



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
Compliance Inspection
2024-001-290**

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

**Chase County Detention Facility
Cottonwood Falls, Kansas**

March 12-14, 2024

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

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COMPLIANCE INSPECTION TEAM MEMBERS

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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 12 to 14, 2024.¹ The facility opened in 1992 and is owned and operated by Chase County. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at CCDF in 2008 under the oversight of ERO's Field Office Director in Chicago (ERO Chicago). The facility operates under the National Detention Standards (NDS) 2019.

[REDACTED] A facility administrator handles daily operations and manages [REDACTED] support personnel. CCDF provides food services, medical care, and commissary services at the facility. In February 2023, CCDF was audited for the Department of Homeland Security (DHS) Prison Rape Elimination Act (PREA) and was DHS PREA certified.

Capacity and Population Statistics	Quantity
ICE Bed Capacity ²	[REDACTED]
Average ICE Population ³	[REDACTED]
Adult Male Population (as of March 12, 2024)	[REDACTED]
Adult Female Population (as of March 12, 2024)	[REDACTED]

During its last full inspection, in Fiscal Year (FY) 2023, ODO found 13 deficiencies in the following areas: Environmental Health and Safety (2); Custody Classification System (3); Facility Security and Control (1); Funds and Personal Property (1); Hold Rooms in Detention Facilities (1); Special Management Unit (1); Disciplinary System (1); Disability Identification, Assessment, and Accommodation (1); and Visitation (2).

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 11, 2024.

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
Sub-Total	0
Part 2 - Security	
Admission and Release	2
Custody Classification System	0
Facility Security and Control	2
Funds and Personal Property	0
Post Orders	0
Searches of Detainees	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	4
Part 4 - Care	
Food Service	1
Hunger Strikes	0
Medical Care	0
Personal Hygiene	0
Significant Self-Harm and Suicide Prevention and Intervention	0
Sub-Total	1
Part 5 - Activities	
Correspondence and Other Mail	0
Religious Practices	0
Telephone Access	0
Voluntary Work Program	0
Sub-Total	0
Part 6 - Justice	
Grievance System	0
Law Libraries and Legal Materials	0
Sub-Total	0
Part 7 - Administration and Management	
Detention Files	0

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 Transfers	0
Sub-Total	0
Total Deficiencies	5

DETAINEE RELATIONS

ODO interviewed 32 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. All detainees reported satisfaction with facility services.

COMPLIANCE INSPECTION FINDINGS

SECURITY

ADMISSION AND RELEASE (AR)

ODO reviewed [REDACTED] electronic detainee files and found in [REDACTED] out of [REDACTED] files, no official documentation from ERO Chicago (e.g., Order to Detain, Form I-203, Order to Release, Form I-203a, or Record of Persons and Property Transferred, Form I-216) accompanied the newly arriving detainee (**Deficiency AR-18**⁷).

ODO reviewed [REDACTED] electronic detainee files and found in [REDACTED] out of [REDACTED] files, no documentation of the facility providing the detainee an orientation to the facility (**Deficiency AR-22**⁸). **This is a priority component.**

FACILITY SECURITY AND CONTROL (FSC)

ODO reviewed the facility’s visitor logbook and found the facility did not identify the purpose of each visit (**Deficiency FSC-17**⁹).

Corrective Action: During the inspection, ODO observed a revised visitor sign-in sheet, requesting the officers to note the purpose for each visit (**C-1**).

ODO observed a visiting maintenance worker (non-staff) enter CCDF and observed facility staff did not inspect the maintenance worker nor inventory and log the tools he took into the secure area (**Deficiency FSC-25**¹⁰).

⁷ “Official documentation from ICE/ERO (e.g., Form I-203, I-203a, or I-216) shall accompany each newly arriving detainee.” See ICE NDS 2019, Standard, Admission and Release, Section (II)(F).

⁸ “All facilities shall provide detainees an orientation to the facility as soon as practicable, in a language or manner detainees can understand.” See ICE NDS 2019, Standard, Admission and Release, Section (II)(H).

⁹ “Every entry in the logbook will identify the person visiting; the person or department visited; date and time of visitor’s arrival; purpose of visit; and time of departure.” See ICE NDS 2019, Standard, Facility Security and Control, Section (II)(C)(2)(b).

¹⁰ “All visitors who are not ICE/ERO officials or facility employees, including repair and maintenance workers, shall submit to an inspection and inventory of all tools, toolboxes, and equipment that could be used as weapons before entering and leaving the facility.” See ICE NDS 2019, Standard, Facility Security and Control, Section (II)(G).

CARE

FOOD SERVICE (FS)

ODO observed the facility's FS kitchen equipment and found two deep-fryers and two grills located with no automatic fuel or energy shut-off controls (**Deficiency FS-115¹¹**).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 24 standards under NDS 2019 and found the facility in compliance with 21 of those standards. ODO found five deficiencies in the remaining three standards. Since CCDF's last full inspection in March 2023, the facility's overall compliance with the ICE NDS 2019 has trended upward. CCDF went from 9 deficient standards and 13 deficiencies in March 2023 to 3 deficient standards and 5 deficiencies during this most recent full inspection. ODO received the facility's completed uniform corrective action plan for ODO's inspection in May 2023, which likely resolved the deficiencies ODO previously cited. ODO recommends ERO Chicago continue to work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations.

Compliance Inspection Results Compared	FY 2023 Full Inspection (NDS 2019)	FY 2024 Full Inspection (NDS 2019)
Standards Reviewed	20	24
Deficient Standards	9	3
Overall Number of Deficiencies	13	5
Priority Component Deficiencies	4	1
Repeat Deficiencies	1	0
Areas Of Concern	0	0
Corrective Actions	0	1
Facility Rating	Acceptable/Adequate	Good ¹²

¹¹ "All deep-fryers and grills shall be equipped with automatic fuel or energy shut-off controls." See ICE NDS 2019, Standard, Food Service, Section (II)(I)(10)(d).

¹² ODO revised their rating system at the end of FY 2023 and beginning in FY 2024, facilities rated as "Superior" will have no or very minimal deficiencies and will have no repeat or priority component deficiencies.