inspection period; however, the facility's FS policy authorized the captain of jail operations to grant the food service manager permission to prepare and serve a disciplinary detention diet to detainees in segregation twice during each 24-hour period. According to NDS 2019, the facility shall not reduce or change food rations as a disciplinary tool.

⁷ "Identity documents, such as passports, birth certificates, etc., will be copied for the detention file, and the original forwarded to ICE/ERO." See ICE NDS 2019, Standard, Admission and Release, Section (II)(C).

⁸ "Identity documents, such as passports, birth certificates, etc., shall be copied for the detention file, and the original forwarded to ICE/ERO." See ICE NDS 2019, Standard, Funds and Personal Property, Section (II)(B)(2).

⁹ "Prior to assuming a post, officers will sign and date the post order to indicate having read and understood its provisions." See ICE NDS 2019, Standard, Post Orders, Section (II)(B).

ODO cited this as an **Area of Concern**.

ODO interviewed the jail administrator, reviewed the facility’s FS policy, one detainee administrative segregation file, and eight detainee disciplinary segregation files. ODO found the facility served detainees in segregation 3 meals every day, 2 of which were hot; however, the facility’s FS policy authorized the captain of jail operations to grant the food service manager permission to prepare and serve a disciplinary detention diet twice during each 24-hour period. According NDS 2019, the facility shall provide 3 meals per day with 2 being hot meals. ODO did not find any instances where the facility carried out the actions in their policy; however, ODO cited this as an **Area of Concern**.

JUSTICE

GRIEVANCE SYSTEM (GS)

ODO reviewed the facility’s grievance log and found between April and August 2024, 22 instances where staff took between 7 and 28 business days to address the grievances (**Deficiency GS-15**¹⁰).

CONCLUSION

During this inspection, ODO assessed the facility’s compliance with 16 standards under NDS 2019 and found the facility in compliance with 12 of those standards. ODO found four deficiencies in the remaining four standards. Since DCJ’s last full inspection in March 2024, the facility’s overall compliance with NDS 2019 has trended upward. DCJ went from 7 deficient standards and 8 deficiencies in March 2024, to 4 deficient standards and 4 deficiencies during this follow-up inspection. DCJ completed its UCAP for its last inspection in September 2004; however, corrective actions may not have been implemented in time to resolve the 3 repeat deficiencies ODO cited in this inspection. ODO recommends ERO Chicago continue to work with the facility to resolve the remaining deficiencies in accordance with the contractual obligations.

Compliance Inspection Results Compared	FY 2024 Full Inspection (NDS 2019)	FY 2024 Follow-Up Inspection (NDS 2019)
Standards Reviewed	21	16
Deficient Standards	7	4
Overall Number of Deficiencies	8	4
Priority Component Deficiencies	2	0
Repeat Deficiencies	0	3
Areas Of Concern	0	2
Corrective Actions	0	0
Facility Rating	Good	N/A

¹⁰ “Barring extraordinary circumstances, grievances shall be addressed within five business days.” See ICE NDS 2019, Standard, Grievance System, Section (II)(A)(2)(a).



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