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

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Office of Detention Oversight  
Compliance Inspection

Enforcement and Removal Operations  
ERO Dallas Field Office

Eden Detention Center  
Eden, Texas

August 10-13, 2020

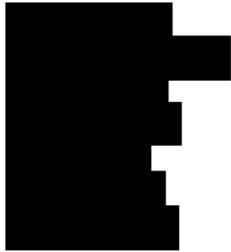
**COMPLIANCE INSPECTION  
of the  
EDEN DETENTION CENTER  
Eden, Texas**

**TABLE OF CONTENTS**

<b>FACILITY OVERVIEW</b> .....	4
<b>COMPLIANCE INSPECTION PROCESS</b> .....	5
<b>FINDINGS BY NATIONAL DETENTION STANDARDS 2000 MAJOR CATEGORIES</b> .....	6
<b>DETAINEE RELATIONS</b> .....	7
<b>COMPLIANCE INSPECTION FINDINGS</b> .....	8
<b>DETAINEE SERVICES</b> .....	8
Access to Legal Material .....	8
Admission and Release .....	8
Detainee Classification System.....	8
Detainee Grievance Procedures .....	9
Food Service .....	9
Funds and Personal Property .....	9
Telephone Access .....	10
<b>SECURITY AND CONTROL</b> .....	10
Environmental Health and Safety .....	10
Use of Force .....	10
<b>HEALTH SERVICES</b> .....	11
Medical Care .....	11
<b>PERFORMANCE BASED NATIONAL DETENTION STANDARDS 2011</b>	
Sexual Abuse and Assault Prevention and Intervention .....	11
Disability Identification, Assessment, and Accommodaton .....	12
<b>CONCLUSION</b> .....	12

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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 August 10-13, 2020.<sup>1</sup> 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 (FOD) in Dallas (ERO Dallas). The facility operates under the National Detention Standards (NDS) 2000. EDC is contractually obligated to comply with the following Performance Based NDS 2011 standards: Sexual Abuse and Assault Prevention and Intervention, and Disability Identification Accommodation and Assessment.

ERO has deportation officers 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 outside accreditations.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity <sup>2</sup>	660
Average ICE Detainee Population <sup>3</sup>	294
Male Detainee Population (as of 8/10/2020)	112
Female Detainee Population (as of 8/10/2020)	N/A

This was ODO's first inspection of EDC.

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

<sup>2</sup> Data Source: ERO Facility List Report as of July 27, 2020.

<sup>3</sup> *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.<sup>4</sup>

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.

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<sup>4</sup> ODO reviews the facility’s compliance with selected standards in their entirety.

## FINDINGS BY NATIONAL DETENTION STANDARDS 2000 MAJOR CATEGORIES

NDS 2000 Standards Inspected <sup>5</sup>	Deficiencies
<b>Part 1 – Detainee Services</b>	
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
Recreation	0
Religious Practices	0
Staff-Detainee Communication	0
Telephone Access	3
Visitation	0
<b>Sub-Total</b>	<b>17</b>
<b>Part 2 – Security and Control</b>	
Environmental Health and Safety	1
Special Management Unit (Administrative Segregation)	0
Special Management Unit (Disciplinary Segregation)	0
Use of Force	3
<b>Sub-Total</b>	<b>4</b>
<b>Part 3 – Health Services</b>	
Medical Care	2
Suicide Prevention and Intervention	0
<b>Sub-Total</b>	<b>2</b>
<b>Performance Base National Detention Standard 2011</b>	
Sexual Abuse and Assault Prevention and Intervention	1
Disability Identification, Assessment, and Accommodation	2
<b>Sub-Total</b>	<b>3</b>
<b>Total Deficiencies</b>	<b>26</b>

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

## DETAINEE RELATIONS

ODO interviewed 13 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 attempted to conduct detainee interviews via video teleconference; however, the ERO field office and facility were not able to accommodate this request due to technology issues. As such, the detainee interviews were conducted via telephone.

*Disability Identification, Assessment, and Accommodation:* One detainee stated he submitted a medical request three weeks ago for an accommodation to receive an extra mattress due to pain from a medical procedure conducted on his right shoulder. The detainee further explained a nurse evaluated him, referred him to a provider, and conducted an x-ray, but had not since responded to his medical request. The detainee also stated he was losing mobility in his shoulder and arm.

- Action Taken: ODO reviewed the detainee medical record and the disability accommodation request documents and found the physician assistant (PA) examined the detainee on July 30, 2020, and noted the detainee had a prior history of a fractured clavicle, exercised lifting heavy weights, and occasionally felt shoulder pain when he slept on his current mattress. The PA offered the detainee a prescription for Motrin, but he declined, stating he had purchased medication from the commissary. On August 6, 2020, the PA ordered an x-ray of his shoulder. The x-ray showed the hardware was intact and the screws and plates were in place. The PA then sent a “notification of diagnostic findings” form to the detainee through the secure mail system advising the detainee of the x-ray results. Since the x-ray results were normal, facility staff denied the detainee’s accommodation request, as there was no clinical indication to support issuing a second mattress. This issue was further discussed in the *Compliance Inspection Findings* section of this report.

*Telephone Access:* One detainee stated he was unable to use the free telephone platform to contact the Zimbabwe consulate. He further explained, a facility staff member provided a telephone number to the consulate but to make the call would cost \$0.21 per minute.

- Action Taken: ODO reviewed the posted copy of consulate contact numbers and found it did not contain a contact number for the Zimbabwe consulate. On August 13, 2020, ODO obtained an updated embassy and consulate list from Talton Communications, which incorporated the Zimbabwe embassy free contact number and provided it to facility staff. The facility staff replaced and reposted the updated consulate list in all units housing ICE detainees.

# COMPLIANCE INSPECTION FINDINGS

## DETAINEE SERVICES

### ACCESS TO LEGAL MATERIAL (ALM)

ODO interviewed facility staff and found they did not post law library policies and procedures (**Deficiency ALM-1**<sup>6</sup>).

ODO reviewed the facility's detainee handbook and found it did not include the law library's scheduled hours (**Deficiency ALM-2**<sup>7</sup>).

### ADMISSION AND RELEASE (A&R)

ODO interviewed facility staff and found they placed Mexican identity documents in the detainee's property rather than in the detainee's A-file (**Deficiency AR-1**<sup>8</sup>).

ODO interviewed facility staff and found ERO did not approve the facility's orientation procedures (**Deficiency AR-2**<sup>9</sup>) or release procedures (**Deficiency AR-3**<sup>10</sup>).

### DETAINEE CLASSIFICATION SYSTEM (DCS)

ODO reviewed detainee classification files and found a supervisory facility staff person signed 17 out of 17 files as the initial reviewer and supervisor. A second independent supervisor did not sign any of the 17 files nor approve the detainees' classifications (**Deficiency DCS-1**<sup>11</sup>) for completeness and accuracy of the classification level determinations and housing assignments (**Deficiency DCS-2**<sup>12</sup>).

ODO reviewed the facility's detainee handbook and found it did not explain the classification

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<sup>6</sup> "The detainee handbook or equivalent, shall provide detainees with the rules and procedures governing access to legal materials... .These policies and procedures shall also be posted in the law library along with a list of the law library's holdings." See ICE NDS 2000, Standard, Access to Legal Material, Section (III)(Q).

<sup>7</sup> "The detainee handbook or equivalent, shall provide detainees with the rules and procedures governing access to legal materials, including the following information:...

1. the scheduled hours of access to the law library..." See ICE NDS 2000, Standard, Access to Legal Material, Section (III)(Q)(2).

<sup>8</sup> "...Identity documents, such as passports, birth certificates, etc., will be inventoried, then given to a deportation officer/INS for placement in the detainee's A-file." See ICE NDS 2000, Standard, Admission and Release, Section (III)(E).

<sup>9</sup> "...In IGSA's the INS office of jurisdiction shall approve all orientation procedures." See ICE NDS 2000, Standard, Admission and Release, Section (III)(J).

<sup>10</sup> "...INS will approved [sic] the IGSA release procedures." See ICE NDS 2000, Standard, Admission and Release, Section (III)(J) \*should be (III)(L) error in NDS outline.

<sup>11</sup> "The first-line supervisor will review and approve each detainee's classification." See ICE NDS 2000, Standard, Detainee Classification System, Section (III)(A)(3).

<sup>12</sup> "In all detention facilities, a supervisor will review the intake/processing officer's classification files for accuracy and completeness. Among other things, the reviewing officer shall ensure that each detainee has been assigned to the appropriate housing unit." See ICE NDS 2000, Standard, Detainee Classification System, Section (III)(C).

levels and conditions and restrictions of each (**Deficiency DCS-3<sup>13</sup>**).

### **DETAINEE GRIEVANCE PROCEDURES (DPG)**

ODO reviewed the facility's detainee handbook and found it did not provide notice of the procedures for contacting ICE ERO to appeal the warden's final decision (**Deficiency DGP-1<sup>14</sup>**).

### **FOOD SERVICE (FS)**

ODO reviewed documentation, interviewed the assistant food service manager, and found the holiday menu schedule only included five of the 10 required federal holidays; and the facility did not have a separate common-fare menu (**Deficiency FS-1<sup>15</sup>**).

### **FUNDS AND PERSONAL PROPERTY (F&PP)**

ODO interviewed facility staff about the property inventory forms and found facility staff placed Mexican identity documents in the detainee's property rather than in the detainee's A-file (**Deficiency F&PP-1<sup>16</sup>**).

ODO reviewed EDC policy and found it did not contain written procedures for the inventory and audit of detainee funds, valuables, and personal property (**Deficiency F&PP-2<sup>17</sup>**), and applied a maximum reimbursement amount of \$100 to validated claims for lost or damaged property, contrary to the F&PP standard (**Deficiency F&PP-3<sup>18</sup>**).

ODO reviewed the facility's detainee handbook and found it did not include procedures for filing a claim for lost or damaged property (**Deficiency F&PP-4<sup>19</sup>**).

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1. <sup>13</sup> "The detainee handbook's section on classification will include the following: An explanation of the classification levels, with the conditions and restrictions applicable to each."

*See* ICE NDS 2000, Standard, Detainee Classification System, Section (III)(I)(1).

<sup>14</sup> "...The grievance section of the detainee handbook will provide notice of the following:...

4. The procedures for contacting the INS to appeal the decision of the OIC of a CDF or an IGSA facility."

*See* ICE NDS 2000, Standard, Detainee Grievance Procedure, Section (III)(G)(4).

<sup>15</sup> "Common fare is intended to accommodate detainees whose religious dietary needs cannot be met on the main line. The common-fare menu is based on a 14-day cycle, with special menus for the 10 Federal holidays. The menus must be certified as exceeding minimum daily nutritional requirements." *See* ICE NDS 2000, Standard, Food Service, Section (III)(E)(2).

<sup>16</sup> "Identity documents, such as passports, birth certificates, etc., will be held in the detainee's A-file. Upon request, staff will provide the detainee with a copy of the document, certified by an INS official to be a true and correct copy." *See* ICE NDS 2000, Standard, Funds and Personal Property, Section (III)(B)(3).

<sup>17</sup> "Each facility shall have a written procedure for inventory and audit of detainee funds, valuables, and personal property." *See* ICE NDS 2000, Standard, Funds and Personal Property, Section (III)(F).

<sup>18</sup> "...All CDFs and IGSA facilities will have and follow a policy for loss of or damage to properly receipted detainee property, as follows:

6. The [sic] will not arbitrarily impose a ceiling on the amount to be reimbursed for a validated claim."

*See* ICE NDS 2000, Standard, Funds and Personal Property, Section (III)(H)(6).

<sup>19</sup> "The detainee handbook or equivalent shall notify the detainees of facility policies and procedures concerning personal property, including:

5. The procedures for filing a claim for lost or damaged property."

*See* ICE NDS 2000, Standard, Funds and Personal Property, Section (III)(J)(5).

## TELEPHONE ACCESS (TA)

ODO interviewed facility staff and found they did not provide updated free legal service provider and consulate lists to the detainees. Although ODO provided an updated list to the facility staff who posted it in all housing units, the facility did not demonstrate how it would continue to maintain the updated list (**Deficiency TA-1**<sup>20</sup>).

ODO interviewed facility staff and found they did not deliver emergency telephone messages to detainees (**Deficiency TA-2**<sup>21</sup>).

Additionally, ODO found the facility did not have a written policy for monitoring detainee telephone calls (**Deficiency TA-3**<sup>22</sup>).

## **SECURITY AND CONTROL**

### ENVIRONMENTAL HEALTH AND SAFETY (EH&S)

ODO reviewed documentation, interviewed the safety officer, and found the facility did not conduct [REDACTED] inspections (**Deficiency EH&S-1**<sup>23</sup>).

ODO reviewed the facility fire plan and found it did not address the following: [REDACTED]

[REDACTED] fire inspections (**Deficiency EH&S-2**<sup>24</sup>).

### USE OF FORCE (UOF)

ODO reviewed two UOF audio-visual recordings and found in one out of two incidents, the cell extraction team did not wear any protective equipment (**Deficiency UOF-1**<sup>25</sup>); in one out of two

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<sup>20</sup> "...The facility shall enable all detainees to make calls to the INS-provided list of free legal service providers and consulates at no charge to the detainee or the receiving party..." See ICE NDS 2000, Standard, Telephone Access (III)(E).

<sup>21</sup> "The facility shall take and deliver telephone messages to detainees as promptly as possible. When facility staff receives an emergency telephone call for a detainee, the caller's name and telephone number will be obtained and given to the detainee as soon as possible..." See ICE NDS 2000, Standard, Telephone Access (III)(I).

<sup>22</sup> "The facility shall have a written policy on the monitoring of detainee telephone calls..." See ICE NDS 2000, Standard, Telephone Access (III)(K).

<sup>23</sup> "A qualified departmental staff member will conduct [REDACTED] fire and safety inspections; the maintenance (safety) staff will conduct [REDACTED] inspections. Written reports of the inspections will be forwarded to the OIC for review and, if necessary, corrective action determinations. The Maintenance Supervisor or designate will maintain inspection reports and records of corrective action [REDACTED]." See ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(L)(2).

<sup>24</sup> "Every institution will develop a fire prevention, control, and evacuation plan to include, among other thing [sic], the following:

- a. Control of ignition sources;
- b. Control of combustible and flammable fuel load sources;
- d. Inspection, testing, and maintenance of fire protection equipment, in accordance with NFPA codes, etc.;
- e. [REDACTED] fire inspections."

See ICE NDS 2000, Standard, Environmental Health and Safety, Section (III)(L)(3)(a-b),(d),(e).

<sup>25</sup> "...The team technique usually involves [REDACTED] or more trained staff members clothed in protective gear, including [REDACTED]..." See ICE NDS

incidents, the team leader did not complete an introduction prior to cell extraction nor a debriefing at the conclusion of the incident; and in both incidents, facility staff did not audio-visually record the detainees' medical examinations (**Deficiency UOF-2<sup>26</sup>**).

ODO reviewed EDC's written policy and found the facility did not have written procedures to govern the UOF incident review (**Deficiency UOF-3<sup>27</sup>**).

## **HEALTH SERVICES**

### **MEDICAL CARE (MC)**

ODO reviewed 12 detainee medical files and found three out of 12 files did not document use of translation services or whether the health care encounter occurred in the detainee's native language for detainees who were not proficient in English (**Deficiency MC-1<sup>28</sup>**).

ODO reviewed detainee medical files and found four out of the 12 detainees prescribed medication, did not show up for their medication 100 of 220 times. ODO found no signed refusal forms in any of the 12 detainee medical files (**Deficiency MC-2<sup>29</sup>**).

## **PERFORMANCE BASED NATIONAL DETENTION STANDARDS 2011**

### **SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION (SAAPI)**

EDC had written policy and procedures; however, the Field Office Director did not review and approve the facility's policy (**Deficiency SAAPI-1<sup>30</sup>**).

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2000, Standard, Use of Force, Section (III)(A)(4)(a).

<sup>26</sup> "Calculated use-of-force videotape will be edited as follows:

1. Introduction by Team Leader stating facility name, location, time, date, etc.; describing the incident that led to the calculated use of force; and naming the video-camera operator and other staff present.
5. Close-ups of detainee's body during medical exam, focusing on the presence /absence of injuries; staff injuries, if any described but not shown.
6. Debriefing the incident with full discussion/analysis/assessment of the incident."

*See* ICE NDS 2000, Standard, Use of Force, Section (III)(A)(4)(g)(1),(5-6).

<sup>27</sup> "Written procedures shall govern the use-of-force incident review, whether calculated or immediate, and the application of restraints. The review is to assess the reasonableness of the actions taken (force proportional to the detainee's actions), etc. IGSA will pattern their incident review process after INS. INS shall review and approve all After Action Review procedures." *See* ICE NDS 2000, Standard, Use of Force, Section (III)(K).

<sup>28</sup> "...If language difficulties prevent the health care provider/officer from sufficiently communicating with the detainee for purposes of completing the medical screening, the officer shall obtain translation assistance. Such assistance may be provided by another officer or by a professional service, such as a telephone translation service..." *See* ICE NDS 2000, Standard, Medical Care, Section (III)(D).

<sup>29</sup> "As a rule, medical treatment will not be administered against the detainee's will. The facility health care provider will obtain signed and dated consent forms from all detainees before any medical examination or treatment, except in emergency circumstances. If a detainee refuses treatment, the INS will be consulted in determining whether forced treatment will be administered, unless the situation is an emergency..." *See* ICE NDS 2000, Standard, Medical Care, Section (III)(L).

<sup>30</sup> "The facility's written policy and procedures require the review and approval of the Field Office Director." *See* ICE PBNDS 2011, Standard, Sexual Abuse and Assault Prevention, Section (V)(A).

## DISABILITY IDENTIFICATION, ASSESSMENT, AND ACCOMMODATION (DIA&A)

ODO interviewed facility staff and found a multi-disciplinary team did not convene to evaluate the following denied accommodation requests: whether a detainee had a disability, was provided interim accommodations in delayed approvals, and issued a written decision within five working days of the request (**Deficiency DIA&A-1<sup>31</sup>**).

Additionally, ODO found EDC's detainee handbook did not notify and inform detainees about the facility's disability accommodations policy, including their right to request reasonable accommodations and how to make such a request (**Deficiency DIA&A-2<sup>32</sup>**).

## CONCLUSION

During this inspection, ODO assessed the facility's compliance with 17 standards under NDS 2000 and two standards under PBNDS 2011. ODO found the facility in compliance with seven of those standards. ODO found 26 deficiencies in the remaining 12 standards. ODO commends the facility staff for their responsiveness during this inspection. ODO recommends ERO Dallas work with the facility to remedy any outstanding deficiencies as applicable and in accordance with contractual obligations.

Compliance Inspection Results Compared	FY 2019 (NDS 2000)	FY 2020 (NDS 2000)
Standards Reviewed	N/A	19
Deficient Standards	N/A	12
Overall Number of Deficiencies	N/A	26
Repeat Deficiencies	N/A	N/A
Corrective Actions	N/A	0

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<sup>31</sup> "Requests or referrals that require an evaluation by a multidisciplinary team include (1) detainees with mobility impairments; (2) detainees with communication impairments; (3) detainees whose initial requests for accommodations or assistance have been denied; (4) detainees who have filed grievances about the accommodation of their disabilities or impairments; (5) detainees whose requests are complex or best addressed by staff from more than one discipline (e.g., security, programming, medical, or mental health, etc.); and (6) detainees whose cases are otherwise determined by facility staff to be appropriate for referral to the team." See ICE PBNDS 2011, Disability Identification, Assessment and Accommodation Standard, Section (V)(F)(4).

<sup>32</sup> "The facility orientation program required by standard 2.1, "Admission and Release," and the detainee handbook required by standard 6.1, "Detainee Handbook," shall notify and inform detainees about the facility's disability accommodations policy, including their right to request reasonable accommodations and how to make such a request..." See ICE PBNDS 2011, Disability Identification, Assessment and Accommodation Standard, Section (V)(J).