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ICE Inspections
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Office of Detention Oversight
Unannounced Compliance Inspection
2024-004-272

Enforcement and Removal Operations
ERO Dallas Field Office

Eden Detention Center
Eden, Texas

February 27-29, 2024

UNANNOUNCED COMPLIANCE INSPECTION
of the
EDEN DETENTION CENTER
Eden, Texas

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UNANNOUNCED COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population (ADP) 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.

In FY 2022, ODO began conducting special reviews of under 72-hour ICE detention facilities with an ADP of 1 or more detainees and over 72-hour ICE detention facilities with an ADP of 1 to 9 detainees. Additionally, ODO began conducting unannounced inspections of ICE detention facilities, regardless of ADP of detainees, as well as reviews of ICE special/emerging detention facilities/programs. As such, these facility inspections will result in an ODO Inspection Compliance Rating; however, for facilities that are not contractually obligated to an ICE NDS, those ratings will be for ERO’s informational purposes. ODO will conduct a complete review of several core standards, in accordance with the facility’s contractually required ICE NDS or in accordance with the ICE NDS listed in the current ERO Custody Management Division Authorized Facility List for facilities that are not contractually obligated to an ICE NDS, which may include but are not limited to Medical Care/Health Care, Medical Care (Women)/Health Care (Females), Significant Self-harm and Suicide Prevention and Intervention, Hunger Strikes, Food Service, Environmental Health and Safety, Special Management Units (SMU) or Hold Rooms (if the facility does not have an SMU), Use of Force and Restraints/Use of Physical Control Measures, and Sexual Abuse and Assault Prevention and Intervention.

Upon completion of each special review or unannounced 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 uniform corrective action plans (UCAPs); 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 ^{5,6,7}	Deficiencies
Part 1 - Safety	
Environmental Health and Safety	0
Sub-Total	0
Part 2 - Security	
Admission and Release	0
Custody Classification System	0
Facility Security and Control	0
Funds and Personal Property	0
Post Orders	0
Searches of Detainees	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 4 - Care	
Food Service	0
Hunger Strikes	1
Medical Care	2
Personal Hygiene	0
Significant Self-Harm and Suicide Prevention and Intervention	3
Sub-Total	6
Part 5 - Activities	
Correspondence and Other Mail	0
Religious Practices	0
Telephone Access	0
Voluntary Work Program	0
Sub-Total	0
Part 6 - Justice	
Grievance System	1
Law Libraries and Legal Materials	0
Sub-Total	1
Part 7 - Administration and Management	

⁵ For greater detail on ODO's findings, see the *Unannounced 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.

⁷ During an unannounced inspection, ODO will review a facility's compliance with at least 10 individual standards; however, unannounced full inspections will include a review of the same standards as announced full inspections.

Detention Files	0
Detainee Transfers	0
Sub-Total	0
Total Deficiencies	7

DETAINEE RELATIONS

ODO interviewed five detainees, who each voluntarily agreed to participate.⁸ None of the detainees made allegations of discrimination, mistreatment, or abuse. Most detainees reported satisfaction with facility services except for the concern listed below.

Food Service: One detainee stated detainees received spoiled meat for breakfast on February 3, 2024, and they refused to eat it.

- Action Taken: ODO reviewed the facility’s grievances, interviewed facility staff, and found no mention or record of such an event. The detainee in question denied submitting a grievance and ODO found no evidence of such an event occurring. After interviewing facility staff, ODO found the unit manager and food service administrator sample all meals and found no spoiled food that day. ODO determined this allegation to be unsubstantiated.

UNANNOUNCED COMPLIANCE INSPECTION FINDINGS

CARE

HUNGER STRIKES (HS)

ODO reviewed the medical records of █ detainees placed on hunger strike during the inspection period and found in █ out of █ records, no documentation to confirm medical staff completed medical and mental health follow-up examinations of the detainees after the detainees ended their hunger strikes (**Deficiency HS-18⁹**).

MEDICAL CARE (MC)

ODO reviewed █ detainee medical records and found in █ out of █ records, the health care practitioner conducted the initial screening 21 hours after the detainee’s arrival to the facility (**Deficiency MC-12¹⁰**). **This is a priority component.**

⁸ Lion Bridge Language Line was unable to provide requested language interpreters, which resulted in the low number of interviews .

⁹ “After the hunger strike, medical staff shall continue to provide appropriate medical and mental health follow-up.” See ICE NDS 2019, Standard, Hunger Strikes, Section (II)(C)(8).

¹⁰ “As soon as possible, but no later than 12 hours after arrival, all detainees shall receive, by a health care practitioner or a specially trained detention officer, an initial medical, dental and mental health screening.” See ICE NDS 2019, Standard, Medical Care, Section (II)(D).

ODO reviewed █ detainee medical records and found in █ out of █ records, no tuberculin skin test or chest X-ray in addition to the symptom screening prior to placing the detainee in general population (**Deficiency MC-18¹¹**). **This is a priority component.**

SIGNIFICANT SELF-HARM AND SUICIDE PREVENTION AND INTERVENTION (SSHSPI)

ODO reviewed █ medical records and found in █ out of █ records, medical staff completed the intake screening 21 hours after the detainee’s admission (**Deficiency SSHSPI-5¹²**). **This is a priority component.**

ODO reviewed the medical record suicide watch logs of 1 detainee and found 3 instances where staff documented their monitoring checks between 18 and 19 minutes after the previous check (**Deficiency SSHSPI-21¹³**). **This is a priority component.**

ODO reviewed the medical record of one detainee placed on suicide watch during the inspection period and found no welfare checks by medical staff within 8 hours (**Deficiency SSHSPI-22¹⁴**).

JUSTICE

GRIEVANCE SYSTEM (GS)

ODO reviewed 6 grievance logs and found in 1 out of 6 grievances, a detainee submitted his grievance on September 5, 2023, but staff did not respond until September 20, 2023 (**Deficiency GS-15¹⁵**).

CONCLUSION

During this unannounced compliance inspection, ODO assessed the facility’s compliance with 24 standards under NDS 2019 and found the facility in compliance with 20 of those standards. ODO found seven deficiencies in the remaining four standards. Since EDC’s last full inspection in April 2023, the facility’s overall compliance has remained consistent. ODO found 4 deficient standards and 7 deficiencies during their April 2023 full inspection, and 4 deficient standards and 7 deficiencies during this most recent inspection. ERO provided ODO with a UCAP for ODO’s last full inspection of EDC in June 2023, which likely resolved the previous deficiencies. ODO recommends ERO Dallas continue to work with the facility to resolve the remaining deficiencies

¹¹ “All new arrivals shall receive tuberculosis (TB) screening in accordance with the most current Centers for Disease Control and Prevention (CDC) guidelines.” *See* ICE NDS 2019, Standard, Medical Care, Section (II)(D)(1).

¹² “All detainees shall receive an initial mental health screening within 12 hours of admission.” *See* ICE NDS 2019, Standard, Significant Self-harm and Suicide Prevention and Intervention, Section (II)(C).

¹³ “A mental health provider may place a detainee in a suicide-resistant cell with constant monitoring (one-to-one). The monitoring must be documented every 15 minutes or more frequently if necessary.” *See* ICE NDS 2019, Standard, Significant Self-harm and Suicide Prevention and Intervention, Section (II)(F).

¹⁴ “A mental health provider may place a detainee in a suicide-resistant cell with constant monitoring (one-to-one). A mental health provider will perform welfare checks every 8 hours.” *See* ICE NDS 2019, Standard, Significant Self-harm and Suicide Prevention and Intervention, Section (II)(F).

¹⁵ “Barring extraordinary circumstances, grievances shall be addressed within five business days.” *See* ICE NDS 2019, Standard, Grievance System, Section (II)(A)(2)(a).

in accordance with contractual obligations.

Compliance Inspection Results Compared	FY 2023 Full Inspection (NDS 2000)	FY 2024 Full Inspection (NDS 2019)
Standards Reviewed	23	24
Deficient Standards	4	4
Overall Number of Deficiencies	7	7
Priority Component Deficiencies	1	4
Repeat Deficiencies	0	0
Areas Of Concern	0	0
Corrective Actions	0	0
Facility Rating	Superior	Good ¹⁶

¹⁶ ODO revised their rating system at the end of FY 2023 and beginning in FY 2024, facilities rated as “Superior” will have no or very minimal deficiencies and will have no repeat or priority component deficiencies.