



# **OIDO**

# **Inspection**

## **Eden Detention Center**

OIDO-23-015  
November 14, 2023



OIDO is an independent  
office within the Department  
of Homeland Security.



November 14, 2023

MEMORANDUM FOR: Patrick J. Lechleitner  
Deputy Director and Senior Official Performing the Duties of  
Director  
U.S. Immigration and Customs Enforcement

FROM: David D. Gersten      DAVID D GERSTEN      Digitally signed by DAVID  
Acting Ombudsman      Date: 2023.11.14  
Office of the Immigration Detention Ombudsman      14:31:29 -05'00'

SUBJECT: OIDO-23-015  
Eden Detention Center  
December 6-8, 2022

Attached is the Office of the Immigration Detention Ombudsman's final report based on its inspection of Eden Detention Center in Eden, Texas on December 6 - 8, 2022. We reviewed the facility's performance as well as compliance with the 2000 National Detention Standards (2000 NDS) and applicable contract terms.

The report contains three recommendations aimed at improving the facility and its compliance with the 2000 NDS and contract terms. Your office concurred with two recommendations and partially concurred with one recommendation. Based on information provided in your response to the draft report, we consider two recommendations addressed and open and one recommendation addressed and closed.

Attachment





**OIDO INSPECTION  
OF  
EDEN DETENTION CENTER  
Eden, Texas**

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## **Executive Summary**

In December 2022, the Office of the Immigration Detention Ombudsman (OIDO) conducted an unannounced inspection of the Eden Detention Center in Eden, Texas. OIDO assessed the facility's performance and compliance with the U.S. Immigration and Customs Enforcement (ICE) detention standards. OIDO's inspection primarily followed-up on issues found by other oversight entities, including environmental health and safety, emergency response, medical care, and staffing.

OIDO's inspection led to several findings. The facility complied with requirements in three areas and had violations in three areas. The areas of compliance included providing detainees with translated instructions to access medical care, completing annual training on emergency plans, and making hazardous substance information accessible to staff. The facility violated standards by not having sufficient health care personnel, by not maintaining current verification of credentials for health care staff, and by not maintaining acceptable temperature ranges for running water.

OIDO made three recommendations designed to improve operations and conditions at the facility and meet ICE detention standards. ICE concurred with two recommendations and partially concurred with one recommendation.



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## Introduction

Pursuant to its statutory responsibilities, the Department of Homeland Security (DHS) Office of the Immigration Detention Ombudsman (OIDO) Detention Oversight Division conducts independent, objective, and credible inspections of Immigration and Customs Enforcement (ICE) facilities throughout the United States. During its inspections, OIDO often completes follow-up assessments to determine whether a facility has taken corrective action to resolve violations or concerns identified during a prior inspection. OIDO also reviews, examines, and makes recommendations to address concerns with or violations of contract terms regarding immigration detention facilities and services.

In December 2022, OIDO conducted an unannounced inspection of the Eden Detention Center (EDC) to review the facility's performance and determine whether it complied with the 2000 National Detention Standards (hereinafter referred to as the 2000 NDS). At the time of inspection, OIDO had one case manager assigned to the facility.

## Background

ICE Enforcement and Removal Operations (ERO) oversees the detention of noncitizens at facilities throughout the United States, which it manages directly or in conjunction with private contractors or federal, state, or local governments. ICE uses several detention standards to regulate conditions of confinement, program operations, and management expectations within the agency's detention system.<sup>1</sup>

The Eden Detention Center is a contract facility located in Eden, Texas. It is owned and operated by CoreCivic. In June 2019, EDC entered into an Intergovernmental Agreement (IGA) with the U.S. Marshals Service (USMS) to house federal detainees. The IGA defines "federal detainees" as individuals charged with federal offenses and detained while awaiting trial, individuals who have been sentenced and are awaiting designation and transport to a Bureau of Prisons facility, and individuals who are awaiting a hearing on their immigration status or deportation. The IGA further lists ICE as an authorized agency user (known as a "rider") and allots 660 beds for adult male ICE detainees. In addition, the IGA requires that detainees are housed in a manner that is consistent with federal law and the Federal Performance Based Detention Standards<sup>2</sup> and/or any other standards required by an authorized agency whose detainees are housed by the local government

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<sup>1</sup> ICE currently has four detention standards in use at adult detention facilities throughout the United States. These include: [2000 National Detention Standards](#), [2008 Performance-Based National Detention Standards](#), [2011 Performance-Based National Detention Standards](#), and [2019 National Detention Standards](#).

<sup>2</sup> The USMS [Federal Performance-Based Detention Standards](#) are based on the American Correctional Association Standards and are designed for use in reviewing non-federal facilities that house federal prisoners to ensure these facilities are safe, humane, and protect prisoners' statutory and constitutional rights.



(i.e., City of Eden) pursuant to the agreement.<sup>3</sup>

EDC began housing ICE detainees in 2020 and is under the oversight of ICE ERO's Dallas Field Office. As noted in the IGA, the facility has a maximum capacity for 660 ICE detainees and had an average daily population of 126 in fiscal year 2022.<sup>4</sup> At the time of OIDO's inspection, the facility held 128 ICE detainees.

## Objective, Scope, and Methodology

OIDO's objective was to assess the facility's performance and compliance with select standards under ICE's 2000 NDS. OIDO primarily followed-up on issues found by other oversight components, including the ICE Office of Oversight Detention (ODO) and Nakamoto Group, Inc., during their prior five inspections of the facility between 2020 and 2022. The ODO inspection reports completed in February 2021, June-July 2021, and January 2022 noted discrepancies in food service, environmental health and safety, special management units, admission and release, funds and property, medical care, and detention files. The Nakamoto Group inspections conducted during December 2020 and December 2021 found discrepancies in food service, environmental health and safety, Special Management Units, staff-detainee communications, medical care, staffing, and ICE ERO staff visitation. Ultimately, OIDO's inspection focused on issues related to environmental health and safety, emergency response, medical care, and staffing.

The inspection was executed by six personnel, including five investigators, and one medical advisor. The inspection team conducted interviews with staff and detainees, made direct observations of facility conditions and operations, reviewed logbooks, video surveillance, and site-specific policies and standard operating procedures.

## Results of Inspection

OIDO's inspection led to several findings. The facility complied with standards in the following areas reviewed: providing detainees with translated instructions to access medical care, completing annual training on emergency plans, and making hazardous substance information accessible to staff. OIDO found the facility non-compliant in three areas. The facility violated standards by not having sufficient health care personnel, by not maintaining current verification of credentials for health care staff, and by not maintaining acceptable temperature ranges for running water.

Inspection results are divided into two sections: areas of compliance and areas of non-compliance.

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<sup>3</sup> OIDO opted to use the 2000 NDS standards for compliance. Although the IGA requires that detainees be housed in a manner that is also consistent with "any other standards required by an authorized agency" and ICE is listed as an authorized agency, the IGA did not explicitly identify which ICE Detention Standards the facility was required to comply with. Previous inspections of EDC conducted by the ICE Office of Detention Oversight and Nakamoto Group, a contracted ICE inspection entity, utilized the 2000 NDS, so OIDO opted to use this detention standard also.

<sup>4</sup> See [ICE Fiscal Year 2022 Detention Statistics](#).



## **A. Areas of Compliance**

### ***The Facility Complied with Requirements to Provide Detainees with Translated Instructions to Access Medical Care***

The 2000 NDS section on detainee handbook requires every facility administrator to develop a site-specific detainee handbook to serve as an overview of and guide to the detention policies, rules, and procedures in effect at the facility. The handbook is also required to describe the services, programs, and opportunities available. Specifically, the detainee handbook must contain information for how detainees can access medical care. The handbook will be written in English and translated into Spanish and, if appropriate, into the next most prevalent language(s) among the facility's detainees.

OIDO reviewed EDC's 2022 ICE detainee population demographics by country of origin and found that the primary languages spoken by ICE detainees were Spanish and Turkish. OIDO also reviewed the facility's detainee handbook and found that it was available in English, Spanish, and Turkish. The handbook covered topics about accessing medical care, including the Prison Rape Elimination Act; disability identification, assessment, and accommodations; intake screening, access to medical services, medication management, and clinic hours; availability of acquired immunodeficiency syndrome (AIDS) / human immunodeficiency virus (HIV) education/testing; and notification that no co-pay is required for medical services.

### ***The Facility Complied with Requirements to Provide Annual Staff Training on Emergency Plans***

The 2000 NDS section on emergency plans requires the facility to provide annual training on the facility's emergency preparedness plan. OIDO reviewed copies of training plans for first aid and medical and facility safety. The first aid and medical training plan covered topics including medical referral, recognizing an emergency, reporting medical issues, first aid for common emergencies, and special needs. The facility training plan covered topics including safe work practices, fire safety, hazardous energy, and confined space. The facility's annual training log showed that 77 employees completed training in 2021, and 93 employees completed training in 2022.

### ***The Facility Complied with Requirements to Make Hazardous Substance Information Accessible to Staff***

The 2000 NDS section on environmental health and safety requires every area using hazardous substances to maintain a self-contained file of the corresponding Material Safety Data Sheets (MSDS).<sup>5</sup> The MSDS must provide vital information on individual hazardous substances, including instructions on safe handling, storage, disposal, and prohibited interactions. Staff and detainees will have ready and continuous access to the MSDS for the substances with which they

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<sup>5</sup> OSHA revised hazard communication standards in 2012 to require Safety Data Sheets (SDS) instead of MSDS. (29 CFR 1910.1200). Standards published prior to 2012, such as the 2000 NDS, will reference MSDS instead of SDS.



are working while in the work area.

OIDO observed the health services area, special housing, and F and G dorms and found that paper copies of MSDS were available in binders for staff to access. OIDO reviewed the binders and found that they had a master inventory list indicating what chemicals were available in that specific area. The proper MSDS were available in accordance with the master inventory list.

OIDO reviewed CoreCivic Policy 8-5 Control of Hazardous Chemicals/Material, which states paper copies of MSDS are not required and that they are stored electronically and updated monthly. The CoreCivic Policy also states that the MSDS Database will house all MSDS and a backup of all MSDS must be stored electronically and updated monthly.

OIDO interviewed the Learning and Development Manager, Safety Manager, Clinical Nursing Supervisor, and Food Service Manager. Each indicated that they were not aware of a computer based MSDS program. OIDO reviewed the 2021 facility safety training status report for staff and found that all staff had completed the training. The Learning and Development Manager stated that the 2022 annual training was in progress. However, when OIDO reviewed the CoreCivic Facility Safety Training Program, it found that the training did not include content about how to access the MSDS program via computer.

## **B. Areas of Non-Compliance**

### ***The Facility Did Not Have Sufficient Health Care Personnel***

The 2000 NDS section on medical care requires that the facility employ, at a minimum, a medical staff large enough to perform basic exams and treatments for all detainees. In addition, CoreCivic Policy 13-83 Staffing Levels requires that the facility have a sufficient number and type of health care professionals to meet the detainee's needs and provide a four-minute emergency response time on the premises. Adequate staffing will be based on facility size and configuration, location, and inmate/detainee type to facilitate the scope of services. Additionally, the health services administrator (HSA) will conduct a review of the annual staffing plan. OIDO reviewed various contracting documents the facility has with the USMS and ICE. None of the contracting documents had any noted minimum health care staffing requirements.

OIDO reviewed a copy of the 2022 Warden's Annual Comprehensive Staffing Analysis dated August 18, 2022, which demonstrated an approved staffing plan of 32.5 positions; of these, 16 positions were filled, yielding a 49.2 percent fill rate, or a vacancy rate of 50.8 percent. The HSA advised that CoreCivic's corporate office handled the health care staffing plan. CoreCivic Policy 13-83 states that the HSA will annually review the staffing plan to determine if the number and type of staff is adequate. However, the HSA stated that EDC staffing needs were deferred to the CoreCivic Facility Support Center (FSC) or EDC leadership. CoreCivic's FSC recently did a market analysis and added more as-needed registered nurse (RN) and licensed vocational nurse positions; however, some of these positions were already listed and vacant at EDC at the time of OIDO's inspection. Due to the vacancy rate and lack of clarity with respect to who is primarily responsible for ascertaining the adequacy of the staffing plan, OIDO finds that EDC appears to be





out of compliance with the 2000 NDS on medical care.

In addition, because ICE houses detainees at EDC through a USMS rider, health care services are staffed in accordance with the EDC staffing plan responsible for providing care to all federal detainees that may not take into consideration applicable ICE detention standards, even though the IGA specifically requires the facility to be in compliance with standards for authorized agencies such as ICE. Without the establishment of a contract between ICE and the City of Eden that obligates and outlines staffing and position requirements for all services provided to ICE detainees, a recommendation to increase staffing is dependent on the IGA with USMS and not ICE. OIDO is concerned that an ICE Contracting Officer's Representative (COR) may have limited impact on holding the facility accountable for ensuring the overall health and safety of ICE detainees, which may increase risk for ICE and detainees.

### ***The Facility Did Not Maintain Current Verification of Credentials for Health Care Personnel***

The 2000 NDS section on medical personnel requires that health care staff have a valid professional licensure and/or certification. In addition, CoreCivic Policy 13-56 Credentialing, Privileging, Licensure and Continuing Education requires that all licensed independent providers and qualified health care professionals have credentials and provide services consistent with the licensure, certification, and registration requirements in accordance with federal, state, and local laws, contract provisions, policies, procedures, and health care standards. The policy requires the HSA and human resources to maintain updated copies of all licensure/registration/certification and renewals and annual National Practitioner Database<sup>6</sup> (NPDB) inquiries for all licensed health care staff.

OIDO reviewed 20 of the 30 total credentialing files.<sup>7</sup> From the credentialing files reviewed, several documents were missing, including a credentialing file for the licensed professional counselor. For instance, one of the 20 credential files did not have an active license for the state of Texas in their current profession.<sup>8</sup> Sixteen of the 20 files did not have a copy of the employee's qualifying degree. Further, there was no primary source verification of the qualifying degree in any of the files. Only 14 of the 20 files had a current Basic Life Support (BLS) on file. Three of the 20 files did not have a signed job description. Seventeen of the 20 credential files required an annual NPDB. However, 12 of the 17 (71 percent) files did not contain any NPDB report. Of the five files that contained the NPDB report, only two of them were pulled within the last year. The other three contained an NPDB report, but they were dated greater than a year prior to the inspection. Among the five licensed independent practitioners (LIP),<sup>9</sup> three did not have current

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<sup>6</sup> The NPDB is a repository of reports that contain information on medical malpractice and certain adverse actions related to health care personnel.

<sup>7</sup> OIDO used the following selection method to create its sample: all licensed independent provider files, the HSA file, all specialty RN files, and a sample of three RNs and Licensed Practical Nurses, as well as a mental health coordinator.

<sup>8</sup> OIDO notes that it was able to verify at the time of inspection that the RN had an active nursing license; however, the current license had not been incorporated into the file.

<sup>9</sup> CoreCivic Policy 13-56 Credentialing, Privileging, Licensure and Continuing Education dated July 30, 2020, defines



Drug Enforcement Agency (DEA) license. Two files contained expired licenses and one file did not contain any DEA license. However, the facility complied with active privileging letters and peer review documentation for all five LIP files.

According to the HSA and Human Resources (HR), the CoreCivic FSC corporate credentialing/privileging committee is responsible for the oversight of the program. The FSC initiates the credentialing folder and does not provide copies to the on-site HSA. The HSA maintains compliance only with staff licensure and BLS requirements. The warden and compliance officer advised OIDO that they would develop a system to have one consolidated folder for HR and credentials. Applicable staff would have access to the specific information they were required to track and maintain.

Failure to maintain complete and current, credentialing files makes it difficult to verify if staff have the appropriate credentials and privileges required to provide quality health care for ICE detainees within state and/or federal guidelines and practice mandates.

***The Facility Did Not Maintain Acceptable Temperature Ranges for Running Water as Required by CoreCivic Policy***

The 2000 NDS section on general environmental health guidelines requires that environmental health conditions are maintained at a level that meets recognized standards of hygiene. The standards include those from the American Correctional Association (ACA), the Occupational Safety and Health Administration, the Environmental Protection Agency, the Food and Drug Administration, the National Fire Protection Association's Life Safety Code, and the National Center for Disease Control and Prevention. Although the 2000 NDS does not specifically identify thermostatic ranges for water temperature in facility showers, the ACA<sup>10</sup> (4-ALDF-4B-09) and the facility's policy, CoreCivic 7.6 Physical Plan Area Requirements, requires water for showers to be thermostatically controlled to temperatures ranging from 100 to 120 degrees Fahrenheit to ensure the safety of inmates/detainees to promote hygienic practices.

At the time of OIDO's inspection, detainees were housed in two dormitory sections in the facility. OIDO reviewed the monthly water temperature logs for the two dorms and found the water temperatures fluctuated between 98- and 106-degrees Fahrenheit between April to November 2022, outside of the facility's requirement. Six of the 36 readings fell below the minimum 100-degree temperature requirement.

Detainee self-hygiene could be negatively impacted by water temperatures that were perceived as cool by the individual, which could deter the individual from maintaining basic hygiene. Basic hygiene is an important tool in minimizing disease transmission in a detention environment.

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licensed independent practitioner as a physician, physician assistant, advanced registered nurse practitioner, dentist, psychiatrist, psychologist, optometrist, podiatrist, and licensed clinical social worker.

<sup>10</sup> See [Performance-Based Standards for Adult Local Detention Facilities, Fourth Edition](#).



## Conclusion

OIDO's inspection led to several findings. The facility complied with requirements in three areas and had violations in three areas. The areas of compliance included providing detainees with translated instructions to access medical care, completing annual training on emergency plans, and making hazardous substance information accessible to staff. The facility's deficiencies were in the following areas: not having sufficient health care personnel, not maintaining current verification of credentials for health care staff, and not maintaining acceptable temperature ranges for running water.

Complying with ICE's detention standards is essential to ensuring the health, safety, and rights of detainees. ICE must ensure that EDC complies with the detention standards and takes meaningful corrective action to address deficiencies and areas of concern.

## Recommendations

**Recommendation 1:** To promote safety, security, and detainee well-being, and more specifically, to ensure that EDC retains a medical staff large enough to perform basic exams and treatments for all detainees the ICE detention standards require, the ICE Office of Acquisitions should consider either obtaining a written acknowledgment from the City of Eden that the facility will comply with the 2019 NDS standards (at a minimum) or evaluate the establishment of a contract directly with the City of Eden for detention bedspace.

**Recommendation 2:** To promote detainee health and well-being, create and implement internal controls, training, and oversight that ensures facility health services maintain complete and current credentialing documentation for health care personnel that are readily available for review.

**Recommendation 3:** To promote environmental health and safety, create and implement controls, training, and oversight that ensure water temperatures in housing areas are maintained between 100 °F and 120 °F.

## Response from Inspected Component and OIDO Analysis

ICE officials partially concurred with one recommendation and fully concurred with two recommendations. Appendix A contains ICE management's comments in their entirety. OIDO considers two recommendations addressed and open and one recommendation addressed and closed. Below is a summary of ICE's response and OIDO's analysis thereof.

**Component Response to Recommendation 1:** Regarding having sufficient health care personnel, ICE partially concurred with OIDO's recommendation. ICE indicated ERO is working to inspect this facility under the 2019 NDS beginning Fiscal Year 2024. However, because ICE accesses beds at this facility via a rider on a USMS contract, it is unable to mandate that the facility operate under the 2019 NDS at this time.

**OIDO Analysis:** OIDO finds these actions to be responsive to the recommendations and considers



the matter addressed and open. We will close the recommendation when ICE provides a new or modified existing agreement that holds the City of Eden and the facility contractually obligated to comply with the 2019 NDS, at minimum.

**Component Response to Recommendation 2:** Regarding not maintaining current verification of credentials for health care staff, ICE concurred with OIDO's recommendation. ICE indicated that during the last Field Medical Coordinator (FMC) site visit, credentialing documentation was readily available and reviewed. The FMC will reassess again during the first quarter Fiscal Year 2024 focused site visit.

**OIDO Analysis:** OIDO finds these actions to be responsive to the recommendation and considers the matter addressed and open OIDO will close this recommendation when ICE provides documentation of the FMC's credentialing review during the first quarter Fiscal Year 2024.

**Component Response to Recommendation 3:** Regarding maintaining acceptable temperature ranges for running water, ICE concurred with OIDO's recommendation. ICE indicated that the COR would require that the contractor establish controls, training, and oversight to ensure that housing unit water temperatures are properly maintained.

**OIDO Analysis:** OIDO finds these actions to be responsive to the recommendations and considers the matter addressed and closed.



## Appendix A: Component Response


*Enforcement and Removal Operations*

U.S. Department of Homeland Security  
500 12th Street, SW  
Washington, DC 20536



U.S. Immigration  
and Customs  
Enforcement

MEMORANDUM FOR: David D. Gersten  
Acting Ombudsman  
Office of the Immigration Detention Ombudsman

FROM: Corey A. Price  COREY A PRICE  
Acting Executive Associate Director  
Enforcement and Removal Operations  
U.S. Immigration and Customs Enforcement

SUBJECT: Response to the Office of the Immigration Detention  
Ombudsman's Inspection Report, OIDO Case No. 22-001070  
Eden Detention Center, December 6-8, 2022

### Purpose

This memorandum is in response to the Department of Homeland Security's Office of the Immigration Detention Ombudsman's (OIDO) draft report, *OIDO Inspection of Eden Detention Center*. The inspection of the Eden Detention Center (EDC) in Eden, Texas, on December 6-8, 2022, reviewed the facility's performance as well as compliance with the 2000 National Detention Standards (NDS) and contract terms.

### Background

U.S. Immigration and Customs Enforcement (ICE) is a federal agency charged with enforcing the nation's immigration laws in a fair and effective manner. ICE identifies, apprehends, detains, and removes noncitizens who are amenable to removal from the United States. ICE Enforcement and Removal Operations (ERO) uses its immigration detention authority to effectuate this mission by detaining noncitizens in custody while they await the outcome of their immigration proceedings and/or removal from the United States.

ICE has important obligations under the U.S. Constitution and other federal and state laws when it determines that a noncitizen is subject to detention. ICE national detention standards ensure that detained noncitizens are treated humanely, protected from harm, provided appropriate medical and mental health care, and receive the rights and protections to which they are entitled.

ICE ensures detention facilities used to house ICE detained noncitizens do so in accordance with ICE national detention standards. These standards were developed in cooperation with ICE

[www.ice.gov](http://www.ice.gov)



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stakeholders, the American Correctional Association, and nongovernmental organizations, and were created to ensure that all noncitizens in ICE custody are treated with dignity and respect and provided appropriate care. Each detention center must meet a set of specified standards.

ICE Response to OIDO's Recommendations

**Recommendation 1:** To promote safety, security, and detainee well-being, and more specifically, to ensure that the EDC retains a medical staff large enough to perform basic exams and treatments for all detainees the ICE detention standards require, the ICE Office of Acquisitions should consider either obtaining a written acknowledgment from the City of Eden that the facility will comply with the 2019 NDS standards (at a minimum) or evaluate the establishment of a contract directly with the City of Eden for detention bedspace.

**Response:** ICE partially concurs with this recommendation. ICE accesses beds at this facility via a rider on a U.S. Marshals (USMS) contract and is unable to mandate that the facility operate under NDS 2019 at this time given the indirect nature of the contractual relationship. However, ERO is working with the ICE Office of Professional Responsibility (OPR) to inspect this facility under NDS 2019 beginning in Fiscal Year (FY) 2024. ERO has coordinated with USMS and communicated its intended inspection regimen for this facility and its expectation that the facility participate in ERO's Uniform Corrective Action Process to resolve deficiencies identified by OPR during its inspections.

**Recommendation 2:** To promote detainee health and well-being, create and implement internal controls, training, and oversight that ensures facility health services maintain complete and current credentialing documentation for health care personnel that are readily available for review.

**Response:** ICE concurs with this recommendation. During the last Field Medical Coordinator (FMC) site visit in April 2023, credentialing documentation/folders for healthcare personnel were readily available and reviewed. The FMC will reassess again during the focused site visit in FY 2024 Quarter 1 and going forward.

**Recommendation 3:** To promote environmental health and safety, create and implement controls, training, and oversight that ensure water temperatures in housing areas are maintained between 100 °F and 120 °F.

**Response:** ICE concurs with this recommendation. The Contracting Officer's Representative (COR) will require that the contractor establish controls, training, and oversight to ensure that housing unit water temperatures are properly maintained. The contractor will provide confirmation of compliance to the COR.

## **Additional Information and Copies**

To view any of our other reports,  
please visit:  
[www.dhs.gov/OIDO](http://www.dhs.gov/OIDO).

For further information or questions, please contact the Office  
of the Immigration Detention Ombudsman at:  
[detentionombudsman@hq.dhs.gov](mailto:detentionombudsman@hq.dhs.gov).

