

Office of Professional Responsibility

Elmore County Jail

Inspection 2025-003-079

August 19-20, 2025



U.S. Immigration
and Customs
Enforcement

**SPECIAL REVIEW
of the
ELMORE COUNTY JAIL
Mountain Home, Idaho**

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INSPECTION TEAM MEMBERS



Team Lead
Senior Inspections and Compliance Specialist
Contractor
Contractor
Contractor

ODO
ODO
Creative Corrections
Creative Corrections
Creative Corrections

FACILITY OVERVIEW

The U.S. Immigration and Customs Enforcement (ICE) Office of Professional Responsibility (OPR) Office of Detention Oversight (ODO) conducted a special review of the Elmore County Jail (ECJ) in Mountain Home, Idaho, from August 19 to 20, 2025..¹ The facility opened in 2007 and is owned and operated by Elmore County Sheriff's Office. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at ECJ in 2009 under the oversight of ERO's Field Office Director in Salt Lake City (ERO Salt Lake City)..² The facility is a United States Marshals Service (USMS) contracted facility where ICE is an authorized user and operates under the USMS Federal Performance Based Detention Standards (FPBDS) (May 2025)..³

[REDACTED] A commander handles daily facility operations and manages [REDACTED] support personnel. Summit provides food services, Sawtooth Correctional Health provides medical care, and Victus Commissary provides commissary services at the facility. The facility does not hold any accreditations from any outside entities. In January 2018, ECJ was audited for the Department of Justice (DOJ) Prison Rape Elimination Act (PREA) and was DOJ PREA certified.

Capacity and Population Statistics	Quantity
ICE Bed Capacity. ⁴	[REDACTED]
Average ICE Population. ⁵	[REDACTED]
Adult Male Population (as of August 19, 2025)	[REDACTED]
Adult Female Population (as of August 19, 2025)	[REDACTED]

During its last inspection in Fiscal Year (FY) 2023, ODO found 20 deficiencies in the following areas: Environmental Health and Safety (13); Food Service (3); Medical Care (2); and Suicide Prevention and Intervention (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 ECJ received a rating of "failure" on their last 2 consecutive ODO inspections and ERO stopped housing detainees at the facility on September 18, 2024. ODO conducted this special review at ERO's request to ensure ECJ is meeting required detention standards for potential future use of this facility.

³ In June 2025, all USMS contracted facilities where ICE is an authorized user changed from National Detention Standards (NDS) 2019 to USMS FPBDS (May 2025).

⁴ Data Source: ERO Custody Management Division Authorized Facility List as of August 18, 2025.

⁵ *Ibid.*

SPECIAL REVIEW PROCESS

ODO conducts routine oversight inspections of ICE detention facilities to assess and rate each facility's compliance with their contractually obligated detention standards, either annually or biennially depending on facility type. ERO stops housing detainees at a facility if the facility receives two consecutive ratings of "failure" by ODO; however, ERO may request ODO conduct a special review of the facility to assess and rate the facility's compliance with required detention standards to help determine if future use of the facility is possible.

ODO defines a "deficiency" as any violation of detention standards, policies, or operational procedures, as applicable. ODO highlights instances when the facility resolves deficiencies prior to completion of the ODO inspection as corrective actions. Where applicable, these corrective actions are annotated with "C" under the Special Review 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 a unit corrective action plan; 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.

FINDINGS BY FEDERAL PERFORMANCE BASED DETENTION STANDARDS (MAY 2025) MAJOR CATEGORIES

USMS FPBDS (May 2025) Standards Inspected ⁶	Deficiencies
A. Administration and Management	
Quality Control	0
Facility Admission and Orientation Program	0
Detainee Transfers and Releases	0
Staffing	0
Staff Training	0
Emergency Plans	0
Sub-Total	0
B. Health Care	
Health Care Administration	2
Intake Health Screening	1
Medical, Mental Health, and Dental Appraisals	2
Access to Health Care	0
Provision of Health Care	0
Incident Health Care	0
Sub-Total	5
C. Security and Control	
Use of Force/Non-Routine Application of Restraints	0
Sub-Total	0
D. Food Service	
Food Service Administration	0
Food Storage and Preparation	0
Detainee Meals and Special Diets	0
Sub-Total	0
F. Safety and Sanitation	
Fire Safety and Chemical Control	0
Sanitation and Environmental Control	0
Clothing and Bedding	0
Sub-Total	0
G. Services and Programs	
Classification and Housing	0
Grievance Program	0
Sub-Total	0
Total Deficiencies	5

⁶ For greater detail on ODO's findings, see the *Special Review Findings* section of this report.

DETAINEE RELATIONS

ODO interviewed two detainees, who each voluntarily agreed to participate. Neither of the detainees made allegations of discrimination, mistreatment, or abuse. Both detainees reported satisfaction with facility services.

SPECIAL REVIEW FINDINGS

HEALTH CARE

HEALTH CARE ADMINISTRATION (HCA)

ODO reviewed [REDACTED] medical staff certification files and found in [REDACTED] out of [REDACTED] files, no valid professional licensure and/or certification (**Deficiency HCA-1⁷**).

ODO reviewed [REDACTED] training records of health care staff and found [REDACTED] out of [REDACTED] records, no training to respond to health-related emergencies within a 4-minute response time (**Deficiency HCA-3⁸**).

INTAKE HEALTH SCREENING (IHS)

ODO reviewed [REDACTED] detainee medical records and found in [REDACTED] out of [REDACTED] records, no tuberculosis screening within 72 hours of arrival (**Deficiency IHS-4⁹**).

MEDICAL, MENTAL HEALTH, AND DENTAL APPRAISALS (MMHD)

ODO reviewed [REDACTED] detainee medical records and found in [REDACTED] out of [REDACTED] records, no comprehensive health assessment completed within 14 days of a detainee's arrival at the facility, nor a health appraisal within the previous 90 days (**Deficiency MMHD-1¹⁰**).

ODO reviewed [REDACTED] detainee medical records and found in [REDACTED] out of [REDACTED] records, no comprehensive mental health assessment completed within 14 days of a detainee's arrival at the facility, nor a health appraisal within the previous 90 days (**Deficiency MMHD-2¹¹**).

⁷ "All professional staff comply with applicable state and federal licensure, certifications, or registration requirements. Verification of current credentials are on file in the facility." *See* USMS FPBDS (May 2025), Standard, Health Care Administration, Section B.1.7.

⁸ "Correctional and health care personnel are trained to respond to health-related situations within a four-minute response time." *See* USMS FPBDS (May 2025), Standard, Health Care Administration, Section, B.1.14.

⁹ "A tuberculin skin test or radiograph is performed within 72 hours of arrival." *See* USMS FPBDS (May 2025), Standard, Intake Health Screening, Section B.2.4

¹⁰ "A comprehensive health appraisal for each detainee is completed by a qualified health care professional within 14 days after arrival at the facility. If there is documented evidence of a health appraisal within the previous 90 days, a new health appraisal is not required except as determined by the designated health authority." *See* USMS FPBDS (May 2025), Standard, Intake Health Screening, Section B.3.1.

¹¹ "Detainees referred receive a comprehensive mental health appraisal by a qualified mental health person within 14 days after arrival at the facility. If there is documented evidence of a health appraisal within the previous 90 days, a new health appraisal is not required except as determined by the designated health authority." *See* USMS FPBDS (May 2025), Standard, Intake Health Screening, Section B.3.4.

CONCLUSION

During this special review, ODO assessed the facility's compliance with 21 standards under USMS FPBDS (May 2025) and found the facility in compliance with 18 of those standards. ODO found five deficiencies in the remaining three standards. This inspection is the facility's first special review under USMS FPBDS (May 2025). Although ODO conducted a prior inspection of ECJ, ODO cannot perform a trend analysis due to a change in detention standards. During this special review, ODO rated ECJ's compliance with the USMS FPBDS (May 2025) as "Good." ODO recommends ERO SLC work with the facility to resolve the deficiencies that remain outstanding in accordance with contractual obligations.

Compliance Inspection Results Compared	FY 2023 Special Review (NDS 2000)	FY 2025 Special Review (FPBDS MAY 2025)
Standards Reviewed	10	21
Deficient Standards	4	3
Overall Number of Deficiencies	20	5
Priority Component Deficiencies	4	N/A
Repeat Deficiencies	0	N/A
Areas Of Concern	5	0
Corrective Actions	0	0
Facility Rating	Failure	Good



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