

October 29, 2020

TO: [REDACTED]  
Assistant Director for Detention Management

FROM: [REDACTED]  
Lead Compliance Inspector  
The Nakamoto Group, Inc.

SUBJECT: **Annual Inspection of the Dodge County Detention Facility**

The Nakamoto Group, Inc. performed an annual inspection for compliance with the National Detention Standards (NDS 2000 / SAAPI 2011) of the Dodge County Detention Facility in Juneau, Wisconsin during the period of October 27-29, 2020. This is an IGSA facility.

The annual inspection was performed under the guidance of [REDACTED], Lead Compliance Inspector. Team members were:

Subject Matter Field	Team Member
Detainee Rights	[REDACTED]
Security	[REDACTED]
Medical Care	[REDACTED]
Medical Care	[REDACTED]
Safety	[REDACTED]

### **Type of Inspection**

This is a scheduled annual inspection, which is performed to determine overall compliance with the NDS 2000 for Over 72-hour facilities. The facility received a rating of Meets Standards during the April 2019 annual inspection.

### **Inspection Summary**

The Dodge County Detention Facility is currently accredited by:

- The American Correctional Association (ACA) - No
- The National Commission on Correctional Health Care (NCCHC) - No
- The Joint Commission (TJC) - No
- Prison Rape Elimination Act (PREA) - No

### **Standards Compliance**

The following information is a summary of the standards that were reviewed and overall compliance that was determined as a result of the 2019 and 2020 NDS annual inspections:



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<b>2019 Annual Inspection</b>	
Meets Standards	38
Does Not Meet Standards	0
Repeat Finding	0
Not Applicable	1

<b>2020 Annual Inspection</b>	
Meets Standards	38
Does Not Meet Standards	0
Repeat Finding	0
Not Applicable	1

The inspection team identified twelve (12) deficient components in the following ten (10) standards:

Classification System – 1

Correspondence and Other Mail – 1, a repeat deficiency

Recreation – 2, one is a repeat deficiency

Religious Practices – 1

Access to Medical Care – 1, a repeat deficiency

Key and Lock Control – 1, a repeat deficiency

Population Counts – 1, a repeat deficiency

Special Management Unit (Administrative Segregation) – 1, a repeat deficiency

Special Management Unit (Disciplinary Segregation) – 2, both repeat deficiencies

Detainee Transfer Standard – 1

### **Facility Snapshot/Description**

The Dodge County Detention Facility is located in Juneau, Wisconsin, which is sixty miles northwest of Milwaukee. The facility is owned by Dodge County and operated under the jurisdiction of the Dodge County Sheriff's Office.

The remaining detainees were from Dodge and surrounding counties, U.S. Marshal's Service, and the Federal Bureau of Prisons. All detainees are adult males and females; juveniles are not housed in the facility.

The detention center is attached to the county courthouse which is part of multi-building county complex. There is no fence surrounding the detention center but its perimeter is patrolled daily by an unarmed officer on an irregular schedule. Monitored surveillance cameras offer visibility around the entire building perimeter and provide sight lines down all movement corridors and into all of the housing units and common areas. All exterior building doors are alarmed and under the controlled stewardship of master control staff. The facility is equipped with a 200+ surveillance camera network that is monitored 24 hours a day.

There are five individual housing units of which four are designed into a two-tier floor plan design. Each housing unit is divided into sections with each section containing six to sixteen one-bed cells. There is one open dormitory setting which is divided into four sections ranging in size from ten to 24 beds. There is not a fixed dedicated special management unit (SMU). Detainees in need of this status are confined in individual cells which display magnetic door signage alerting staff to the occupant's special status. The health care unit does not have bedspace. There were no ICE detainees in administrative or disciplinary segregation status during the inspection. The facility has the ability to dedicate parts of any housing unit to serve as a COVID-19 wing as need demands. There were no positive COVID-19 cases in the facility during the inspection.

Each housing unit has a common dayroom with skylights. Each dayroom is equipped with a television, fixed table/chair units for detainees to eat their meals, play games, and gather for conversation. There are



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no electronic tablets or kiosks in the housing units. All announcements and schedules are posted on day-room and common area bulletin boards. Detainees are provided daily indoor recreation. Outdoor recreation is only offered to detainees who hold a work assignment.

Inspectors interviewed twelve LEP and/or English-speaking detainees; some were with the assistance of the language line. These detainees were the only ones who expressed a willingness to speak with the inspectors, per the sergeants. All detainees reported they felt safe in the facility and had not been mistreated by staff or other detainees. All detainees reported receiving the local detainee handbook and the National Detainee Handbook during intake, and signed a receipt for them, which was on file in their detention file. Although programs and activities have been curtailed by COVID-19 conditions, the detainees were not unhappy with the opportunities and activities currently available to them.

Overall, there were no substantive complaints about any aspect of their detention with the exception of a few food complaints and minor medical concerns. Five of the detainees simply did not like the selection of food and how it was prepared; too much starch and not enough variety. These concerns were discussed with the food service director by the safety SME. The menu shows variety and has been approved by a registered dietician as meeting all U.S. RDA nutritional requirements. The meals are prepared using standard recipe cards. No further action was taken. Four of the detainees mentioned a concern with medical treatment and their satisfaction with the attention they received and the subsequent lack of relief to their alleged conditions. All of their concerns were discussed with the health services administrator by the medical SME. All detainees had been previously seen for their reported concerns and those in need of follow-up consults were already scheduled for them. Proper care for the concerns they presented have been and are being addressed. No further action was necessary.

This facility only offers outdoor recreation to detainees who hold a work assignment. All detainees receive one hour indoor/dayroom recreation daily. The interviewed detainees without an assignment registered no concerns about the lack of outdoor recreation. None of the interviewed detainees expressed concern about the facility's COVID-19 protocols in place. There were no detainees assigned to the designated COVID-19 housing section during the inspection.

An assessment of the general cleanliness of the facility could not be determined due to the remote nature of the inspection.

Detainee telephone services are provided by Inmate Calling Solutions. Medical services are provided by WellPath (formerly Correct Care Solutions). Food service is managed by Aramark. Maintenance operations are provided by Dodge County employees. ICE detainees are not charged medical co-pays.

### **Areas of Concern/Significant Observations**

There were no areas of concern or significant observations noted during the inspection. The inspection was conducted remotely, and inspectors were unable to personally observe practices and procedures within the facility. The inspection team relied upon photographs and/or videos to validate the observation of many standards.

### **Recommended Rating and Justification**

The Lead Compliance Inspector recommends that the facility receive a rating of Meets Standards unless unobserved practices and conditions are contrary to what was reported to the inspection team. The facility complies with the National Detention Standards (NDS) for Over 72-hour facilities. No (0) Standards were rated as Does Not Meet Standards and one (1) standard was Not Applicable (N/A). All remaining thirty-eight (38) standards were found to be in compliance.

### LCI Assurance Statement

The findings of compliance and noncompliance are accurately and completely documented on the G-324A Inspection Form and are supported by documentation in the inspection file. A call-in out brief was conducted. In addition to the entire Nakamoto Group, Inc. Inspection Team, the following were present:

- ICE Officials – [REDACTED]
- Facility Staff – [REDACTED]

[REDACTED]

[REDACTED], Lead Compliance Inspector

October 29, 2020

Printed Name of LCI

Date