

Office of Professional Responsibility

Chase County Detention Facility

Compliance Inspection 2025-001-044

March 11-13, 2025



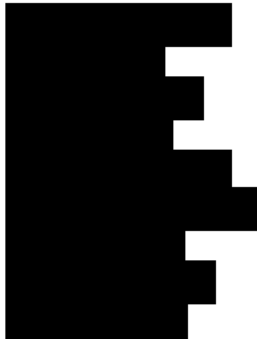
U.S. Immigration
and Customs
Enforcement

COMPLIANCE INSPECTION
of the
CHASE COUNTY DETENTION FACILITY
Cottonwood Falls, Kansas

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COMPLIANCE INSPECTION TEAM MEMBERS

	Team Lead	ODO
	Senior Inspections and Compliance Specialist	ODO
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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 compliance inspection of the Chase County Detention Facility (CCDF) in Cottonwood Falls, Kansas, from March 11 to 13, 2025.¹ The facility opened in May 1992 and is owned and operated by Chase County. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at CCDF in March 2008 under the oversight of ERO's Field Office Director in Chicago (ERO Chicago). The facility operates under the ICE National Detention Standards (NDS) 2019.

[REDACTED] A facility administrator handles daily facility operations and manages [REDACTED] support personnel. Chase County provides food services and medical care, and Victus provides commissary services 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 March 11, 2025)	[REDACTED]
Adult Female Population (as of March 11, 2025)	[REDACTED]

During its last rated inspection, in Fiscal Year (FY) 2024, ODO found 5 deficiencies in the following areas: Admission and Release (2); Facility Security and Control (2); and Food Service (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 March 10, 2025.

³ *Ibid.*

COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population of 10 or more, and where detainees are housed for over 72 hours, to assess compliance with ICE national detention standards. While these inspections focus on facility compliance with detention standards that directly affect detainee life, health, safety, and/or well-being, in FY 2024 ODO added additional standards to the scope of each full inspection to ensure ODO inspects every standard at each facility at least once every other year.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.

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.

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
Transportation by Land	0
Sub-Total	0
Part 2 - Security	
Admission and Release	0
Custody Classification System	0
Funds and Personal Property	0
Hold Rooms in Detention Facilities	0
Use of Force and Restraints	0
Special Management Units	0
Staff-Detainee Communication	0
Sexual Abuse and Assault Prevention and Intervention	0
Sub-Total	0
Part 3 - Order	
Disciplinary System	0
Sub-Total	0
Part 4 - Care	
Food Service	0
Medical Care	0
Significant Self-Harm and Suicide Prevention and Intervention	0
Terminal Illness and Death	0
Disability Identification, Assessment, and Accommodation	0
Sub-Total	0
Part 5 - Activities	
Recreation	0
Visitation	3
Sub-Total	3
Part 6 - Justice	
Detainee Handbook	0
Grievance System	0
Legal Rights Group Presentations	0
Sub-Total	0
Total Deficiencies	3

⁵ For greater detail on ODO's findings, see the *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 45 detainees, who each voluntarily agreed to participate. One detainee alleged another detainee made unwanted sexual gestures, which are documented below. Most detainees reported satisfaction with the facility services except for the concern listed below.

Sexual Abuse and Assault Prevention and Intervention: One detainee stated another detainee made a sexual gesture towards him.

- Action Taken: ODO immediately informed the detainee of mental health services available at the facility, however, the detainee declined. In addition, ODO ensured the facility educated the detainee on how to file a complaint, including the ICE sexual assault awareness postings and how to report anonymously. The detainee stated he felt safe in his housing unit, did not know the other detainee's name, nor where the detainee was located, and did not fear returning to his assigned housing unit.

ODO contacted facility leadership who began their sexual assault and abuse prevention and intervention (SAAPI) protocols. On the same date, a facility lieutenant (LT) conducted an interview with the detainee. The detainee reported that an unidentified detainee made sexually explicit comments to him after he got out of the shower. The complainant stated he had heard the other detainee make similar comments to other detainees within the housing unit and thought it must be part of his normal conversational vocabulary. The complainant advised the LT he did not feel unsafe, and did not feel the alleged perpetrator's comments were made in a way to illicit sexual arousal, intimidate, or bully him. The LT noted the facility no longer has custody of the alleged perpetrator. On March 12, 2025, the facility, in coordination with ERO Chicago, concluded the allegation did not meet the SAAPI criteria of an allegation of sexual abuse or assault and closed the incident review.

COMPLIANCE INSPECTION FINDINGS

ACTIVITIES

VISITATION (V)

ODO reviewed the CCDC visitation policy, detainee handbook, and visitor's logbook, observed posted legal visitation hours and found the following deficiencies:

- No separate visitor's log for legal visitors (**Deficiency V-7⁷**);

Corrective Action: Before the conclusion of the inspection, CCDC initiated corrective action by creating a legal visitor log. The facility administrator sent a memo to staff members informing them of the log and check-in procedures, effective March 12, 2025 (**C-1**).

- The facility allows a maximum of 3 hours for legal visits on weekends and holidays (**Deficiency V-34⁸**); and
- No written procedures for legal service providers and legal assistants to telephone the facility in advance (**Deficiency V-50⁹**).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 21 standards under NDS 2019 and found the facility in compliance with 20 of those standards. ODO found three deficiencies in the remaining standard. Since CCDF's last rated inspection in March 2024, the facility's level of compliance with NDS 2019 has trended upward. CCDF went from 3 deficient standards and 5 deficiencies in March 2024, to 1 deficient standard and 3 deficiencies during this most recent inspection. CCDF completed its uniform corrective action plan for the facility's last rated inspection in October 2024, which likely resolved ODO's previous cited deficiencies. ODO recommends ERO Chicago continue to work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations.

⁷ "The facility shall maintain a log of all general visitors, and a separate log of legal visitors as described below." *See* ICE NDS 2019, Standard, Visitation, Section (II)(C).

⁸ "The facility shall permit legal visitation seven days a week, including holidays. It shall permit legal visits for a minimum of eight hours per day on regular business days, and a minimum of four hours per day on weekends and holidays." *See* ICE NDS 2019, Standard, Visitation, Section (II)(G)(2).

⁹ "Each facility shall establish a written procedure to allow legal service providers and legal assistants to telephone the facility in advance of a visit to determine whether a particular individual is detained in that facility." *See* ICE NDS 2019, Standard, Visitation, Section (II)(G)(6).

Compliance Inspection Results Compared	FY 2024 Full Inspection (NDS 2019)	FY 2025 Full Inspection (NDS 2019)
Standards Reviewed	24	21
Deficient Standards	3	1
Overall Number of Deficiencies	5	3
Priority Component Deficiencies	1	0
Repeat Deficiencies	0	0
Areas Of Concern	0	0
Corrective Actions	1	1
Facility Rating	Good	Superior



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