



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
2023-001-077**

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

**Eden Detention Center
Eden, Texas**

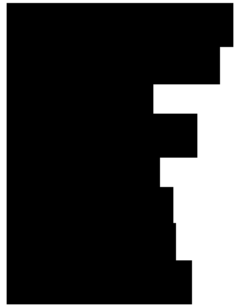
April 4-6, 2023

**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 April 4 to 6, 2023.¹ The facility opened in 2019 and is owned and operated by CoreCivic. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at EDC in 2019 under the oversight of ERO’s Field Office Director in Dallas (ERO Dallas). ICE is an authorized user of EDC under a United States Marshals Service intergovernmental agreement contract, which does not specify an ICE NDS, and ODO inspected to the NDS listed on the ERO Facility List as of April 3, 2023. EDC was inspected against the NDS 2000, and ODO’s assigned rating is for ERO’s informational purposes only.

ERO has assigned a supervisory deportation and detention officer (SDDO), part-time to the facility on Tuesdays, from 09:00 a.m. to 12:00 p.m., and deportation officers (DO), part-time on Wednesdays, from 08:00 a.m. to 12:00 p.m. A warden oversees daily facility operations and manages █████ support personnel. Trinity Services Group provides food services, EDC provides medical care, and Keefe Group provides commissary services at the facility. The facility was accredited by the American Correctional Association in January 2023 and by the National Commission on Correctional Health Care in February 2017. In August 2022, EDC was audited by 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	█████
Average ICE Population ³	█████
Adult Male Population (as of April 4, 2023)	█████
Adult Female Population (as of April 4, 2023)	█████

During its last full inspection, in Fiscal Year (FY) 2022, ODO found five deficiencies in the following area: Funds and Personal property (1) and Detention Files (4).

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

² Data Source: ERO Facility List as of April 3, 2023.

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. 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 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 2000 MAJOR CATEGORIES

NDS 2000 Standards Inspected ^{5,6}	Deficiencies
Part 1 - Detainee Services	
Admission and Release	1
Correspondence and Other Mail	0
Detainee Classification System	0
Detainee Handbook	0
Food Service	0
Funds and Personal Property	0
Recreation	0
Visitation	2
Sub-Total	3
Part 2 - Security and Control	
Contraband	0
Disciplinary Policy	0
Emergency Plans	0
Environmental Health and Safety	2
Hold Rooms in Detention Facilities	0
Key and Lock Control (Security, Accountability, and Maintenance)	0
Special Management Unit (Administrative Segregation)	0
Special Management Unit (Disciplinary Segregation)	0
Tool Control	0
Transportation (Land Transportation)	0
Use of Force	0
Sub-Total	2
Part 3 - Health Services	
Medical Care	2
Suicide Prevention and Intervention	0
Terminal Illness, Advance Directives and Death	0
Sub-Total	2
Other Standards Reviewed	
NDS 2019 Sexual Abuse and Assault Prevention and Intervention	0
Sub-Total	0
Total Deficiencies	7

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

⁶ Beginning in FY 2022, ODO instituted a process of rotating all standards on a 3-year basis. As a result, some standard components may not be present in all standards.

DETAINEE RELATIONS

ODO interviewed 40 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse; however, two detainees made allegations of verbal abuse, which are documented below. Most detainees reported satisfaction with facility services except for the concerns listed below.

Detainee Handbook: One detainee stated the facility provided him a detainee handbook in English when he needed one in Spanish. Additionally, three detainees stated the facility provided them with detainee handbooks in Spanish, but they needed the Haitian-Creole version.

- Action Taken: ODO interviewed the facility Quality Assurance Manager (QAM) and reviewed the detainees' detention files. At the request of ODO and QAM, the housing unit officer educated the detainee on how to use the tablet to access the handbook in Spanish. ODO observed the housing unit officer helping the detainee to access the Spanish edition of the handbook. On April 6, 2023, the QAM issued the three Haitian detainees the Haitian-Creole version of the handbook.

Medical Care: One detainee stated he has received no response from medical staff after submitting three requests in the past 2 weeks for chronic dizziness and kidney pain.

- Action Taken: ODO reviewed the detainee's medical file, interviewed the HSA, and confirmed medical staff examined him on March 2, 2023, for a health appraisal and for a cold. On April 2, 2023, the detainee submitted a sick call request for random dizziness, and a medical provider examined him on April 4, 2023. A medical provider examined the detainee on April 6, 2023, and noted no dizziness nor other health-related problems.

Staff-Detainee Communication: One detainee stated a facility officer was verbally abusive toward him, but could not provide specific instances, dates, nor times.

- Action Taken: Facility staff reported this allegation to EDC management on April 5, 2023, and management reported it to ERO Dallas. On April 6, 2023, an ICE supervisory detention and deportation officer (SDDO) followed up with the warden about the officer's alleged unprofessional conduct. On April 18, 2023, the facility informed ODO the investigation found no evidence to support the allegation. Facility management reassigned the officer to a dorm with no ICE detainees.

Staff-Detainee Communication: One Detainee stated a facility officer shouted obscenities at him sometime between March 31 and April 1, 2023, and claimed he did nothing to provoke the officer.

- Action Taken: Facility staff reported this allegation to EDC management on April 5, 2023, and management reported it to ERO Dallas. On April 6, 2023, the SDDO followed up with the warden about the officer's alleged unprofessional conduct. On April 18, 2023, facility staff informed ODO an investigation into the incident was in

progress. Facility management reassigned the officer to a dorm with no ICE detainees and placed him on leave pending the outcome of the investigation.

COMPLIANCE INSPECTION FINDINGS

DETAINEE SERVICES

ADMISSION AND RELEASE (AR)

ODO reviewed the EDC AR program, interviewed the receiving unit manager, discharge supervisor, and classification supervisor, reviewed 25 detainee files, and found in 8 out of 25 files, no official signature on the Order to Detain or Release (Form I-203) (**Deficiency AR-34**⁷).

VISITATION (V)

ODO reviewed EDC visitation policies and procedures and the site-specific detainee handbook, interviewed facility staff, and found the facility did not provide visitation schedule and procedures in a voice-mail recording. Specifically, ODO noted a busy tone after dialing the facility's contact number and selecting the visitation option (**Deficiency V-5**⁸).

ODO reviewed EDC visitation policies and procedures and the site-specific detainee handbook, interviewed facility staff, and found the facility did not provide a live voice or recording of the visitation hours. Specifically, ODO noted a busy tone after dialing the facility's contact number and selecting the visitation option (**Deficiency V-6**⁹).

SECURITY AND CONTROL

ENVIRONMENTAL HEALTH AND SAFETY (EHS)

ODO reviewed EDC EHS policies and procedures, EHS inspection records, the site-specific detainee handbook, and emergency generator logs, toured the facility barbershop, interviewed facility staff, and found no quarterly testing or servicing of the emergency generators by an outside contractor. Specifically, ODO found no record of an outside contractor testing nor servicing the emergency generator during the inspection period (**Deficiency EHS-80**¹⁰).

ODO reviewed EDC EHS policies and procedures, the site-specific detainee handbook, interviewed facility staff, toured the facility barbershop, and found no room specifically designated

⁷ "An order to detain or release (Form I-203 or I-203a) bearing the appropriate official signature shall accompany the newly arriving detainee." See ICE NDS 2000, Standard, Admission and Release, Section (III)(H).

⁸ "Each facility shall make the schedule and procedures available to the public, both in written form and telephonically." See ICE NDS 2000, Standard, Visitation, Section (III)(B).

⁹ "A live voice or recording shall provide telephone-callers with the hours for all categories of visitation." See ICE NDS 2000, Standard, Visitation, Section (III)(B).

¹⁰ "The emergency generator will also receive quarterly testing and servicing from an external generator-service company." See ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(O).

as the barbershop. Specifically, ODO found the barbershop in an open bay of the north detainee housing unit and accessible only by entering through the unit restroom (**Deficiency EHS-84**¹¹).

HEALTH SERVICES

MEDICAL CARE (MC)

ODO reviewed the EDC MC program, interviewed the HSA, reviewed █ detainee medical records, and found in █ out of █ records, no comprehensive health assessment within 14 days of a detainee's arrival. Specifically, a health care provider conducted a health appraisal and physical examination between 16 and 26 days after the detainees arrived at the facility. In addition, ODO found no documentation of a health appraisal within the previous 90 days nor a recommendation by the facility health care provider for a new appraisal (**Deficiency MC-23**¹²). **This is a priority component.**

ODO reviewed the EDC MC program, interviewed the HSA, reviewed █ detainee medical records, and found in █ out of █ records, no initial dental screening exam performed by a dentist or a properly trained qualified health provider within 14 days of a detainee's arrival. Specifically, the facility completed initial dental screenings between 16 and 26 days after the detainee's arrival (**Deficiency MC-50**¹³).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 22 standards under NDS 2000, 1 standard under NDS 2019, and found the facility in compliance with 19 of those standards. ODO found seven deficiencies in the remaining four standards. Since EDC's last full inspection in January 2022, the facility has trended slightly down. EDC went from two deficient standards and five deficiencies in January 2022 to four deficient standards and seven deficiencies during this most recent full inspection which includes a priority component for not completing detainee comprehensive health assessment within 14 days of a detainee's arrival. ODO did not review Visitation during the January 2022 inspection as it was not an FY 2022 core standard and this standard accounted for two out of the seven deficiencies found during this most recent inspection. ODO received a uniform corrective action plan for the full inspection in January 2022 and for the follow-up in September 2022, which likely contributed to the facility not having any repeat deficiencies. ODO recommends ERO Dallas continue to work with the facility to resolve the remaining deficiencies in accordance with contractual obligations.

¹¹ "The operation will be located in a separate room not used for any other purpose." See ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(P)(1).

¹² "The health care provider of each facility will conduct a health appraisal and physical examination on each detainee within 14 days of arrival at the facility. If there is documented evidence of a health appraisal within the previous 90 days, the facility health care provider may determine that a new appraisal is not required." See ICE NDS 2000, Standard, Medical Care, Section (III)(D).

¹³ "An initial dental screening exam should be performed within 14 days of the detainee's arrival." See ICE NDS 2000, Standard, Medical Care, Section (III)(E).

Compliance Inspection Results Compared	FY 2022 Full Inspection (NDS 2000)/ (NDS 2019)	FY 2023 Full Inspection (NDS 2000)/ (NDS 2019)
Standards Reviewed	21/1	22/1
Deficient Standards	2	4
Overall Number of Deficiencies	5	7
Priority Component Deficiencies	N/A	1
Repeat Deficiencies	0	0
Areas Of Concern	0	0
Corrective Actions	0	0
Facility Rating	Superior	Superior