

# PREA Audit: Subpart B Short-Term Holding Facilities Audit Report



U.S. Customs and  
Border Protection

## AUDITOR INFORMATION

<b>Name:</b>	(b) (6), (b) (7)(C)	<b>Company Name:</b>	Creative Corrections, LLC
<b>Mailing Address:</b>	(b) (6), (b) (7)(C)	<b>City, State, Zip:</b>	Beaumont, Texas 77706
<b>Email Address:</b>	(b) (6), (b) (7)(C)	<b>Telephone Number:</b>	(b) (6), (b) (7)(C)

## AGENCY INFORMATION

<b>Name of Agency:</b>	U.S. Customs and Border Protection
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## PROGRAM OFFICE

<b>Name of Program Office:</b>	Office of Field Operations
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## SECTOR OR FIELD OFFICE

<b>Name of Sector or Field Office:</b>	Seattle Field Office
<b>Name of Chief or Director:</b>	(b) (6), (b) (7)(C)
<b>PREA Field Coordinator:</b>	(b) (6), (b) (7)(C)
<b>Physical Address:</b>	9901 Pacific Highway Blaine, WA 98230
<b>Mailing Address: (if different from above)</b>	

## SHORT-TERM HOLDING FACILITY BEING AUDITED

<b>Information About the Facility</b>			
<b>Name of Facility:</b>	Peace Arch Port of Entry (POE)		
<b>Physical Address:</b>	123 2 <sup>nd</sup> Street, Blaine, WA 98230		
<b>Mailing Address: (if different from above)</b>			
<b>Telephone Number:</b>	(b) (6), (b) (7)(C)		
<b>Facility Leadership</b>			
<b>Name of Officer in Charge:</b>	(b) (6), (b) (7)(C)	<b>Title:</b>	Port Director
<b>Email Address:</b>	(b) (6), (b) (7)(C)	<b>Telephone Number:</b>	(b) (6), (b) (7)(C)

## AUDIT FINDINGS

### NARRATIVE OF AUDIT PROCESS AND DESCRIPTION OF FACILITY CHARACTERISTICS:

**Directions:** Discuss the audit process to include the date(s) of the audit, names of all individuals in attendance, audit methodology, description of the sampling of staff and detainees interviewed, description of the areas of the facility toured, and a summary of facility characteristics.

The Prison Rape Elimination Act (PREA) on-site audit of Customs and Border Protection (CBP), Office of Field Operations (OFO), Peace Arch (PA) Port of Entry (POE) was conducted on October 24, 2023. The audit was conducted by (b) (6), (b) (7)(C), Certified PREA Auditor, contracted through Creative Corrections, LLC., of Beaumont, Texas to determine compliance with the Department of Homeland Security (DHS) PREA Standards. Along with the on-site portion of the audit, the audit also involved a review of the CBP's PREA policies and procedures, agency, and facility-based documents, as well as telephonic interviews with CBP Headquarters (HQ) Subject Matter Experts (SMEs). This was the second PREA audit for Peace Arch POE, with the first audit conducted on June 18, 2019. The detainee population, at any time, may include adult males and females, family units, and unaccompanied children (UC). Detainees may be held at Peace Arch POE up to a maximum of 24 hours prior to release, at which time they may be returned to their country of origin or transferred to another facility. It should be noted that detainees held at this facility are generally processed out within a few hours. As needed, the local law enforcement agency is the Whatcom County Sheriff's Office.

The Auditor began the on-site review of the facility at 0530 on October 24, 2023, by briefly meeting with (b) (6), (b) (7)(C) to inform them of the audit format and schedule. Immediately thereafter, the Auditor utilized a private conference room for commencement of interviews with staff from all shifts: (b) (7)(E) Supervisory CBP Officer/Program Manager, (b) (6), (b) (7)(C), Seattle Field Office, was the point of contact throughout the audit.

At approximately 0830, the Auditor began the onsite review. This included a review of the primary and secondary inspection areas and hold rooms. The Peace Arch POE is a vehicle inspection facility. Inspection starts at the Sally Port. If a traveler or travelers are removed from the primary inspection area, they are generally escorted into the secondary inspection area. This area is an open space, in direct view of officers. Children and/or families traveling with juveniles are held in the (b) (7)(E) inspection area. Within the secondary inspection area (lobby), there are (b) (7)(E) wet hold rooms and (b) (7)(E) interview rooms. is a Hard Secondary Holding Area with age appropriate PREA posters (child, juvenile, and adult age ranges) clearly visible within the area. The posters are printed in both English and Spanish. Within the hard secondary area, there are (b) (7)(E) (b) (7)(E) The (b) (7)(E) large room contains (b) (7)(E) wet hold room, (b) (7)(E) dry room, and one interview room. Wet hold rooms have toileting facilities and dry hold rooms do not. There is also a multi-person holding area (seating area) in front of the (b) (7)(E). The toilets within the rooms are concealed behind a wall of approximately (b) (7)(E) to provide privacy. If needed, detainees can also be escorted to a private toilet area by staff. Shower facilities are not available at Peace Arch POE. (b) (7)(E)

The Auditor conducted an exit briefing October 24, 2023, at 5:30 p.m. In attendance for the exit briefing was (b) (6), (b) (7)(C). The Auditor advised Peace Arch POE of the initial audit findings and the next steps involved in the process.

Scope of Audit: Prior to the on-site portion of the audit, the Auditor reviewed the HQ and Local Pre-Audit Questionnaires (PAQs), HQ Responsive Documents and Data Requests, local documents, including Peace Arch POE specific documents, and HQ Participation documents. During the on-site portion of the audit, Notice of Audit postings were displayed throughout the CBP holding areas, as well as inside the administrative areas, for accessibility by officers and staff. To date, no contact has been made with the Auditor. The facility provided the Auditor with a facility roster to select local SME and officer interviews. The facility provided the Auditor a private room to conduct staff interviews. The Auditor conducted (b) (7)(E) interviews and (b) (7)(E) interviews. During the onsite phase of the audit, there were no detainees held at this facility.

Additionally, the Auditor spoke with an administrator at Peace Health St. Joseph Medical Center, the local area hospital that provides medical and forensic services to Peace Arch POE detainees, if applicable. The Auditor also utilized the dedicated phone line to and test the Department of Homeland Security (DHS) Office of Inspector General (OIG) Hotline. During the 12-month audit period, the facility reported that they did not receive any allegations of sexual abuse.

**SUMMARY OF OVERALL FINDINGS:**

**Directions:** Discuss audit findings to include a summary statement of overall findings and the number of provisions which the facility has achieved compliance at each level: Exceeds Standard, Meets Standard, and Does Not Meet Standard.

The Peace Arch Port of Entry on-site audit was completed on Tuesday, October 24, 2023, with the findings report being submitted in November 2023.

The audit process included a review of all documentation, interviews with both agency and facility-based staff, as well as on-site observations of facility procedures and holding conditions. This process has found Peace Arch in compliance with all 25 DHS Subpart B Standards.

Peace Arch POE meets 25 standards: 115.111, 115.113, 115.114, 115.115, 115.116, 115.117, 115.121, 115.122, 115.131, 115.141, 115.151, 115.154, 115.161, 115.162, 115.163, 115.164, 115.165, 115.166, 115.167, 115.176, 115.177, 115.182, and 115.186. Standard 115.118 was not applicable. Peace Arch exceeded standard 115.132.

<b>SUMMARY OF AUDIT FINDINGS</b>	
<b>Number of standards exceeded: 1</b>	
<b>Number of standards met: 24</b>	
<b>Number of standards not met: 0</b>	
<b>OVERALL DETERMINATION</b>	
<input type="checkbox"/> Exceeds Standards (Substantially Exceeds Requirements of Standards)	<input checked="" type="checkbox"/> <b>Low Risk</b>
<input checked="" type="checkbox"/> <b>Meets Standards (Substantial Compliance; Complies in All Material Ways with the Standards for the Relevant Review Period)</b>	<input type="checkbox"/> <b>Not Low Risk</b>
<input type="checkbox"/> Does Not Meet Standards (Requires Corrective Action)	

## PROVISIONS

**Directions:** In the notes, the auditor shall include the evidence relied upon in making the compliance or non-compliance determination for each provision of the standard, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Corrective Action Plan Final Determination, accompanied by information on specific corrective actions taken by the facility. Failure to comply with any part of a standard provision shall result in a finding of "Does not meet Standard" for that entire provision unless that part is specifically designated as Not Applicable. For any provision identified as Not Applicable, provide an explanation for the reasoning. If additional space for notes is needed, please utilize space provided on the last page.

### §115.111(a) – Zero tolerance of sexual abuse; Prevention of Sexual Assault Coordinator.

- Exceeded Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does not meet Standard (requires corrective action)

#### Notes:

Based on a review and analysis of the available evidence, the Auditor finds Peace Arch POE meets the standard requiring zero tolerance for sexual abuse and its subsequent provisions.

(a): The agency is required to have a written policy mandating zero tolerance toward all forms of sexual abuse and outlining the agency's approach to preventing, detecting, and responding to such conduct. On March 12, 2014, the Commissioner informed all staff through email communicating the adoption of the final rule of the PREA Standards and the Agency's commitment to protect the safety of individuals in CBP holding facilities. The memorandum further stated CBP is committed to providing an atmosphere of zero tolerance of sexual abuse and/or sexual assault in every CBP holding facility. In response to the Agency's commitment, CBP developed Directive 2130-030, Prevention, Detection, and Response to Sexual Abuse and/or Sexual Assault in CBP Holding Facilities, dated January 19, 2018, establishing procedures for zero tolerance within CBP holding facilities. The agency designated an upper-level, agency wide Prevention of Sexual Abuse (PSA) Coordinator and a Deputy PSA Coordinator who have sufficient time and authority to develop, implement, and oversee Agency efforts to comply with the PREA Standards for CBP Holding Facilities. In an interview with the HQ Privacy and Diversity Office (PDO) PSA Coordinator, he indicated that his position is within the upper hierarchy of the agency and has sufficient time and authority to command the responsibility. Interviews with local SMEs indicated that the zero-tolerance policy on sexual abuse is communicated to staff through daily musters, emails, and web-based courses that are provided biannually. Local SMEs stated that the facility implemented the agency's zero tolerance policy by following CBP directives, communicating during daily musters, training, and emails. The Auditor conducted interviews with (b) (7)(E) that indicated that they were familiar with the contents of the agency's zero tolerance policy. Officers stated that they have the responsibility of preventing, detecting, and responding to sexual abuse by ensuring the zero-tolerance policy is followed, by assessing detainees' risk of being sexually abused and/or a history of sexual abusiveness, and responding to allegations of abuse.

### §115.113(a) through (c) – Detainee supervision and monitoring.

- Exceeded Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does not meet Standard (requires corrective action)

#### Notes:

Based on a review and analysis of the available evidence, the Auditor finds that Peace Arch POE meets the standard requiring detainee supervision (b) (7)(E). The standard requires Peace Arch to maintain sufficient supervision of detainees, through appropriate staffing levels, as well as (b) (7)(E), to protect detainees against sexual abuse and its subsequent provisions.

(a): CBP National Standards on Transport, Escort, Detention, and Search (TEDS), dated October 2015 require CBP officers to closely supervise hold rooms when in use. During the on-site inspection, the Auditor reviewed the (b) (7)(E) [REDACTED] Each inspection area (b) (7)(E) [REDACTED]



facility. Interviews with the local SMEs verified the staffing plan provides for ample officer coverage and supervision of detainees. The plan provides for full coverage for all ports of entry within the Seattle Field Office area of operations.

(b)(c): CBP Directive 2130-030 and a memorandum dated August 12, 2014, from the Acting Assistant Commissioner, was sent out to all Directors, Office of Field Operations supplementing the Agency's Standard to Prevent, Detect, and Respond to Sexual Assault in CBP holding facilities. The supplement includes management requirements of developing and documenting comprehensive detainee supervision guidelines, which has been accomplished through TEDS. The Directive further requires Peace Arch to review the detainee supervision guidelines at least annually and consider its applicability based on the physical layout, the composition of the detainee population, the prevalence of substantiated and unsubstantiated incidents of sexual abuse, the findings and recommendations of sexual abuse incident review reports, and any other relevant factors, including but not limited to the length of time detainees spend in agency custody. Peace Arch conducted a review of the detainee supervision guidelines on December 21, 2022. The Auditor reviewed the assessment conducted by management at the facility. The report is comprehensive and provides detailed information. Based on the review of the provided documentation, a determination was made that the facility maintains sufficient supervision of detainees. Interviews with local SMEs provided that management has oversight of daily operations to ensure high risk subjects are accommodated and separated from other detainees. This is accomplished through documentation review, instructions to officers, and (b) (7)(E) of common areas.

**§115.114(a) and (b) – Juvenile and family detainees.**

- Exceeded Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does not meet Standard (requires corrective action)
- Not Applicable (provide explanation in notes):

**Notes:**

Based on a review and analysis of the available evidence, the Auditor finds that Peace Arch POE meets the standard requiring juvenile and family detainees to be separated from the general population and its subsequent provisions.

(a): The standard requires Peace Arch to ensure juveniles are detained in the least restrictive setting appropriate to the juvenile's age and special needs, while still maintaining the welfare of the juvenile and the overall detainee population. CBP TEDS and a memorandum from the Acting Assistant Commissioner of Field Operations issued on August 12, 2014, to the Directors of Field Operations, Director of Preclearance Operations, and the Office of Field Operations referencing the Standards to Prevent, Detect, and Respond to Sexual Abuse and Assault in CBP/OFO Hold Room Facilities stating that juveniles are to be held in the least restrictive setting appropriate to the juveniles age and special needs, provided that the setting is consistent with the need to protect the juvenile's well-being and that of others as well as with any other laws, regulations, or legal requirements. In addition to the CBP TEDS and memorandum, Peace Arch POE's Meeting Summary and After-Action Report, Review of Detainee Supervision Guidelines, provides that "Each holding facility is to maintain sufficient supervision of detainees, including through appropriate staffing levels and, where applicable, (b) (7)(E), to protect detainees against sexual abuse." When asked, officers were very aware of the agency's policy to maintain a safe and positive environment for juveniles. Additionally, when occupied by juveniles, officers stated that juveniles within the facility must be maintained in the least restrictive means as possible. They also stated the lobby area would be the only area to hold juveniles and families. Officers assigned to monitor juveniles in the area are the same gender as the gender of juveniles within it. Local SME interviews indicated there were no juvenile detainees being held during the onsite audit.

(b): Interviews with local SMEs and officers and indicated that UC are held separately from adults. However, juveniles may remain with a non-parental adult family member if their relationship has been vetted through contact with parents or other means. Officer interviews thoroughly explained the vetting process. Officers stated the appropriate government agencies within countries of origin are contacted to ensure presented documents are legitimately authorized by the persons possessing them.

**§115.115(b) through (f) – Limits to cross-gender viewing and searches.**

- Exceeded Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does not meet Standard (requires corrective action)

**Notes:**

Based on a review and analysis of the available evidence, the Auditor finds that Peace Arch POE meets the standard, requiring limits to cross-gender viewing and searches, and its subsequent provisions.

(b)(c): CBP TEDS restricts the use of cross-gender visual body (partial) searches or cross-gender visual body cavity searches except in exigent circumstances, including consideration of officer safety or when performed by medical practitioners. In an exigent circumstance, if an opposite gender staff member must perform a visual body (partial) search or be present at a medical examination, it is mandatory that two staff members are present. Interviews with local SMEs and officers indicated that requirements were iterated through musters, emails, and training. Additionally, interviews with local SMEs and the officers confirmed their knowledge of policy, as well as the extensive documentation required should an exigent circumstance result in a cross-gender visual body search. Interviews with staff indicated that staff were aware of the need to conduct all searches in a professional manner appropriate to the gender of the person being searched. During the audit period, Peace Arch indicated that it has not conducted any visual body searches or visual body cavity searches of detainees during the 12-month audit period. The local SMEs indicated that the facility does not conduct visual body or visual body cavity searches of juveniles but, if needed, juveniles would be referred to a medical practitioner for a search to be conducted.

(d): CBP TEDS requires CBP facilities to allow detainees to shower, perform bodily functions, and change clothing without being viewed by staff of the opposite gender, except in exigent circumstances or when such viewing is incidental to routine hold room checks. There are no shower facilities at Peace Arch POE. When taken into custody, detainees are placed in a single occupancy hold room, if necessary. If staff of the opposite gender enter those hold rooms, policy requires said staff to knock and announce their presence before entering. Upon inspection and review of the facility, Peace Arch POE does not have showering facilities for detainees. Interviews with local SMEs and officers indicated that staff were aware of the requirement. Interviews confirmed that, even when entering hold rooms containing detainees of the same gender as themselves, the officers would still knock and announce their presence prior to entering. During the on-site inspection, the Auditor noted that (b) (7)(E) interviewed CBP officers stated that regardless of whether a hold room contained a toilet, if a detainee requested to utilize a private toilet room, the detainee was subsequently escorted to a bathroom area by an officer of the same gender. All facilities were reviewed and observed. (b) (7)(E) When occupied by detainees, these areas are secured by staff of the same gender as the detainee. (b) (7)(E).

(e): CBP Directive 2130-030 prohibits staff from searching or examining detainees for the sole purpose of determining the person's gender. Local SME and officer interviews indicated that all were aware that searching detainees to determine their gender was prohibited. Staff also indicated that if the gender of an individual was unknown, they would simply ask the individual how that person identified, or they would check provided documentation and would address them accordingly.

(f): CBP TEDS outlines the requirements of all pat-down searches. Local SME and Officer interviews indicated that officers have been trained in proper search procedures. The interviews provided that the search would be conducted by the same gender, gender identity, or declared gender as the detainee being searched. If a pat-down search of a transgender person was necessary, they noted that the search would be performed in a manner appropriate for the declared gender of the detainee being searched. The local SMEs indicated that all partial body and visual body searches (if authorized), are electronically documented in their electronic record system. Peace Arch POE staff stated there were no detainees who identified as transgender detained in the previous 12 month. Interviews with staff concluded they had received pat-down search training.

**§115.116(a) through (c) – Accommodating detainees with disabilities and detainees who are limited English proficient.**

- Exceeded Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does not meet Standard (requires corrective action)

**Notes:**

Based on the review and analysis of all available evidence, the Auditor finds Peace Arch POE meets the standard, requiring accommodation to detainees with disabilities and detainees who are limited English proficient and searches, and its subsequent provisions.

(a)(b): CBP Directive No. 2130-033, Nondiscrimination for Individuals with Disabilities in CBP-Conducted Services, Programs, and Activities (Non-Employment), dated July 8, 2021, clearly states it is CBP's policy not to discriminate against members of the public because of disability (hearing impaired, blind or low vision, or those who have intellectual, psychiatric, speech disabilities or Limited English Proficient) and for all persons to have access to CBP's efforts to prevent, detect, and respond to sexual abuse and/or sexual assault. All persons are afforded an equal opportunity to participate in, or benefit from, CBP-conducted services, programs, and activities. CBP Directive 2130-030 further directs staff to provide reasonable modifications to detainees who have disabilities (hearing impaired, blind, or low vision, or those who have intellectual, psychiatric, or speech disabilities) for said persons to have access to CBP's efforts to prevent, detect, and respond to sexual abuse and/or sexual assault. During the on-site inspection, the Auditor verified phone numbers and web addresses for providers of accommodation services were readily accessible and observed. Agency policy requires that any written materials related to sexual abuse should be provided in formats that ensure effective communication with detainees with disabilities. During the on-site portion of the audit, the Auditor verified that all sexual abuse awareness posters were provided in English and Spanish and were placed where noticeable to all detainees. Interviews with local SMEs and officers concluded that they were aware of the zero-tolerance policies, posters, and other resources available that they could use to assist them in relaying Peace Arch POE's zero-tolerance policies. Officers indicated that they were aware of video remote sign-language translators, language lines, and the list of CBP staff who speak multiple languages. Staff acknowledged that they would not utilize detainees to translate an allegation of sexual abuse. There were no detainees available to interview during the onsite review. Interviews with Staff indicated there has not been a need during the previous 12 months to utilize the translation services as there were several staff who spoke the most common languages that the facility frequently has contact with.

(c): CBP TEDS requires that when investigating allegations of sexual abuse, interpretation services may not be provided by another detainee, unless the reporting detainee expresses a preference for another detainee to provide interpretation services, and the supervisor determines that such services are appropriate and consistent with the operational office's policies and procedures. A review of documentation reflects that during the audit period, Peace Arch POE has not detained any individuals who were deaf, blind, or cognitively impaired. Interviews with local SMEs and officers verified that staff would not utilize another detainee to interpret allegations of sexual abuse. Officers stated they also conducted secondary interviews with individuals who appeared to have mental health disabilities to assure they understood Pacific Highway POEs zero tolerance of sexual abuse.

**§115.117(a) through (f) – Hiring and promotion decisions.**

- Exceeded Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does not meet Standard (requires corrective action)

**Notes:**

Based on the review and analysis of all available evidence, the Auditor finds that Peace Arch POE meets the standard, which requires proper hiring and promotional decisions.

(a): CBP Directive 2130-030 directs the Office of Human Resources Management to develop policy and procedures to ensure that CBP does not hire or promote individuals who have had previous substantiated cases of sexual abuse and/or sexual assault. A memorandum by the Executive Director, with an issue date of February 29, 2016, issued Standard Operating Procedures to ensure the agency offers protection to all detainees of sexual abuse and/or sexual

assault when hiring or promoting individuals within the agency. While interviewing the HQ OPR/PSD SME, the importance of staff suitability for employment was clearly expressed. During the interview and agency application process, it was noted that applicants are required to answer suitability questions. Based on their responses, applicants may be screened out for employment and deemed ineligible for further consideration, this process is the same for contractors. In house vetting checks, database checks with NCIC, and Lexis/Nexis checks are completed for both contractors and employees prior to them being hired.

(b): CBP has developed operational guidance through the issuance of the Human Resource Management (HRM) Standard Operating Procedures to provide direction in the hiring and promotion of employees who have direct contact with detainees. CBP HRM developed Mission Specific Questions and a DHS PREA Questionnaire which includes asking applicants who may have direct contact with detainees about previous misconduct as identified in provision (a) of this standard. Interviews with the HQ HRM/Hiring Center SME indicated that all staff must complete a PREA Questionnaire Form, whether the individual is a new hire or applying for promotions. Per CBP policy and rules of employment, staff must acknowledge their duty to disclose any such misconduct throughout their employment.

(c)(d): CBP Directive 2130-030 requires that background investigations are conducted for all applicants for employment, along with contractor applicants who may have contact with detainees. Additionally, policy requires that subsequent background investigations are conducted every five years for all CBP personnel who may have contact with detainees. The Auditor reviewed the CBP report of investigation form which provides the results of a background investigation. The Report of Investigation form provides whether the employee is asked questions as described in standard provision (a). Interview with the HQ Office of Professional Responsibility (OPR) Personnel Security Division (PSD) SME, provided that the agency conducts in-house vetting checks, database checks, and checks through various law enforcement databases to assist in verifying suitability of applicants, contractors, and volunteers. An interview with the HQ HRM/Employee Relations (LER) SME indicated that the agency informs employees they have a continuing affirmative duty to disclose any misconduct constituting sexual abuse through yearly virtual trainings, policies, daily musters, electronically through email, and standards of conduct. The HQ HRM/LER SME stated that employees are advised that violations of the standards of conduct or policies can result in consequences. A review of the background checks revealed the agency is following pre-hire and five-year background checks. The facility provided documented background checks for Peace Arch POE and Pacific Highway POE for review which verified that the agency has conducted the checks in accordance with the CBP directive.

(e): The HQ HRM/LER SME stated that CBP policy mandates that all staff have a continuing affirmative duty to report any acts of sexual abuse as required under the PREA standards. The HQ HRM/LER SME also explained that material omission or the provision of materially false information regarding such misconduct is grounds for termination or withdrawal for an offer of employment. The HQ HRM/LER SME further stated that employees are made aware of this requirement through the issuance of the Standards of Conduct and the Table of Contents to the Penal Code.

(f): CBP Directive 2130-030 stipulates that unless prohibited by law, the agency will provide information on substantiated allegations of sexual abuse involving former employees upon receiving a request from an institutional employer for whom such employee has applied to work. The HQ HRM/LER SME reports that if a former employee has applied for employment at another agency, a background investigator or agency can request employee background information through their office.

**§115.118(a) and (b) – Upgrades to facilities and technologies.**

- Exceeded Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does not meet Standard (requires corrective action)
- Not Applicable (provide explanation in notes):

**Notes:**

Based on the review and analysis of all available evidence, the Auditor finds the standard is not applicable to Peace Arch POE. Peace Arch POE has not had any upgrades, or any additional technology added since the last audit. Additionally, there have not been any additional (b) (7)(E) since the last audit.



**§115.121(c) through (e) – Evidence protocols and forensic medical examinations.**

- Exceeded Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does not meet Standard (requires corrective action)

**Notes:**

Based on the review and analysis of all available evidence, the Auditor finds Peace Arch POE meets the standard, which requires evidence protocols and forensic medical examinations for victims of sexual abuse or sexual assault.

(c): CBP Directive 2130-030 and CBP TEDS requires timely, unimpeded medical treatment and crisis intervention, including emergency contraception and sexually transmitted infections prophylaxis be provided to a victim of sexual assault without financial cost to the detainee. The facility provided evidence of coordination with the Whatcom County Sheriff's Office requesting they investigate reports of sexual abuse and sexual assault in accordance with Standard 115.121 on January 31, 2023. Interviews with the local SMEs confirm both forensic medical services, as well as victim advocacy services, would be provided to the alleged victim without cost. They also stated that they would work with the Whatcom County Sheriff's Office to provide to ensure medical attention and forensic examinations were provided to detainees of sexual abuse and sexual assault. Detainees are taken to St. Joseph Hospital Medical Center by local EMT via coordination with the Whatcom County Sheriff's Office.

(d): Interviews with local SMEs confirmed that victim advocacy services are provide to victims of sexual abuse and/or assault at the local hospital. Phone interviews with a Hospital Administrator at St. Joseph Hospital Medical Center confirmed that the hospital would provide a detainee with a SAFE/SANE examination commensurate with what is provided in the community. The hospital verified that no detainees have ever been brought to the hospital from Peace Arch POE. Additionally, they confirmed that detainee victims of sexual abuse and/or assault are permitted to use victim advocacy services and officers are aware they must allow victim advocates to speak with the alleged victim of sexual abuse and/or assault.

(e): Local SMEs provided that, the agency would request that federal, state, and/or local law enforcement agencies conducting sexual abuse investigations at the facility follow the requirements by the DHS PREA Standards. They further reported that the Joint Intake Center (JIC) would be contacted immediately and provide them with instructions on the next steps taken in the investigation process.

**§115.122(c) and (d) – Policies to ensure investigation of allegations and appropriate agency oversight.**

- Exceeded Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does not meet Standard (requires corrective action)

**Notes:**

Based on the review and analysis of all available evidence, the Auditor finds that Peace Arch POE meets the standard, which requires the facility have policies to ensure investigation of all allegations and appropriate agency oversight.

(c): CBP Directive 2130-030 requires all allegations of sexual abuse and/or assault to be documented on a Significant Incident Report and promptly reported to the Commissioner's Situation Room (Now CBP Watch) and the JIC. CBP Directive 3340-025F, Reporting Significant Incident to the U.S. Customs and Border Protection WATCH, (dated November 2, 2021), directs staff to report sexual abuse and/or sexual assault through a united hub which operates 24 hours a day and seven days a week to ensure significant incidents are immediately reported to the leadership. The Peace Arch POEs, "Sexual Abuse and Sexual Assault SOP," directs CBP staff in the facility's response to sexual abuse and sexual assault. Interviews with local SMEs confirmed that all sexual abuse allegations are promptly referred to the JIC and promptly referred to the appropriate law enforcement agency if potentially criminal. The local SMEs stated that reports to the JIC are made by the Deputy Chief or the Port Director. The facility did not have any allegations or reports of sexual abuse or assault to report during the audit period.

(d): CBP Directive 2130-030 requires all allegations of sexual abuse and/or assault be promptly reported to the HQ PDO/PSA Coordinator, the Commissioner's Situation Room (Now CBP Watch), and the JIC. The HQ PDO/PSA

Coordinator stated that if there were any allegations of sexual abuse and/or assault, his predecessor would have been notified of any allegations reported by the Peace Arch POE. He further indicated that they were informed that there were no allegations during the audit period. Interviews with local SMEs provided that the Deputy Chief or Port Director would initiate referrals to the PSA Coordinator. The facility reported that they did not have any allegations or reports of sexual abuse or assault to report during the auditing period. An interview with the HQ OPR/Sexual Abuse and Assault Investigation (SAAI) Coordinator indicated that all allegations of sexual assault provided by the victim or by another agency would be provided to the JIC. If investigated by OPR, field agents would handle immediately and directly. The HQ OPR/SAAI Coordinator further stated that the investigative protocol was developed in conjunction with CBP, ICE, HIS, and DHS.

**§115.131(a) through (c) – Employee, contractor, and volunteer training.**

- Exceeded Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does not meet Standard (requires corrective action)

**Notes:**

Based on the review and analysis of all available evidence, the Auditor finds that Peace Arch POE meets the standard, which requires that facility provides employees, contractors, and volunteers with training on the agency's zero-tolerance policies.

(a): Directive 2130 requires all uniformed agents and officers, special agents, fact finders, contractors, and volunteers who may have contact with a detainee in CBP Holding Facilities receive the training in Subpart B of the DHS Standards. The Auditor reviewed the training slides of CBP's mandatory training requirement. The training material specifically covers: (1) the agency's zero-tolerance policies for all forms of sexual abuse; (2) the right of detainees and employees to be free from sexual abuse, and from retaliation for reporting sexual abuse; (3) definitions and examples of prohibited and illegal sexual behavior; (4) recognition of situations where sexual abuse may occur; (5) recognition of physical, behavioral, and emotional signs of sexual abuse, and methods of preventing such occurrences; (6) procedures for reporting knowledge or suspicion of sexual abuse; (7) how to communicate effectively and professionally with detainees, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming detainees; and (8) the requirement to limit reporting of sexual abuse to personnel with a need-to-know in order to make decision concerning the victim's welfare and for law enforcement or investigative purposes. The training for employees is through Acadis. During the on-site portion of the audit, the Auditor reviewed (b) (7)(E) training records to ensure the completion of the initial and refresher PREA training requirements. The Auditor found these training records to comply with the Directive and the Standards. All staff, contractors, and volunteers are mandated to receive this training biannually. Additional information is published through Privacy and Diversity Office Payroll Messages, Sexual Awareness Prevention Month Communication Package dated April 19, 2022, CBP Central CBPnet messaging for employees reminding them of CBP's zero-tolerance of sexual abuse and/or sexual assault, and memorandum and email reminders of the mandatory training. Additionally, training for volunteers has been developed through FEMA Emergency Management Institute ISO-990, Preventing Sexual Abuse and Assault in CBP Holding Facilities. The Agency has developed a PREA Resource Center which provides information to all CBP employees who have contact with the detainee population. CBP communicates with agency contractors requiring and reminding them of the mandatory training. CBP has also developed two training aids to help staff in their communications with detainees who have disabilities and how to identify LGBTQI+ detainees. In speaking with the local SMEs and officers, all had levels of knowledge regarding the agency's zero-tolerance policies. There were a few officers who were in possession of an agency supplied pocket card that contained easily accessible reference materials related to a sexual abuse response. Other officers stated that the information card was not needed or did not know where the card was, but knew the information requested during the interview. There were no volunteers or contractors to interview for compliance with this standard.

(b)(c): CBP Directive 2130-030 requires all current officers, contractors, and volunteers who may have contact with detainees have been trained on the DHS PREA Standards and receive subsequent refresher training. This training is provided, and records maintained, via Acadis. Interviews with officers and a review of training records confirmed that refresher training on sexual abuse and sexual assault was provided through the Acadis system. The officers indicated that the cleaning crew hired to maintain the building does not have contact with detainees. The local SMEs stated that

if a detainee was placed in hard secondary, only Peace Arch officers would be allowed in the secure area. There were no cleaning crew staff available to interview during the onsite audit.

**§115.132 – Notification to detainees of the agency’s zero-tolerance policy.**

- Exceeded Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does not meet Standard (requires corrective action)

**Notes:**

Based on the review and analysis of all available evidence, the Auditor finds that Peace Arch POE exceeds the standard, which requires notification to detainees of the agency’s zero-tolerance policy.

CBP has established a significant number of information methods to notify detainees of the agency’s zero-tolerance policy. During the onsite inspection, the Auditor noted large zero-tolerance policy posters displayed on the walls throughout the holding area. The posters provide information on how to report sexual abuse and/or sexual assault. Additionally, CBP addresses the zero-tolerance policy on its public website, (<https://www.cbp.gov/about/care-in-custody>). The Auditor observed a substantial number of age-appropriate Zero Tolerance Awareness Posters publicly displayed on the walls throughout the facility. These posters were available in English and Spanish with a language identifying poster for several other languages posted beside these posters. These posters contained identifying statements for approximately twenty-six different languages, to include distinct dialects of specific languages: namely, Arabic, Farsi, French, Gujarati, Haitian, Hindi, Japanese, Pashto, Portuguese, Punjabi, Romanian, Simplified Chinese, Tagalog, Urdu, and Vietnamese. Additionally, Peace Arch POE displayed flyers providing instructions on how staff should efficiently and effectively communicate with both the LGBTQI+ detainees, and detainees with disabilities. In Interviews with local SMEs and officers, they stated they were able to communicate that if detainees spoke a different language, there was a list of staff that spoke the most common languages that Peace Arch POE encounters. They further stated they had the ability to use the language line for all other languages as needed. CBP designed age-appropriate posters which provide information and depict cartoon pictures to make juveniles aware of the agency’s zero-tolerance of sexual abuse. The posters were colorfully designed for detainees of tender age (13 and below), and juveniles (14 and above), and adults. CBP has also developed educational videos depicting a boy and a girl to encourage compliance with CBP’s zero-tolerance of sexual abuse and sexual assault. The videos also encourage immediate reporting of actions that can be construed as sexual abuse and/or sexual assault. The facility also displayed additional PREA educational posters, to include fliers that discussed effective communication with LGBTQI+ detainees and effective communication with those who are blind, deaf, or limited English proficient. There were no detainees available to interview during the onsite audit.

**§115.134 – Specialized training: Investigations.**

- Exceeded Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does not meet Standard (requires corrective action)
- Not Applicable (provide explanation in notes):

**Notes:**

N/A – Refer to the CBP Sexual Abuse Investigations Audit Report.

**§115.141(a) through (e) – Assessment for risk of victimization and abusiveness.**

- Exceeded Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does not meet Standard (requires corrective action)

**Notes:**

Based on the review and analysis, the Auditor finds that Peace Arch POE meets the standard, which requires the facility to conduct an assessment for risk of victimization and abusiveness.

(a)(b)(c)(e): CBP has developed policies to ensure staff conduct a risk assessment for risk of victimization and abusiveness of all detainees prior to being placed in any hold room. These policies and procedures include Memorandum for CBP Policy on Zero Tolerance of Sexual Abuse and Assault, dated March 11, 2015; CBP Directive 2130-030; CBP TEDS; and Memorandum from the Assistant Commissioner of OFO, with an attachment of CBP Standards to Prevent, Detect, and Respond to Sexual Abuse and Assault in CBP Holding Facilities, dated August 12, 2014. Interviews with local SMEs and officers indicated that before detainees are held together, staff at the facility assesses whether a detainee may be at a high risk of being sexually abused or of being sexually abusive toward other detainees, staff asks each detainee about his or her own concerns about his or her physical safety, and staff make reasonable efforts to consider relevant information to assess risk per the standard. This risk assessment allows officers to consider, to the extent that the information is available, (1) any mental, physical, or developmental disabilities; (2) the age of the detainee; (3) the physical build and appearance of the detainee; (4) whether the detainee has previously been incarcerated or detained; (5) the nature of the detainee's criminal history; (6) whether the detainee has any convictions for sex offenses against an adult or child; (7) whether the detainee has self-identified as gay, lesbian, bisexual, transgender, intersex, or gender nonconforming; (8) whether the detainee has self-identified as having previously experienced sexual victimization; (9) and the detainee's own concerns about history her physical safety. Interviews with staff confirmed that the information provided by the detainees would only be shared with others on a need-to-know basis. Local SMEs and staff also confirmed that detainees determined to be at high risk of being sexually abused would be separated from other detainees by use of an office, conference room, or individual hold rooms, to provide them with heightened security or protection. CBP Directive 2130-030 requires officers to take reasonable steps to determine whether a detainee may be at a high risk of being sexually abused or of being sexually abusive before placing any detainees together in a holding facility. There were no detainees available for interview during the onsite review.

**§115.151(a) through (c) – Detainee reporting.**

- Exceeded Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does not meet Standard (requires corrective action)

**Notes:**

Based on the review and analysis of all available evidence, the Auditor finds Peace Arch POE is fully compliant with the standard, which requires providing methods for detainee reporting.

(a)(b)(c): The CBP has policies to ensure all detainees taken into custody are given an opportunity to report any allegations of sexual abuse. These policies and directives include: DHS PREA Standards in Focus, 115.132 and 115.151, dated July 11, 2022; CBP Directive 2130-030; Commissioner's Memorandum with attached CBP Policy on Zero Tolerance of Sexual Abuse and Assault, dated March 11, 2015; Memorandum for Privacy and Diversity Office Prevention, Detection, and Response to Sexual Abuse and Assault in CBP Holding Facilities Directive, dated February 2, 2018; Memorandum from the Assistant Commissioner for OFO with attached Standards to Prevent, Detect, and Respond to Sexual Abuse and Assault in CBP Holding Facilities, dated August 12, 2014; CBP Central: Tuesday, February 19, 2019; CBP Central: Monday, February 12, 2018; Privacy and Diversity Officer Quarterly e-Newsletter, dated January-March, 2018. CBP has established a public website that includes the Agency's policy regarding Zero Tolerance of Sexual Abuse and Assault. The website provides instructions on how to report sexual abuse and/or sexual assault. The agency policy also requires that key information regarding the CBP's Zero-Tolerance Policy is visible or continuously and readily available to detainees. During the on-site portion of the audit, the Auditor observed informational posters throughout the facility which provides a reporting phone number, in both English and Spanish. The reporting phone number is a direct line to the DHS OIG. Interviews with local SMEs and officers indicated that if a detainee wished to utilize the reporting hotline, detainee would have access to a phone in a room that allows for confidentiality. There were two interview rooms with phones inside of the hard secondary area that officers indicated the detainees could use to make calls to DHS OIG. Inside both interview rooms were several posters with PREA reporting information and other information relevant to detainees. The Auditor conducted a test call to the reporting hotline which confirmed the phone was operable and the number was valid. Interviews with the local SMEs and officers confirmed their responsibility to accept any verbal or written report of sexual abuse made to them by a detainee, or by another person on behalf of a detainee. In the interviews, staff confirmed their responsibility to allow a detainee alleging sexual abuse to remain anonymous upon request. Interviews with staff indicated that if they were



informed of an allegation of sexual abuse, they would immediately notify their supervisor of the allegation and subsequently document the incident as required by policy. There were no detainees to interview during the on-site audit.

**§115.154 – Third-party reporting.**

- Exceeded Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does not meet Standard (requires corrective action)

**Notes:**

Based on the review and analysis of all available evidence, the Auditor finds that Peace Arch POE meets the standard requiring the facility to allow for third-party reporting.

CBP Directive 2130-030 directs staff that third parties can report sexual abuse and/or sexual assault on behalf of the detainee. Reports can also be made on behalf of the abused detainee by another detainee. Additionally, the agency has established a website (<https://www.cbp.gov/about/care-in-custody>) to allow for third parties to report sexual assault and/or sexual assault directly to OIG. During the on-site portion of the audit, informational posters, in both English and Spanish, which contained the reporting phone number to OIG were observed throughout the facility. Interviews with ten officers indicated that staff would ensure the safety of the detainee by separating the detainee from the general population and/or perpetrator and notifying the supervisor. The facility informed the Auditor there were no third-party reports of sexual abuse or sexual assault during the previous 12 months.

**§115.161(a) through (d) – Staff reporting duties.**

- Exceeded Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does not meet Standard (requires corrective action)

**Notes:**

Based on the review and analysis of all available evidence, the Auditor finds Peace Arch POE is fully compliant with the standard requiring staff reporting.

(a)(b): CBP Directive 2130-030 and CBP Policy on Zero Tolerance of Sexual Abuse and Assault mandates all staff to immediately report any knowledge, suspicion, or information of sexual abuse that occurred within the facility. Additionally, staff have an affirmative duty to report all knowledge, suspicion, or information regarding retaliation against detainees or staff for having reported an incident of sexual abuse. Staff also have an affirmative duty to report any negligence or violation of responsibility that may have contributed to an incident of sexual abuse or retaliation. CBP Directive 3340-025F directs staff to report significant incidents to CBP WATCH, a unified hub that operates 24 hours a day and seven days a week to assure all significant incidents are immediately reported to all required leadership. CBP Directive 51735-013B, U.S. Customs and Border Protection Standards of Conduct, December 9, 2020, also informs staff they have a duty to report any sexual assault and/or sexual abuse allegation, or any form of retaliation against another staff member or detainee. CBP has provided training in Preventing and Addressing Sexual Abuse in CBP Holding Facilities, which addresses the responsibility of reporting sexual abuse and/or sexual assault, to include retaliation. On August 25, 2022, CBP included in the newsletter, DHS PREA Standards in Focus, the staff reporting duties. A review of (b) (7)(E) training records, as well as training curriculum records, reflects that all staff have received initial and refresher PREA training. The training also includes acknowledgment of their affirmative duty responsibilities. Interviews with staff confirmed their knowledge of their duty to immediately report any information they might have regarding allegations of sexual abuse. All (b) (7)(E) officers interviewed were able to verbalize at least one way in which to make a formal report.

(c): CBP Directive 2130-030 requires that except as necessary to report the incident, staff shall not reveal any information related to an incident of sexual abuse except as necessary to aid the detainee, to protect other detainees or staff, or to make security and management decisions as required under Subpart B of the DHS Standards. Interviews with local SMEs and officers confirmed that staff were aware of the need for confidentiality. Staff acknowledged that

information related to allegations of sexual abuse would only be shared as a function of their official capacities on a need-to-know basis.

(d): CBP Directive 2130-030 requires that staff report sexual abuse and/or assault allegations involving alleged victims under the age of 18, or those considered as vulnerable adults under State and local vulnerable persons statutes, to the designated State or local services agency under applicable mandatory reporting laws. Interviews with local SMEs provided that the local authority to whom CBP staff would report alleged victimization of persons under the age of 18 or of vulnerable adults is the Whatcom County Sheriff's Office. Peace Arch POE supervisors or above would in turn would report the incident to the appropriate authority for juveniles and/or vulnerable adults.

**§115.162 – Agency protection duties.**

- Exceeded Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does not meet Standard (requires corrective action)

**Notes:**

Based on the review and analysis of all available evidence, the Auditor finds Peace Arch POE meets the standard, which requires the agency to provide protection to victims of sexual abuse and assault.

CBP TEDS instructs officers if they have a reasonable belief that a detainee is at a substantial risk of imminent sexual abuse, they must take immediate action to protect the detainee. Interviews with local SMEs and officers indicated that detainees would be held separately from the general population, kept in sight, to ensure the safety of the detainee. The facility reported that they did not have any detainees who were identified as being at a substantial risk of imminent sexual abuse during the previous 12 months.

**§115.163(a) through (d) – Report to other confinement facilities.**

- Exceeded Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does not meet Standard (requires corrective action)

**Notes:**

Based on the review and analysis of all available evidence, the Auditor finds that Peace Arch POE meets the standard, which requires the facility to report to other confinement facilities when detainees report allegations of sexual abuse and assault that occurred in another facility.

(a)(b)(c)(d): CBP Directive 2130-030 requires that upon receipt of an allegation that a detainee who was sexually abused while confined at another facility, facility staff are to notify the appropriate office of the agency or the administrator of the facility where the alleged sexual assault occurred. A Memorandum from the Acting Assistant Commissioner, OFO, dated August 12, 2014, with the attached Standards to Prevent, Detect, and Respond to Sexual Abuse and Assault in CBP Holding Facilities, was issued to remind the leadership of the documentation and notification process. Peace Arch POE reported they did not receive, nor did they send any reports of sexual abuse or sexual assault during the 12-month audit period. Interviews with local SMEs indicated they were aware of procedures of making immediate notifications through their chain of command, to include the JIC if an allegation of sexual abuse or sexual assault is received. Interviewed local SMEs were aware that notifications must be made within 72 hours of the allegation and indicated that notifications to the chain of command would be made immediately. Staff members interviewed stated that if they received an allegation from another facility, reporting that an act of sexual abuse or sexual assault occurred at Peace Arch POE, they would treat the allegation as if the detainee notified them onsite and follow the reporting steps; notification would be made to the JIC, CIC, and PSA Coordinator.

**§115.164(a) and (b) – Responder duties.**

- Exceeded Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does not meet Standard (requires corrective action)

**Notes:**

Based on the review and analysis of all the available evidence, the Auditor finds Peace Arch POE is fully compliant with the standard requiring that staff follow first responder duties.

(a)(b): CBP Directive 2130-030 provides detailed and concise information on the steps Peace Arch POE first responders should take upon learning of an allegation of sexual abuse and/or assault. Additionally, CBP provides a training course through Acadis (online training portal) which is required biannually of all CBP staff. The course provides detailed information of the responsibilities of a first responder regarding all steps to be taken by first responders upon learning of a sexual assault. Both the Directive and the training course educate Peace Arch POE first responders to immediately, separate the victim and abuser, preserve, and protect the crime scene until evidence collection is possible, request the victim not take any actions that could destroy physical evidence, and direct the abuser to not take any actions to destroy evidence. First responders who are not law enforcement are instructed to request the victim not take actions that could destroy evidence and immediately notify officers. Interviews with local SMEs and officers indicated that all understood and were able to articulate their first responder duties. Officers stated that they would separate the detainees immediately, preserve the scene, prevent the victim and perpetrator from destroying any evidence by brushing their teeth, smoking, changing clothes, drinking, showering, or using the restroom, preserve any physical evidence, notify supervision, and document the incident and their actions. The facility reported that during the 12-month audit period, they did not receive any allegations of sexual abuse and/or assault, therefore, there was no relevant documentation to review.

**§115.165(a) through (c) – Coordinated response.**

- Exceeded Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does not meet Standard (requires corrective action)

**Notes:**

Based on the review and analysis of all available evidence, the Auditor finds that Peace Arch POE meets the standard, which requires the facility to have a coordinated response plan.

(a): CBP Directive 2130-030 establishes CBP procedures for prevention, detection, and response to sexual abuse and sexual assault in CBP holding facilities. This Directive constitutes CBP's written institutional plan for utilizing a multidisciplinary team approach to respond to sexual abuse and/or sexual assault. The Directive coordinates actions amongst first responders, medical and mental health practitioners, investigators, and facility leadership in response to incidents of sexual abuse. This Directive, along with CBP TEDS, work to coordinate agency, agency components, and facility efforts, so that victims of sexual abuse receive adequate support services to protect the health, welfare, security, and safety of any individual in CBP custody. CBP PDO also published an announcement to all staff through CBP Central on February 12, 2018 notifying staff of the Directive constituting CBP's coordinated institutional plan. The announcement also provided a link for staff to easily access the Directive. Interviews with local SMEs confirmed Peace Arch POE follows and utilizes CBP Directive 2130-030 to respond to sexual abuse and/or sexual assault. They also stated that CBP Directive 2130-030 provides the information utilized in the SOPs.

(b)(c): Directive 2130-030 instructs staff that when sexual abuse victims are transferred either between DHS holding facilities or from a DHS facility to a non-DHS facility, the sending facility should, as permitted by law, inform the receiving facility of the incident and the victim's potential need for medical or social services, unless the victim declines services. The facility indicated that they did not have any allegations of sexual abuse during the audit timeframe, therefore, did not have need to utilize the coordinated response plan; therefore, there was no documentation to review. Interviews with local SMEs indicated that if a detainee was transferred to any other facility, the transporting officer or a supervisor from Peace Arch POE would inform the receiving facility of the allegation and the potential need for medical or social services.

**§115.166 – Protection of detainees from contact with alleged abusers.**

- Exceeded Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does not meet Standard (requires corrective action)

**Notes:**

Based on the review and analysis of all available evidence, the Auditor finds Peace Arch POE meets the standard, which requires the facility provides protection to detainees from contact with alleged abusers.

CBP Directive 2130-030 instructs CBP management of a requirement to consider whether any CBP employee alleged to have perpetrated sexual abuse should be removed from duties requiring detainee contact pending the outcome of an investigation and shall do so if the seriousness and plausibility of the allegation make removal appropriate. The Directive further states that contractors and volunteers suspected of perpetrating sexual abuse will be prohibited from contact with detainees. Interviews with local SMEs indicated that if an employee, contractor, or volunteer are alleged to have sexually abused a detainee, the facility would remove the individual pending an investigation. Peace Arch POE officers stated that the alleged perpetrator would be immediately removed while under investigation. The facility has not had any reported incidents of sexual abuse or assault, therefore, there were no reports to review.

**§115.167 – Agency protection against retaliation.**

- Exceeded Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does not meet Standard (requires corrective action)

**Notes:**

Based on the review and analysis of all available evidence, the Auditor finds that Peace Arch POE meets the standard, which requires the agency provide protection to victims, staff, and witness who cooperate with investigations, against retaliation.

CBP Directive 2130-030; CBP National Standards on TEDS; Memorandum for Office of Field Operations Standards to Prevent, Detect, and Respond to Sexual Abuse and Assault in CBP Holding Facilities, dated August 12, 2014; and Memorandum for All CBP Employees - CBP Policy on Zero Tolerance of Sexual Abuse and Assault, dated March 11, 2015, prohibits retaliation against any person, to include detainees, for having claimed or participated in an investigation regarding sexual abuse. Interviews with local SMEs and officers indicated that the facility prevents retaliation against individuals involved with making allegations or participating in an investigation of allegations of potential sexual abuse by securing the victim, under supervision, in a secure area. The staff also confirmed that the facility has a zero-tolerance policy regarding retaliation against any person, including a detainee, who reports, complains about, or participates in an investigation into an allegation of sexual abuse.

**§115.171 – Criminal and administrative investigations.**

- Exceeded Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does not meet Standard (requires corrective action)
- Not Applicable (provide explanation in notes):

**Notes:**

N/A – Refer to the CBP Sexual Abuse Investigations Audit Report.



**§115.172 – Evidentiary standard for administrative investigations.**

- Exceeded Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does not meet Standard (requires corrective action)
- Not Applicable (provide explanation in notes):

**Notes:**

N/A – Refer to the CBP Sexual Abuse Investigations Audit Report.

**§115.176(a) and (c) through (d) – Disciplinary sanctions for staff.**

- Exceeded Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does not meet Standard (requires corrective action)
- Not Applicable (provide explanation in notes):

**Notes:**

Based on the review and analysis of all available evidence, the Auditor finds that Peace Arch POE meets the standard, which requires the facility provide disciplinary sanctions for staff who commits sexual abuse or assault of detainees.

(a)(c)(d): CBP Directive 2130-030 and Directive 51735-013B, Standards of Conduct, states that personnel may be subjected to disciplinary or adverse action up to and including removable from their position and Federal service for substantiated allegations of sexual abuse and/or assault and/or violating CBP's sexual abuse policies. The Standards of Conduct provide notice to the employees that disciplinary action will occur, including up to removal, for substantiated allegations of sexual abuse and/or assault. This standard works to ensure agency staff understand the gravity and the criminal nature of engaging in sexual abuse of detainees. Interviews with local SMEs provided that the facility's role in disciplinary or adverse action against staff and contractors who violate the sexual abuse policy/procedures are to report and follow up with OPR regarding the investigation and disciplinary issued. An interview with the HQ HRM/LER SME provided that OPR provides investigations to the Employee Relations Branch, and then reviewed by the Disciplinary Review Board, where the determination is made on what type of disciplinary action is appropriate. After the determination, the employee is provided a period to respond. The Disciplinary Review Board then decides if disciplinary action is warranted and makes a final determination. The disciplinary process and the Table of Penalties for Criminal Offices is provided to staff during the onboarding process to educate them on the consequences of violating the zero-tolerance policy. Staff who have been found to have engaged, or attempted to engage, in sexual abuse of a detainee, the presumptive disciplinary sanction is removal from their position and exclusion from future Federal service. Additionally, interviews with HQ OPR/SAAI indicated that the agency would report such disciplinary findings to any relevant licensing bodies and designated law enforcement officials for violations of the sexual abuse and assault policies.

**§115.177(a) and (b) – Corrective action for contractors and volunteers.**

- Exceeded Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does not meet Standard (requires corrective action)

**Notes:**

Based on the review and analysis of all the available evidence, the Auditor finds Peace Arch POE fully compliant with the standard, which requires corrective action for contractors and volunteers who commit sexual abuse and/or assault of a detainee.

(a)(b): CBP Directive 2130-030 and CBP Policy on Zero Tolerance of Sexual Abuse and Assault states that CBP contractors and volunteers may be subject to disciplinary or adverse action up to and including removal from their position or volunteer capacity for substantiated allegations of sexual abuse and/or assault and/or violating CBP's sexual abuse policies. Interviews with the HQ OPR/SAAI Coordinator, as well as the HQ OFO SME, provided that the agency's process for prohibiting contractors and volunteers suspected of perpetrating sexual abuse or violating the PREA Standards from contact with detainees is included in a Memorandum of Understanding (MOU) developed by the agency

and the contracting agency. The MOU includes the PREA standards which are shared with contractors and volunteers. If a sexual abuse and/or sexual assault allegation is reported, the facility will begin the investigation process and the individual will not continue to have contact with detainees and will be relieved of duties until the process is completed. Following the conclusion of the investigation, reasonable efforts will be made by CBP to report any contractor or volunteer found guilty of sexually abusing detainees to relevant licensing bodies to include referral to a law enforcement agency. The Auditor also interviewed local SMEs who provided that immediate notification will be made to the chain of command via the telephone and through email, who will ensure the appropriate steps are taken. All interviews indicated that any contractor or volunteer suspected of perpetrating sexual abuse or violating the DHS PREA Standards would be separated from detainees. Peace Arch POE reported that the facility does not enlist the services of volunteers and contractors are not allowed contact with detainees. The local SMEs indicated that contractors do not go to areas where detainees are present. There were no contractors available to interview during the onsite review.

**§115.182(a) and (b) – Access to emergency medical services.**

- Exceeded Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does not meet Standard (requires corrective action)

**Notes:**

Based on the review and analysis of all available evidence, the Auditor finds Peace Arch POE meets the standard, which requires victims of sexual abuse and assault have access to emergency medical services.

(a)(b): CBP Directive 2130-030 requires that when an alleged incident of sexual abuse occurs, detainees should be given timely, unimpeded access to emergency medical treatment and crisis intervention services, including emergency contraception and sexually transmitted infections prophylaxis. The Directive further states that emergency medical treatment services shall be provided to the victim without cost and regardless of whether the victim names the alleged abuser or cooperates with any investigation arising out of the incident. Interviews with local SMEs indicated that emergency medical treatment and crisis intervention services are provided to any detainee victim of sexual abuse in a timely and unimpeded manner and includes access to crisis intervention services, access to emergency contraception and sexual transmitted infections prophylaxis, access to treatment and services in accordance with professionally accepted standards of care, is free to detainee victims, and is provided whether or not the victim names the abuser or cooperates with the investigation. This is done through immediate notification to the Whatcom County Sheriff's Office who initiates contact with Emergency Medical Technicians (EMT) and the St. Joseph Medical Hospital and ensures that all medical procedures are conducted.

**§115.186(a) – Sexual abuse incident reviews.**

- Exceeded Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does not meet Standard (requires corrective action)

**Notes:**

Based on the review and analysis of all available evidence, the Auditor finds that Peace Arch POE meets the standard, which requires the facility conduct sexual abuse incident reviews at the conclusion of investigations.

Directive 2130-030 requires that a sexual abuse incident review will be conducted by OFO or USBP at the conclusion of every investigation of sexual abuse and/or assault. An interview with the HQ PDO/PSA Coordinator provided that sexual abuse incident reviews are to be conducted at the conclusion of every investigation into allegations of sexual abuse, within 30 days of receiving the investigation results, documented in a written report for all substantiated and/or unsubstantiated allegation, documented whether changes in policy or practice could assisted in prevention or response to sexual abuse, documented whether recommendations for improvement was implemented or the reasons for not doing so, and is forwarded to the PSA Coordinator. He further stated that local law enforcement is involved with the sexual abuse incident review on a case by case-by-case basis. If the allegation occurred locally, the local authorities would be involved. Simultaneously, OPR would be notified. Incident reviews are done within 30 days and then sent to the PSA Coordinator, all in accordance with CBP policy of zero-tolerance for sexual abuse and sexual assault, to include the standards to prevent, detect, and respond to sexual abuse and sexual assault. An interview with the HQ CBP OFO

SME provided that sexual abuse incident reviews would involve local law enforcement on a case-by-case basis. Interviews with local SMEs indicated that the facility has not received any recommendations to implement from a sexual abuse incident review. It should be noted that the facility reported it has not had any allegations or reports of sexual abuse or sexual assault, therefore, there was no documentation to review.

**§115.187 – Data collection.**

- Exceeded Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does not meet Standard (requires corrective action)
- Not Applicable (provide explanation in notes):

**Notes:**

N/A – Refer to the CBP Sexual Abuse Investigations Audit Report.

**ADDITIONAL NOTES**

**Directions:** Please utilize the space below for additional notes, as needed. Ensure the provision referenced is clearly specified.

None.

**AUDITOR CERTIFICATION:**

I certify that the contents of the report are accurate to the best of my knowledge and no conflict of interest exists with respect to my ability to conduct an audit of the agency under review. I have not included any personally identified information (PII) about any detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.

(b) (6), (b) (7)(C)

\_\_\_\_\_  
**Auditor's Signature**

01/18/2024

\_\_\_\_\_  
**Date**