



U.S. Department of Homeland Security
U.S. Immigration and Customs Enforcement
Office of Professional Responsibility
Inspections and Detention Oversight Division
Washington, DC 20536-5501

Office of Detention Oversight
Compliance Inspection

Enforcement and Removal Operations
ERO Dallas Field Office

Eden Detention Center
Eden, Texas

February 1-5, 2021

**COMPLIANCE INSPECTION
of the
EDEN DETENTION CENTER
Eden, Texas**

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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 Eden Detention Center (EDC) in Eden, Texas, from February 1 to 5, 2021.¹ The facility reopened in 2019 and is owned and operated by CoreCivic. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at EDC in 2020 under the oversight of ERO’s Field Office Director (FOD) in Dallas (ERO Dallas). The facility operates under the National Detention Standards (NDS) 2000.

ERO has deportation officers (DO) and a part-time detention services manager assigned to the facility. The EDC warden handles daily facility operations and is supported by ██████ personnel. EDC provides medical care, Trinity provides food services, and Keefe Supply provides commissary services at the facility. The facility does not hold any accreditations from any outside entities.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity ²	660
Average ICE Detainee Population ³	████
Male Detainee Population (as of 1/25/2021)	████
Female Detainee Population (as of 1/25/2021)	N/A

During its last inspection, in Fiscal Year 2020, ODO found 26 deficiencies in the following areas: Access to Legal Material (2); Admission and Release (3); Detainee Classification System (3); Detainee Grievance Procedures (1); Food Service (1); Funds and Personal Property (4); Telephone Access (3); Environmental Health and Safety (1); Use of Force (3); Medical Care (2); Sexual Abuse and Assault Prevention and Intervention (1); and Disability Identification, Assessment, and Accommodation (2).

¹ This facility holds male detainees with low, medium-low, medium-high, and high security classification levels for periods longer than 72 hours.

² Data Source: ERO Facility List Report as of February 1, 2021.

³ *Ibid.*

COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population greater than ten, and where detainees are housed for longer than 72 hours, to assess compliance with ICE national detention standards. These inspections focus solely on facility compliance with detention standards that directly affect detainee life, health, safety, and/or well-being.⁴

ODO identifies violations of ICE detention standards, ICE policies, or operational procedures as “deficiencies.” ODO also highlights instances in which 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.

ODO was unable to conduct an on-site inspection of this facility, as a result of the COVID-19 pandemic, and instead, conducted a remote inspection of the facility. During this remote inspection, ODO interviewed facility staff, ERO field office staff, and detainees, reviewed files and detention records, and was able to assess compliance for at least 90 percent or more of the ICE national detention standards reviewed during the inspection.

⁴ ODO reviews the facility’s compliance with selected standards in their entirety.

FINDINGS BY NATIONAL DETENTION STANDARDS 2000 MAJOR CATEGORIES

NDS 2000 Standards Inspected ⁵	Deficiencies
Part 1 – Detainee Services	
Access to Legal Material	0
Admission and Release	0
Detainee Classification System	0
Detainee Grievance Procedures	0
Food Service	4
Funds and Personal Property	0
Religious Practices	0
Staff-Detainee Communication	0
Telephone Access	0
Sub-Total	4
Part 2 – Security and Control	
Emergency Plans	0
Environmental Health and Safety	1
Population Counts	0
Special Management Unit (Administrative Segregation)	0
Special Management Unit (Disciplinary Segregation)	1
Use of Force	0
Sub-Total	2
Part 3 – Health Services	
Hunger Strikes	0
Medical Care	0
Suicide Prevention and Intervention	0
Sub-Total	0
Other Standards Inspected	
NDS 2019 Standards Inspected	
Sexual Abuse and Assault Prevention and Intervention	0
Federal Performance Based Detention Standards (FPBDS) A.7 Standards Inspected	
Detainees with Disabilities	0
Sub-Total	0
Total Deficiencies	6

⁵ For greater detail on ODO’s findings, see the *Compliance Inspection Findings* section of this report.

DETAINEE RELATIONS

ODO interviewed 12 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. Most detainees reported satisfaction with facility services except for the concerns listed below. ODO conducted detainee interviews via video teleconference.

Access to Legal Material: One detainee stated there was no means to save his legal documents other than on the facility's law library computer and wanted the ability to purchase a USB flash drive through commissary.

- Action Taken: ODO reviewed the NDS 2000 Access to Legal Material standard and determined there was no requirement to provide a means for detainees to save their personally created legal material. However, ODO spoke to facility management and inquired about the possibility of selling USBs through commissary. Facility management told ODO they would speak to ERO and consider the detainee's request but did not provide any other update.

Staff-Detainee Communication: One detainee reported, his assigned DO did not answer his immigration case questions and when the DO provided information, it was incorrect.

- Action Taken: ODO spoke to the supervisory detention and deportation officer (SDDO), who agreed to review the detainee's immigration case and speak to the detainee directly on February 9, 2021. On February 24, 2021, the SDDO confirmed he met with the detainee on February 9, 2021, answered the detainee's questions, and reviewed the detainee's complaints about his assigned DO. The SDDO found the detainee submitted two complaints about the interaction and conduct of the detainee's assigned detention visitation officer, not his assigned docket officer. Additionally, the SDDO conveyed the first complaint by the detainee was dated January 27, 2021, and received by the SDDO on January 29, 2021. The second complaint by the detainee was dated January 28, 2021, and was received by the SDDO on February 10, 2021. The SDDO reviewed the detainee's complaints about the detention visitation officer and found they were valid. As a result, the SDDO submitted the detainee's complaints to the Joint Intake Center (JIC) on February 10, 2021. As of February 24, 2021, the JIC investigative results are still pending.

Medical Care: One detainee stated medical staff refused his request for stronger medication for his Post Traumatic Stress Disorder and sleeping issues.

- Action Taken: ODO interviewed the health services administrator (HSA) and found the detainee had an appointment with the psychologist on November 30, 2020, and a subsequent appointment on December 4, 2020, with the psychiatrist. The detainee was prescribed Mirtazapine for depression and Paroxetine and Prazosin for post-traumatic stress disorder and sleeping issues. Additionally, the detainee was advised to follow-up with the mental health provider if he had any issues or concerns. Since the December 4, 2020, appointment, the detainee had not requested to see the mental health provider; however, the HSA scheduled the detainee for an appointment with the psychiatrist for February 19, 2021.

Medical Care: One detainee stated he requested treatment for his eye twitching and was told there was no treatment available.

- Action Taken: The HSA informed ODO, medical staff scheduled the detainee for an ophthalmologist appointment for February 19, 2021.

COMPLIANCE INSPECTION FINDINGS

DETAINEE SERVICES

FOOD SERVICE (FS)

ODO reviewed a memorandum regarding the annual review of job descriptions and found the interim food service director did not review detainee job descriptions annually and conducted the last review on July 22, 2019 (**Deficiency FS-58⁶**).

ODO reviewed the common-fare food menu based on a 14-day cycle and found there were special food menus for only four out of the 10 required Federal holidays (**Deficiency FS-192⁷**).

ODO interviewed the interim food service director and found local inmate kitchen staff, rather than food service staff, prepared sack meals used for detainee transportation (**Deficiency FS-275⁸**).

ODO reviewed four kitchen chemical inventory records and found two out of the four records did not include accurate subtraction for chemical use (**Deficiency FS-386⁹**).

SECURITY AND CONTROL

ENVIRONMENTAL HEALTH AND SAFETY (EH&S)

ODO reviewed 14 chemical inventory logs and found seven out of the 14 logs did not correctly record the daily closing balance, resulting in inaccurate inventories (**Deficiency EHS-18¹⁰**).

SPECIAL MANAGEMENT UNIT (DISCIPLINARY SEGREGATION) (SMU DS)

ODO reviewed 12 detainee detention files and found in six out of the 12 files, the supervisory detention enforcement officer did not conduct an interview with the detainee during the weekly review (**Deficiency SMU DS-14¹¹**).

⁶ “The FSA shall review detainee job descriptions annually to ensure they are accurate and up-to-date.” *See* ICE NDS 2000, Standard, Food Service, Section (III)(B)(11).

⁷ “The common-fare menu is based on a 14-day cycle, with special menus for the 10 Federal holidays.” *See* ICE NDS 2000, Standard, Food Service, Section (III)(E)(2). **This is a repeat deficiency.**

⁸ “Members of the food service staff shall prepare sack meals for bus or air service.” *See* ICE NDS 2000, Standard, Food Service, Section (III)(G)(6)(b).

⁹ “All staff members shall know where and how much toxic, flammable, or caustic material is on hand, aware that their use must be controlled and accounted-for [REDACTED]” *See* ICE NDS 2000, Standard, Food Service, Section (III)(H)(11)(b).

¹⁰ “Accountability: Inventory records for a hazardous substance must be kept current before, during, and after each use.” *See* ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(E)(4).

¹¹ “The Supervisory Detention Enforcement Officer (SDEO) shall review the status of a detainee in disciplinary segregation every seven days...the weekly review(s) will include an interview with the detainee.” *See* ICE NDS 2000, Standard, Special Management Unit (Disciplinary Segregation), Section (III)(C)(1).

CONCLUSION

ODO reviewed the facility's compliance with 18 standards under NDS 2000, one standard under NDS 2019, and one standard under FPBDS. ODO found the facility compliant with 17 of those standards and identified six deficiencies in the remaining three standards. ODO commends facility staff for their responsiveness during this inspection. ODO recommends ERO work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations.

Compliance Inspection Results Compared	FY 2020 (NDS 2000)	FY 2021 (NDS 2000/ NDS 2019 /FPBDS)
Standards Reviewed	19	20
Deficient Standards	12	3
Overall Number of Deficiencies	26	6
Repeat Deficiencies	N/A	1
Areas of Concern	0	0
Corrective Actions	0	0