

Office of Professional Responsibility

Phelps County Jail

Compliance Inspection 2025-001-092

February 4-6, 2025



U.S. Immigration
and Customs
Enforcement

**COMPLIANCE INSPECTION
of the
PHELPS COUNTY JAIL
Holdrege, Nebraska**

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COMPLIANCE INSPECTION TEAM MEMBERS

[REDACTED]	Team Lead	ODO
[REDACTED]	Senior Inspections and Compliance Specialist	ODO
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[REDACTED]	Inspections and Compliance Specialist	ODO
[REDACTED]	Inspections and Compliance Specialist	ODO
[REDACTED]	Contractor	Creative Corrections
[REDACTED]	Contractor	Creative Corrections
[REDACTED]	Contractor	Creative Corrections
[REDACTED]	Contractor	Creative Corrections

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 Phelps County Jail (PCJ) in Holdrege, Nebraska, from February 4 to 6, 2025.¹ The facility opened in 2002 and is owned by Phelps County and operated by Phelps County Sheriff's Office. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at PCJ in 2002 under the oversight of ERO's Field Office Director in Saint Paul (ERO Saint Paul). ICE is an authorized user of PCJ under a United States Marshals Service Intergovernmental Agreement contract, which does not specify an ICE National Detention Standard (NDS). ODO inspected PCJ to the NDS listed on the ERO Custody Management Division Authorized Facility List as of February 3, 2025.

[REDACTED] A jail administrator handles daily facility operations and manages [REDACTED] support personnel. Summit Food Service provides food services, Advanced Correctional Healthcare provides medical care, and Keefe Commissary 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 February 4, 2025)	[REDACTED]
Adult Female Population (as of February 4, 2025)	[REDACTED]

During its last rated inspection, in Fiscal Year (FY) 2024, ODO found 4 deficiencies in the following areas: Environmental Health and Safety (3) and Food Service (1).

¹ This facility holds male and female detainees with low, medium, 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 February 3, 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	0
Sub-Total	0
Part 6 - Justice	
Detainee Handbook	0
Grievance System	0
Legal Rights Group Presentations	0
Sub-Total	0
Total Deficiencies	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 RELATIONS

ODO interviewed five detainees, who each voluntarily agreed to participate. ODO requested interviews from the remaining 30 detainees; however, all 30 detainees 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.

COMPLIANCE INSPECTION FINDINGS

ODO had no findings during this inspection.

CONCLUSION

During this inspection, ODO assessed the facility’s compliance with 21 standards under NDS 2019 and found the facility in compliance with 21 of those standards. Since PCJ’s last rated full inspection in May 2024, the facility’s compliance with the ICE NDS 2019 has trended upward. PCJ went from 2 deficient standards and 4 deficiencies in May 2024 to no deficient standards nor deficiencies during this most recent inspection. PCJ completed its uniform corrective action plan for the facility’s last rated inspection in May 2024, which likely resolved the previous deficiencies ODO cited. ODO recommends ERO Saint Paul continue to work with the facility to maintain the facility’s superior rating.

Compliance Inspection Results Compared	FY 2024 Special Review (NDS 2019)	FY 2025 Full Inspection (NDS 2019)
Standards Reviewed	10	21
Deficient Standards	2	0
Overall Number of Deficiencies	4	0
Priority Component Deficiencies	0	0
Repeat Deficiencies	0	0
Areas Of Concern	0	0
Corrective Actions	0	0
Facility Rating	Superior	Superior



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