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



AUDITOR INFORMATION				
Name:	(b) (6), (b) (7)(C)	Company Name:	Creative Corrections, LLC	
Mailing Address:	(b) (6), (b) (7)(C)	City, State, Zip:	(b) (6), (b) (7)(C)	
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AGENCY INFORMATION				
Name of Agency:	U.S. Customs and Border Protection			
PROGRAM OFFICE				
Name of Program Office:	U.S. Border Patrol			
SECTOR OR FIELD OFFICE				
Name of Sector or Field Office:	Rio Grande Valley			
Name of Chief or Director:	(b) (6), (b) (7)(C)			
PREA Field Coordinator:	(b) (6), (b) (7)(C)			
Physical Address:	4400 South Expressway 281, Edinburg, Texas			
Mailing Address: (if different from above)				
SHORT-TERM HOLDING FACILITY BEING AUDITED				
Information About the Facility				
Name of Facility:	Donna Centralized Processing Center			
Physical Address:	1414 S. FM 493, Donna Texas 78537			
Mailing Address: (if different from above)				
Telephone Number: (b) (6), (b) (7)(C)				
Facility Leadership				
Name of Officer in Charge:	(b) (6), (b) (7)(C)	Title:	Acting Deputy Patrol Agent in Charge (ADPAIC)	
Email Address:	(b) (6), (b) (7)(C)	Telephone Number:	(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) U.S. Border Patrol (USBP) Donna Centralized Processing Center (CPC) was conducted on Tuesday June 4th and Wednesday June 5th, 2024, from 0430 hours until 1700 hours on day one and from 0700 hours until 1500 hours on day two. The audit was conducted by (D(6), (D)(7)(C), a Certified PREA Auditor, contracted through Creative Corrections, LLC., of Beaumont, Texas. This was the first PREA audit for the Donna CPC since its construction in 2021. The Donna CPC is a soft-sided facility in Donna, Texas. The facility's primary purpose is to safely process individuals in U.S. Border Patrol custody. The facility is weatherproof, climate-controlled, and provides ample areas for eating, sleeping, and personal hygiene. The 185,000 square foot facility sits on 40 acres. The temporary facility was built to provide processing capacity for Border Patrol's Rio Grande Valley Sector while the permanent Centralized Processing Center in McAllen, Texas was undergoing renovation.

The purpose of the audit was to determine compliance with Subpart B of the DHS PREA Standards. The on-site audit followed the Auditor's electronic review of CBP's PREA policies and procedures and telephonic interviews with CBP Headquarters (HQ) Subject Matter Experts (SMEs). The electronic documents were provided on the secure CBP SharePoint website which included the HQ Pre-Audit Questionnaire (PAQ), the facility local PAQ, and any other supporting materials including training curricula to demonstrate compliance with the PREA standards.

The Point of Contact (POC) for the Donna CPC was (b) (6). (b) (7)(C), Special Operations Supervisor (SOS). To facilitate midnight shift interviews the Auditor initiated (b) (7)(C) staff and supervisory interviews prior to the facility tour. There are order shifts for staff at the Donna CPC. The shifts are (b) (7)(C) The Auditor was informally introduced to the Donna CPC leadership team by the POC upon arrival at which time the Auditor reviewed the audit format and schedule with the team. Immediately following the entry introductions, the Auditor was provided a private room to begin conducting staff interviews.

At approximately 0900 hours, all parties were provided a tour of the Donna CPC by the ADPAIC, the SOS, PREA Field Coordinator (PFC) and several Supervisor Border Patrol Agents (SBPA)s. The tour followed the path someone would take from their arrival at the facility through the sally port, intake, processing, and placement in holding. The Auditor observed the Audit Notices posted throughout the facility during the tour. There are currently as soft sided buildings that are operating, (b)(7)(E). Each soft sided building has prove pods with each pod containing (b)(7)(E). Each soft sided building has prove pods with each pod containing (b)(7)(E). Each soft sided building has prove pods with each pod containing (b)(7)(E). Detainees enter through this area and meet with medical staff and caregivers to ensure their safety prior to entering the large processing area. Detainees are asked questions regarding their health and if they have any concerns for their safety during this intake process. The Auditor observed a variety of posters in both Spanish and English, tables, seats, bottled water, and clean dry clothes were also available if needed upon their arrival. The Auditor verified that the PREA Risk Assessment was conducted in this outside area of intake and logged in the **street** (b)(7)(E) inside the (b)(7)(E) inside the CBP agents. There are are are individual isolation rooms within the processing area if needed.

(b) (7)(E)

The Auditor observed the with no areas being of high risk for violations within the DHS PREA standards or any inappropriate viewing of detainees by staff. There is a separate area for further medical assessments, medication pass and medical isolation. If the outprocessing of detainees. There are involved to detainees who may need medical isolation from others and for the out processing of detainees. There are involved pods with interiore large rooms within the involved soft sided building. Medical staff work 12-hour shifts. Only law enforcement officers and trained contract staff have direct contact with detainees. The flow of detainees is not the primary factor driving staffing levels. Staffing levels are dependent on the border security mission or humanitarian missions.

Scope of the Audit: Prior to the on-site audit, the Auditor was able to review the HQ and Local Pre-Audit Questionnaires (PAQs), the HQ Responsive Documents and Data Requests, local documents, including the Donna CPC specific documents, HQ participation documents, and medical provider websites. The Auditor conducted telephonic interviews with the HQ SMEs and spoke directly with the local SOS responsible for completing the local PAQ while on-site. The Auditor also spoke with and interviewed hospital personnel at the Knapp Medical Center located in Weslaco Texas to confirm they would provide a Sexual Assault Nurse Examiner (SANE) to any detainee alleging sexual abuse/assault. The Children's Advocacy Center of Hildalgo and Starr Counties confirmed that they would provide advocacy services to any victim of sexual abuse should they so desire. The CACHSC also confirmed through a telephonic interview, that a FME could also be facilitated within their medical facility for children of sexual abuse. The services are provided free of charge to the detainees and operate 24 hours a day for all forensic medical examinations and advocacy services. The Auditor was able to use a private telephone line to access the Office of Inspector General (OIG) to test the outside entity to report sexual abuse by detainees.

The Auditor was given a complete tour of the Donna CPC and was able to revisit areas as requested. The Auditor had complete access to the facility and observed all detainee processing areas, all soft sided buildings and pods and the isolation rooms. The Auditor observed PREA Audit Notices posted in various areas of the facility in both English and Spanish for staff and detainees to view along with posters advising detainees of their right to be free from sexual abuse. Posters were also observed with detainee reporting numbers and explaining the zero-tolerance policy of the agency.

During the on-site audit, the Auditor interviewed law enforcement personnel (BP agents) from all **DOTE** shifts. The Auditor interviewed five local SMEs, six agents, two contract medical staff, and two contract caregivers. Interviews were conducted randomly and based on the size of the facility and staff availability. The Auditor also interviewed three unaccompanied children (UC) detainees all aged 17 years with two females and one male UC. There were two UCs from El Salvador and one from Guatemala. The Auditor interviewed ten adult detainees. The adult detainee interviews consisted of four males, and six females. Two detainees were from Mexico, three from Columbia, three from Honduras, one from El Salvador and one from Venezuela.

An exit briefing for the Donna CPC was held at approximately 1330 hours on Wednesday June 5, 2024. The exit briefing was conducted by Creative Corrections Certified PREA Auditor (b) (6), (b) (7)(C). Those in attendance for the briefing were:

(b) (6), (b) (7)(C), Acting Deputy Patrol Agent in Charge (ADPAIC)
(b) (6), (b) (7)(C), Special Operations Supervisor (SOS)
(b) (6), (b) (7)(C), Supervisory Border Patrol Agent (SBPA)
(b) (6), (b) (7)(C), Special Operations Supervisor (SOS)
(b) (6), (b) (7)(C), Special Operations Supervisor (SOS)
(b) (6), (b) (7)(C), Mission Support Specialist/PREA Field Coordinator (MSS/PFC)
(b) (6), (b) (7)(C), Deputy Prevention of Sexual Assault Coordinator (DPSA), HQ Privacy & Diversity Office
(b) (6), (b) (7)(C), Branch Chief, USBP HQ – via TEAMS
(b) (6), (b) (7)(C), Supervisory Border Patrol Agent (SBPA) - HQ USBP – via TEAMS
(b) (6), (b) (7)(C), Director, Policy and Compliance, USBP HQ – via TEAMS
(b) (6), (b) (7)(C), Program Manager (PM) Creative Corrections, LLC – via TEAMS

During the exit interview, the Auditor discussed the observations made during the on-site review and the audit process. The audit process included the triangulation of the pre-audit, on-site audit, and post audit review of policies, protocols, and documentation to determine compliance of 25 DHS Subpart B Standards at the Donna CPC, with the final determination being 25 standards in compliance. The Auditor reviewed all relevant policies, procedures, and documents in assessing the Donna CPC. The Auditor conducted a records review for a random selection of 18 staff, which included information on background checks and staff PREA training records for all staff including contractors. Per the DPSA Coordinator and information listed in the pre-audit documentation, there are three pending PREA allegation investigations pending during the audit period.

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 Donna CPC on-site audit began on Tuesday June 4, 2024 was completed on Wednesday June 5, 2024, and the findings report was submitted on July 1, 2024.

The Donna CPC met 25 standards: 115.111; 115.113; 115.114; 115.115; 115.116; 115.117; 115.118; 115.121; 115.122; 115.131; 115.132; 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.

SUMMARY OF AUDIT FINDINGS				
Number of standards exceeded: 0				
Number of standards met: 25				
Number of standards not met: 0				
OVERALL DETERMINATION				
Exceeds Standards (Substantially Exceeds Requirements of Standards)	🛛 Low Risk			
Meets Standards (Substantial Compliance; Complies in All Material Ways with the Standards for the Relevant Review Period)	Not Low Risk			
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:

(a): The facility meets the standard. The agency has taken definitive steps to inform the public, all employees, and detainees of its adherence to the PREA Standards. CBP Directive 2130-030 – Prevention, Detection and Response to Sexual Abuse and/or Assault in CBP Holding Facilities, dated January 19, 2018; Commissioners Memorandum dated July 15, 2014, Implementation of the Standards to Prevent, Detect, and Respond to Sexual Abuse and Assault in Holding Facilities / Prison Rape Elimination Act (PREA); the Commissioner's Memorandum dated March 11, 2015; CBP's Policy on Zero Tolerance of Sexual Abuse and Assault; Acting Commissioner's memorandum dated January 19, 2018, Standards to Prevent, Detect, and Respond to Sexual Abuse and Assault in CBP Holding Facilities; Chief USBP memorandum dated October 8, 2015, Implementation of the CBP National Standards on Transport, Escort, Detention and Search (TEDS); and Chief USBP memorandum dated August 13, 2014, Implementation of the Standards to Prevent, Detect, and Respond to Sexual Abuse and Assault in CBP Holding Facilities clearly outlines the duty of all CBP staff members to prevent, detect and respond to all allegations or observations of sexual abuse. Additionally, during Sexual Assault Awareness and Prevention Month observed in April, the Privacy and Diversity Office messaged information to all employees regarding CBP's zero tolerance of sexual abuse and assault policy through payroll notice statements and CBP Central. Zero tolerance posters are positioned throughout the processing and holding areas of the facility in both English and Spanish as well as "Report Sexual Assault" in seven different languages. If the detainee speaks a language other than English or Spanish, (or a language that the agent does not speak) agents can use several CBP language resources available to its employees to include telephonic language interpretation services available 24 hours a day, seven days a week. In addition to English and Spanish, CBP has PREA posters for adults translated into 12 other languages and for children, translated into 15 other languages for posting as needed. CBP's translated PREA posters may be accessed along with PREA Posters, Information Display System Slides, Videos, and Scripts through CBP's internal website. CBP's language access resources may also be accessed through the internal website. If the detainee speaks one of these languages, translated material is obtained for them. Interviews with the local SMEs emphasized staff training on the agency's zero-tolerance policy and agent interviews verified their training and understanding of the policy and the PREA standard. Reminders of mandatory training available through the CBP Acadis on-line training portal are shared with all employees. Local SME interviews and random agent interviews verified that dedicated personnel are in place to ensure the PREA provision is in compliance.

§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)
- \Box Does not meet Standard (requires corrective action)

Notes:

(a): The facility meets the standard provision. The standard requires that each facility maintain adequate levels of detainee supervision through appropriate staff levels and (b)(7)(E) to protect detainees against sexual abuse. There is one centralized control room (b)(7)(E) Each pod is supplied with agents baving direct line of vision with each large room within the pod to ensure the safety of the detainees. The Auditor was able to view through direct observation that detainees could be supervised through the glass windows and doors of

each pod by all agents. Agents have direct line of vision in the processing areas, **(b)** (7)(E) The population of detainees is divided by adult male head of household, adult female head of household, family units with children, juvenile males, and juvenile females. During the local SME interviews, it was confirmed that checks of detainees are completed every **(b)** (7)(E) as verified in the **(b)** (7)(E) It is determined during intake and based upon the detainee demographics where each will be placed. Staff report that detainees are separated by age, gender and "at risk" determinations made during the intake process to enhance the level of supervision to keep detainees safe as part of the preventative measures. During local SME interviews, it was reported that agents are readily available, if there is an influx of detainees or a need to increase the supervision of detainees. There were large numbers of detainees processed through in the past 12-months to include adult male head of household, female head of household, single adult females, family unit with juveniles, and unaccompanied children (UC) as observed through documentation review submitted prior to the on-site visit.

(b)(c): The facility meets the standard provisions. CBP Directive 2130-030; Chief USBP memorandum dated October 8, 2015, Implementation of the CBP National Standards on TEDS; Chief USBP memorandum dated August 13, 2014, Implementation of the Standards to Prevent, Detect, and Respond to Sexual Abuse and Assault in CBP Holding Facilities; and Chief USBP memorandum dated February 16, 2020, Review of Comprehensive Detainee Supervision Guidelines requires the U.S. Border Patrol to develop and document comprehensive detainee supervision guidelines to determine and meet the detainee supervision needs which has been accomplished through its National Standards on TEDS. CBP Directive 2130-030 further states, the detainee supervision guidelines, and its application at the Donna CPC is to be reviewed at least annually considering the physical layout, composition of detainees, the prevalence of substantiated and unsubstantiated instances of sexual abuse, findings and recommendations of incident reviews, and any other relevant factors. The Directive further requires the results of the annual review are to be forwarded to the PSA Coordinator. Local SME interviews confirm they re-evaluate supervision strategies on a regular basis, especially when there is an influx of detainees. They revealed they also request assistance from other stations should the need arise. The Auditor reviewed the annual review of detainee supervision guidelines which was conducted on October 24, 2023, prepared by SOS biological Participants included one (A)SOS, and one SOS. The assessment included all areas as required by the Standard and CBP TEDS (October 2015). The assessment concluded that the Donna CPC has sufficient levels of supervision; therefore, meeting the standard provision.

§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)
- \Box Not Applicable (provide explanation in notes):

Notes:

(a): The facility meets the standard provision. CBP TEDS and Chief USBP memorandum dated August 13, 2014, Implementation of the Standards to Prevent, Detect, and Respond to Sexual Abuse and Assault in CBP Holding Facilities requires juveniles be treated at all times in their best interest and all guidelines for at risk populations be taken into consideration and place each juvenile in the least restrictive setting appropriate to their age and special needs, provided the setting is consistent with the need to ensure the safety and security of the detainee and that of others. Local SME and agents report all juveniles who are a part of family units, or any UC are held in the least restrictive setting as possible. They state juveniles are kept with their families and are also kept in the least restrictive setting the facility has available. All agents interviewed state if juveniles were brought into the Donna CPC, they are kept in rooms within the pods with direct observation **(b)** (7)(E). There are two pods for juvenile males and females to be held separately based upon gender and age. Local SME interviews confirmed that family units and UC are separated outside at the intake area and are generally assisted by contract caregivers to ensure their safety and needs are met. Interviews with contract caregivers and medical staff confirmed this practice at the Donna CPC.

(b): The facility meets the standard provision. CBP TEDS requires UC be held separate from adult detainees. Local SMEs and agents report UC are kept separate from the adults and are then separated by gender. UC are processed through intake immediately to limit the time they are near adult detainees. Local SME and agent interviews confirm juveniles are immediately separated from accompanying adults until the relationship has been properly vetted and determined to be appropriate prior to holding. The interviews also confirmed a combination of agency and State

Department database searches with separate interviews of both the minor and the accompanying adult are used to vet the relationship, along with any accompanying documents with the detainee. Staff were able to articulate their interviewing skills included eye contact, speech patterns and direct observation of the relationship between the parties involved. All techniques and vetting processes are measures used to ensure the safety of the juvenile. The Auditor was able to confirm through direct observation that juveniles and UC are separated by gender, age, and family units. The Auditor interviewed three UCs while on site which revealed they feel safe and are held separate from adult detainees.

§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)
- \Box Does not meet Standard (requires corrective action)

Notes:

(b)(c): The facility meets the standard provisions. CBP TEDS details the type and conditions under which searches can be performed to ensure the safety of agents, civilians, and detainees. It prohibits cross-gender strip (partial body) searches and cross-gender visual body cavity searches, except in exigent circumstances including consideration of agent safety, or when performed by medical practitioners. If performed, the policy requires strip/body cavity searches be recorded in the **searches** and are to refer all body cavity searches of juveniles to a medical practitioner. Interviews with local SMEs and agents report only medical staff can conduct a strip or a visual body cavity search of an adult or juvenile. The local SMEs and agents report body cavity searches are not permitted at the Donna CPC and would only be conducted at a hospital under a medical practitioner's care. Agents interviewed reported they have never seen strip or body cavity searches conducted at the facility. When asked whom could conduct cross-gender searches, the agents report that anyone could conduct such searches however, agents would have the detainee searched by staff of the same identified gender as the detainee when operationally feasible. All agents interviewed report cross-gender searches searches would rarely occur as the Donna CPC due to having both male and female agents on duty each shift.

(d): The facility meets the standard provision. CBP TEDS specifies the requirements of enabling detainees to shower (where showers are available), 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. Such viewing may also be appropriate in connection with a medical examination or under medical supervision. Local SMEs and all agents interviewed report detainees have several private toilets in each room in each pod. Detainees can use the toilet without staff of the opposite gender viewing them. Each large room in the pods contains a row of four toilets that look like an enclosed port-a-potty. The doors on the toilets do not reach the floor all the way,

(b) (7)(E)

(b) (7)(E)

CBP TEDS requires all officers/agents of the opposite gender to announce their presence when entering an area where detainees are likely to be showering, performing bodily functions, or changing clothing, except in exigent circumstances or when such viewing is incidental to routine hold room checks. Interviews with local SMEs and agents indicated they knock on the door and make a verbal announcement prior to entering. All staff interviewed report they are aware of the policy requiring staff to announce their presence when entering an area where detainees are likely to be in a state of undress. The Auditor was able to conduct ten detainee interviews confirming they felt safe, and they were not viewed by staff of the opposite gender and that staff announce their selves prior to entry.

(e): The facility meets the standard provision. CBP TEDS (Memorandum dated August 13, 2014) prohibits staff from searching or physically examining a detainee for the sole purpose of determining the detainee's gender. If the detainee's gender is unknown, CBP TEDS states officers/agents will ask the detainee their gender or gender identity. If the detainee declines to state their gender, the gender will be recorded in the appropriate electronic system(s) of record as unknown. A memorandum from USBP Deputy Chief, dated January 17, 2023, titled: Reminder on Searching Transgender, Intersex and Gender Non-Conforming Individuals was sent out for all Chief Patrol Agents and All Directorate Chiefs to pass on to all staff during muster. The memorandum directs border agents to not search or physically examine an individual for the sole purpose of determining an individual's gender. There were no detainees onsite who identified as transgender or intersex to be interviewed. Agents at the facility reported during their

interviews that they do not search detainees solely for the purpose of determining gender. Agents interviewed state that they ask a detainee their gender should any issues arise in making that determination. Any transgender or intersex detainee requiring a pat-down search would be asked which gender they would prefer to complete the search prior to proceeding. The Auditor did not interview any transgender detainees as there were none identified during the on-site audit.

(f): The facility meets the standard provision. CBP TEDSs directs staff to conduct searches in a professional, thorough, and a reasonable manner consistent with the type of search required and that a search must be of the same gender, gender identity, or declared gender when operationally feasible. A memorandum from USBP Deputy Chief, dated September 17, 2020, and January 17, 2023, entitled: Reminder on Searching Transgender, Intersex and Gender Non-Conforming Individuals was sent out for all Chief Patrol Agents and All Directorate Chiefs to pass on to all staff during muster. Interviews with random staff and local SMEs confirmed that they have had training and refresher trainings throughout the year regarding pat-down searches, to include transgender detainees. Interviews with local SMEs and agents reported all had been trained in how to conduct pat-down searches, including cross gender pat-down searches. Interviews concluded that staff were able to articulate how they would conduct a cross gender pat-down search per the training received and within the required guidelines all in a respectful and professional manner. However, staff interviewed advised that they have not had to conduct such a search due to having sufficient staff able to cover those type of searches should the need arise. There were no transgender detainees to interview during the on-site visit.

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

- \Box 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:

(a): The facility meets the standard provision. CBP Directive 2130-030 requires staff in holding facilities to provide reasonable accommodations to detainees who are hearing impaired, blind, or visually impaired, or who have intellectual or mental health disabilities. CBP Directive 2130-033, Non-discrimination for Individuals with Disabilities in CBP-Conducted Services, Programs, and Activities (Non-Employment), with an effective date of July 8, 2021, which also includes a job aid providing guidance to staff on effective communication with individuals with disabilities. The job aid further defines different types of disabilities and examples on how to address those disabilities; CBP Directive 2130-031, Roles and Responsibilities of U. S. Customs and Border Protection and Personnel Regarding Provision of Language Access, December 4, 2018, provide information and guidance to all CBP staff. Staff interviews confirm they have received the recent guidance regarding disabled and Limited English Proficient (LEP) detainees and the materials are frequently discussed during musters. The staff discussed the various steps the agents and supervisors take to provide accommodations to detainees with these disabilities which included reading PREA notices to visually impaired and functionally illiterate detainees, call in a translator, and would also have the option to have medical clinicians including behavior health care and contract caregivers assist where needed. Interviewed local SMEs and agents state there have been no detainees with disabilities held at the Donna CPC within the audit period which required special communications or the use of outside translation resources. The Auditor was able to observe during the tour that agents had written contact information for translation services available at their workstations. There were not any detainees during the on-site visit that required any special needs assistance for communication other than the LEP detainees.

(b): The facility meets the standard provision. CBP Directive 2130-030 requires all holding facilities to provide effective, accurate and impartial in-person or telephonic interpretation services to detainees who are LEP. All PREA posters were displayed in plain view for detainees and were observed in both English and Spanish and a poster which provides direction in commonly spoken languages should the detainee not be understood immediately. All agents interviewed state they have been able to communicate with LEP detainees because they speak Spanish as a second language which is the primary language of detainees entering the Donna CPC. None of the interviewed agents have reported the need to use any additional services available to communicate with a detainee. The Auditor was able to verify through direct observation the contact information to assist any LEP detainee is available to each agent at the processing stations via a list of telephone numbers, and interpreters should the need arise. All interviewed agents

were aware of the translation resources available to them. There were no detainees being held during the onsite audit that needed any special translation accommodations for limited hearing, vision, or mental incapacities. The Auditor was able to interview ten detainees during the two-day on-site visit by using a telephonic translating service for the LEP detainees.

(c): The facility meets the standard provision. CBP Directive 2130-030 directs that other detainees are not to be utilized as interpreters when a detainee has alleged sexual abuse or has been found to be sexually abused. The Auditor was able to verify local practices consistent with the Directive through interviews with the local SMEs, and agents. Interviewed staff were able to articulate that the language line, or the use of a neutral staff member would be used in place of a detainee translator to ensure the safety of the detainee reporting the allegation.

§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:

(a): The facility meets the standard provision. CBP Directive 2130-030 requires the Office of Human Resources Management (HRM) ensure compliance with hiring, promotion and discipline requirements as outlined in the standard provision. Subsequently, HRM Standard Operating Procedures (SOP) Prison Elimination Act, Hiring and Promotions, was issued on February 29, 2016, establishing procedures to ensure the agency does not hire or promote anyone who may have contact with detainees and shall not enlist the services of any contractor or volunteer who may have contact with detainees and shall not enlist the services of any contractor or volunteer who may have contact with detainees in or been convicted of sexual abuse in a prison, jail, holding facility, community confinement facility, juvenile facility, or other institution as defined in (42 USC 1997). The SOP further provides specific directions to staff of the hiring and promotion process to assure the standard is followed. Interviews with the HQ Office of Professional Responsibility (OPR)/Personnel Security Division (PSD) SME and the HRM/Hiring Center SME confirmed the process for determining suitable employment for all prospective CBP staff and contractors and to screen out anyone for promotion who has engaged in this conduct.

(b): The facility meets the standard provision. Interviews with HQ HRM/Hiring Center SME verifies new employees, employees seeking promotions and contractors must complete an application which asks about previous sexual misconduct and imposes a continuing duty to disclose any such future misconduct.

(c)(d): The facility meets the standard provisions. CBP Directive 2130-030 requires background investigations for applicants seeking employment who may have contact with detainees to determine suitability and that updated background investigations are conducted every five (5) years for CBP personnel who may have contact with detainees. The Directive further requires background investigations for contractors who may have contact with detainees. The Auditor submitted a list of 15 randomly selected agents of varying ranks and three contractors who are employed at the facility. Those names were provided to the facility for submission to the HQ OPR to ensure their background checks were conducted timely and in compliance with the standard. Review of the submitted checks found the agency in compliance with all pre-hire and five-year updated background investigations. The agency automatically enrolls employees upon their entrance on duty in the Continuous Evaluation (CE) System which is a personnel security investigative process to review the background of employees. The HQ OPR/PSD SME explained the CE system and stated the system allows for an ongoing assessment of an individual's continued eligibility, thereby, eliminating the need for the five-year re-investigations for those who have been enrolled in the CE System. Prospective employees are asked questions during the application and interview process regarding any prior history of sexual abuse and a continuing duty to report any new sexual misconduct.

(e): The facility meets the standard provision. Interviews with HQ HRM/Labor Employee Relations (LER) SME confirms it is agency policy to rescind an offer of employment to a prospective employee or to terminate the employment of any such employee who makes a material omission or provides false information regarding sexual abuse misconduct. Staff are informed of the policies regarding material omissions and providing any false information in the CBP Directive 51735-013B, Standards of Conduct, with an effective date of December 9, 2020, is provided to staff upon employment and which is referenced in their yearly required ethics training through the Acadis training portal.

(f): The facility meets the standard provision. CBP Directive 2130-030 allows for the provision of any substantiated allegations of sexual abuse regarding former employees upon receiving a request to do so from an institutional partner for whom such an employee has applied to work, unless prohibited by law. The interview with the HQ HRM/LER SME confirmed the Directive is followed by the agency.

§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)
- \boxtimes Not Applicable (provide explanation in notes):

Notes:

(a): The standard provision is not applicable as the Donna CPC has not acquired a new facility or undergone a major expansion since opening in 2021.

(b): The standard provision is not applicable as the Donna CPC has not made **(b)** (7)(E) since their opening in 2021; however, the local SME stated that PREA supervision and privacy concerns would be taken into consideration for any new/updated technology and how it would enhance the ability to aid in the protection of sexual abuse against detainees.

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

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

Notes:

(c): The facility meets the standard provision. CBP TEDS and CBP Directive 2130-030 requires timely, unimpeded access to medical treatment and crisis intervention, including emergency contraception and sexually transmitted infections prophylaxis, be provided to a detainee victim of sexual assault in accordance with professionally accepted standard of care. CBP Directive 2130-030 further requires a forensic medical examination be conducted by a qualified health care personnel, including a Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE), where practicable. The Donna CPC utilizes the services of the Knapp Medical Center located in Weslaco, Texas for any needed forensic medical examination (FME) of a sexual abuse victim, at no cost to the detainee and only with the detainee's consent. The examination is performed by a SANE who is available on-call through the hospital. The Auditor confirmed via a telephonic interview with emergency room hospital receptionist that the services are provided by a SANE, or qualified medical physician. The local SME stated the Knapp Medical Center would be utilized for a detainee victim of sexual abuse.

(d): The facility meets the standard provision. CBP TEDS requires officers/agents to allow detainee victims access to victim advocacy services, to the extent available and consistent with security needs, while at the hospital for forensic examinations (FME) due to sexual abuse/assault. The Auditor also confirmed through telephonic interview with a victim advocate at the Children's Advocacy Center of Hildalgo and Starr Counties (CACHSC), that a FME could also be utilized within their medical facility for children of sexual abuse. Both the Knapp Medical Center and CACHSC confirmed the use of victim advocates to assist with all services to minimize the amount of suffering each victim may endure as a part of the investigation process, and the FME. All advocacy services and any follow-up community advocacy services during an FME, and any follow-up community assistance needed at the request of the detainee and at no charge to the detainee. Services are made available 24-hours a day, seven days a week. Confirmation of services was made by the Auditor during a telephone conversation with an advocate at CACHSC. Advocates are called through emergency medical staff at Knapp Medical Center. Local SMEs confirmed during interviews their awareness of advocacy services available to detainees through CACHSC for FME, any follow-up assistance within the community, and the alleged victim of sexual assault would be provided timely access to U Nonimmigrant visa status information.

(e): The facility meets the standard provision. The local SME stated the Donna Police Department and Hidalgo County Sheriff's Department would be the main law enforcement agencies contacted for criminal investigations. Both departments have been advised of and are agreeable to following the PREA requirements. Copies of confirmation letters were provided to the Auditor for verification of services and documentation requesting the law enforcement agencies follow the PREA standards when conducting investigations. A verification letter was reviewed by the Auditor during the pre-audit process for the Donna Police Department dated April 11, 2024.

§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)
- \Box Does not meet Standard (requires corrective action)

Notes:

(c): The facility meets the standard provision. CBP Directive 2130-030 requires prompt reporting of all sexual assault allegations to the Joint Intake Center (JIC) and Commissioner's Situation Room (CBP WATCH), and if potentially criminal, to the appropriate law enforcement agency. All interviewed local SMEs report they will immediately report such incidents up the chain-of-command and the JIC. During an SME interview, the SOS stated that the delegated WC or supervisor on duty is responsible for informing the local law enforcement as appropriate.

(d): The facility meets the standard provision. Interview with the HQ DPSA Coordinator and information provided by the HQ OPR/Sexual Abuse and Assault Investigative (SAAI) SME reported there were three PREA allegations made within the 12-month audit period at the Donna CPC. All allegations are currently under investigation. The PAQ documents indicates that on two separate incidents a UC alleged that another UC inappropriately touched him. The incident occurring in January 2024, the UC was cleared by medical staff and a report made to the Donna Police Department. The PAQ further states all PREA notifications were made. The PAQ also indicates on [D107.010706], the Donna Police Department notified CPC staff that a female alleged that while detained in [D107.010706] at the Donna CPC, a staff inappropriately touched her upon intake at the Donna CPC. The DPSA Coordinator verified that the appropriate offices and notifications were made, and all three allegations are pending investigation completion. Additionally, on January 31, 2024, the Office of Civil Rights and Civil Liberties sent an email to CBP indicating they received a referral from the Office of Refugee and Resettlement that a UC alleged that while detained at Donna CPC, another UC had inappropriately touched him. It is unknown of the date of occurrence, status of the third-party referral, or if it was related to one of the incidents as stated above. Local SME interviews also confirmed that all allegations of sexual abuse are promptly reported to the PSA or DPSA Coordinator by the supervisor on duty.

§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:

(a)(b): The facility meets the standard provisions. CBP Directive 2130-030 requires all uniformed agents and officers, special agents, fact finders, contractors and volunteers who may have contact with the detainees in CBP holding facilities shall receive the training required in Subpart B of the DHS Standards. A memorandum dated November 23, 2022, from the Executive Director of the Privacy and Diversity Office was sent out for distribution ensuring all CBP agents and contractors complete the mandatory training within one year of initial hire and thereafter receive refresher training every two years. The Auditor reviewed training records on site to verify that all active staff at the Donna CPC were trained within two years of the effective date of the standards or upon their hire, if hired after the initial training. Training records also confirm that all law enforcement staff receive bi-annual refresher training as required. Agent interviews confirm bi-annual PREA training on the Acadis training portal and refresher pat-down search trainings through musters and quarterly training topics. CBP has also developed two training aides in assisting staff with communicating with detainees with disabilities and a guide to facilitate effective communication with individuals who identify as LBGTQI+. Reminders regarding sexual abuse and/or sexual assault are provided through various forms of communication to the staff. CBP has also created the PREA Resource Center which includes policies and various information regarding CBP's zero tolerance of sexual abuse and/or assault. Mandatory training is also required for

contractors and volunteers. CBP also provides a training course for Volunteer Training, through the Federal Emergency Management Agency (FEMA), "Preventing and Addressing Sexual Abuse and Assault of Individuals in CBP Holding Facilities." The Auditor reviewed the mandatory training presentation slides, "Preventing Sexual Abuse in CBP Holding Facilities." The training consists of: the agency's zero-tolerance policies; detainees and employees rights to be free from sexual abuse and from retaliation for reporting sexual abuse; definitions and examples of prohibited and illegal sexual behavior; recognition of situations where sexual abuse may occur; recognition of physical, behavior, and emotional signs of sexual abuse, and methods of preventing such occurrences; procedures for reporting knowledge or suspicion of sexual abuse; how to communicate effectively and professional with detainees, including LGBTOI+, or gender nonconforming detainees; and the requirement to limit the reporting of sexual abuse to personal with a needto-know in order to make decisions concerning the victim's welfare for law enforcement or investigative purposes. Local SME and agent interviews verified the required mandatory training has been received through the Acadis training portal. Previous training was conducted online through the Performance and Learning Management System (PALMS). All contract employees receive initial training and refresher training bi-annually as confirmed through on-site document review and interviews. The Auditor interviewed two medical contract employees while on site. The contractors were able to articulate the training that was received in accordance with DHS and PREA standards. Medical contractors are provided through Loyal Source. The Auditor also interviewed two contract caregivers who are provided through Luke. Both interviewed caregivers confirmed receiving their annual PREA training. The Donna CPC does not utilize volunteers as confirmed through the local SMEs during interviews.

(c): The facility meets the standard provision. CBP Directive 2130-030, stipulates that the agency document PREA training. During the review of training records, the Auditor verified the training is electronically maintained through the Acadis training portal. The Directive further requires that the training shall be documented by the Contracting Officer's Representative and maintained for at least five years after the course completion for all contractors who have completed the training. Training records are maintained electronically as required by the standard. Local SME and agent interviews confirmed compliance. Training records and curriculum were reviewed on-site and through pre-audit documentation provided.

§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)
- \Box Does not meet Standard (requires corrective action)

Notes:

The facility meets the standard. The Donna CPC has maintained colorful, large print posters of DHS Zero-Tolerance Policy in view of all detainees' pods, intake, medical, and processing areas. The posters are printed and posted in English and Spanish, but also contain a box providing zero tolerance and reporting information in all common languages. In addition, CBP addresses zero tolerance prominently on its website, www.cbp.gov/about/care-in-custody. CBP has added numerous methods of providing information to the detainee population on CBP's zero-tolerance policy. They developed age-appropriate colorful posters, informational display system slides, and scripts to provide key information regarding zero tolerance of sexual abuse and sexual assault and how to report incidents of sexual abuse and/or assault at CBP holding facilities. The posters were observed at the Donna CPC published in English and Spanish; however, they also have access to posters in several other languages depending on the type of population received at the facility. CBP also disseminated two videos for use at the facility in Spanish, one depicting a girl and the other a boy, to encourage compliance with CBP's zero-tolerance policy of sexual abuse and sexual assault and to encourage immediate reporting of behaviors that may constitute sexual abuse and/or sexual assault. The Donna CPC has maintained all information posted geared toward juveniles and adults in areas for all detainees to view. This was verified during the facility tour by the Auditor. Interviews with the local SME verified that facility maintains a variety of methods as listed, for detainee notification of the zero-tolerance policy in a visible and continuous manner. Agents were able to confirm when asked questions regarding detainee safety and expressed the knowledge of multiple ways for detainees to understand and receive the zero-tolerance policy. The Auditor interviewed ten detainees while on-site. Detainees were able to confirm seeing and reading the posters regarding being safe from sexual assault and ways to report sexual assault.

§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)
- \Box Does not meet Standard (requires corrective action)
- \boxtimes 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:

(a)(b)(c)(d): The facility meets the standard provisions. CBP Directive 2130-030 requires staff to mitigate and identify dangers to a detainee and will ask the detainee the reasons for their concerns for their physical safety. The Directive further requires that if a detainee is determined to be at risk for sexual victimization be provided with heightened observation. A memorandum from the Chief, U.S. Border Patrol, dated October 8, 2015, to all Chief Patrol Agents, all Directorate Chiefs, and all Directorate Executive Directors advised them CBP TEDS incorporated requirements related to sexual abuse and assault prevention and response, care of at-risk individuals in custody, and personal property. CBP TEDS requires that all detainees be assessed for being at-risk of sexual assault before being place in a hold room or holding facility. The assessment by policy, includes whether the detainee has exhibited a mental, physical, or developmental disability; the age of the detainee; their physical build; any prior arrests or incarcerations; whether the detainee self identifies as LGBTQI+ or gender non-conforming; any prior sexual victimization and the detainee's own concerns about his/her physical safety. Based upon the assessment, the intake agent is to decide whether the detainee needs to be placed alone or placed away from certain other detainees for their safety or other detainee safety. The Donna CPC staff make reasonable efforts to consider those areas when assessing detainees for risk of sexual victimization to the extent it is available at the time of intake prior to placing a detainee in a pod with other detainees. The Auditor was able to observe where the assessment process would take place while on-site. The Donna CPC begins their safety questions with detainees prior to entry into the facility by an agent in sally port/intake area and subsequently each detainee is asked if they have any safety concerns by a medical contractor at the outside waiting/intake area privately and again during the continued intake process. If any concerns are noted by either, the agent documents and passes along the information to the next agent continuing the assessment process inside the processing area prior to entry into a hold room or pod. Each detainee is then fingerprinted and asked further assessment questions in a private and confidential manner by agents in the processing area of (b)(7)(E). Agents also "watch" for any discerning cues that may lead them to believe the detainee is at risk for being a potential victim or perpetrator of sexual abuse. All observations and assessment questions are then notated in the computer system for each detainee. Once the required assessment is completed, the agent then places the detainee

in pod appropriate for their age, gender, assessment results and safety concerns. Detainee interviews confirmed they were asked questions regarding their own safety concerns upon entering. Local SME and agent interviews confirmed this practice is completed prior to a detainee being placed in a pod or individual hold room. Agent interviews all confirmed they are aware of the importance of detainee safety and the requirement of asking the assessment questions prior to placing any detainee with another that may be of high risk to them. Detainees are asked intake and processing questions individually with staff in a private manner to ensure confidentiality. The Auditor was able to review past assessments within the **(b)(7)(E)** to confirm the practice is followed.

(e): The facility meets the standard provision. CBP TEDS requires staff to ensure assessments are provided in private where sensitive information cannot be learned by other parties. The Donna CPC agents and medical staff speak to detainees in a private and confidential manner within the intake and processing areas. The dissemination of sensitive information is to be controlled on a "need to know" basis. Local SME and agent interviews verify this practice as all information on detainees is kept in the **sense**(b) (7)(E) and not available to all staff.

§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:

(a): The facility meets the standard provision. Both CBP TEDS and CBP Directive 2130-030 requires detainees be provided multiple ways for detainees to privately report sexual abuse/assault, retaliation and/or staff neglect or violations leading to sexual assault. The Directive provides procedures for reporting alleged sexual abuse and/or assault are to be visible or readily available to detainees at holding facilities and posted on the CBP public website. The telephone information for the DHS OIG is found on the Keep Detention Safe posters located in the processing area and the private areas designated for making phone calls and detainee interviews. An email dated February 2018 was sent out to all CBP employees from the CBP central office with links to all policies and updates for staff to review. In December 2022, a memorandum from the USBP Chief was sent out to all employees regarding the Mandatory Training for Preventing and Addressing Sexual Abuse in U.S. Custom and Border Protection Holding Facilities.

(b): The facility meets the standard provision. CBP Directive 2130-030 requires the facility provide at least one way for detainees to report sexual abuse to a public or private entity not connected to the agency and detainees must be able to report confidentially and anonymously, if desired, as well as both verbally and in writing. An alleged inappropriate touching between minors occurred on January 16, 2024. The UC reported to agents, who notified the Acting WC, who made notifications and reported as a significant incident. By the detainee reporting, it is indicative that detainees are aware of reporting procedures. Local SME and agent interviews verify detainees may report abuse verbally or in writing to staff; third party reports are accepted, and a detainee may request to make a private anonymous telephone call to DHS OIG, their consulate, or any other outside entity. Detainees are informed they can call DHS OIG to report privately. The Auditor, through direct observation viewed the private telephone rooms and posters in which the DHS OIG number is provided. The Auditor called the number on the Keep Detention Safe poster to confirm a working anonymous telephone could be used by a detainee. This reporting method was verified by the staff on the receiving end of the call. If a detainee requests such a call, the agent will escort the detainee to the telephone room and dial the DHS OIG hotline number if the detainee is unable to dial the number. The detainee will have privacy and be observed visually from the hallway by the agent. Detainee interviews confirmed they were able to read the posters and understand how to make such a phone call if they needed to make a report.

(c): The facility meets the standard provision. Local SME and agent interviews revealed staff are aware that if third parties report allegations of sexual abuse and/or assault they are promptly reported and documented in writing. Staff state all sexual abuse and/or sexual assault allegations are taken seriously and reported to supervisors regardless of the method of the report.

§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)
- \Box Does not meet Standard (requires corrective action)

Notes:

The facility meets the standard. CBP Directive 2130-030 informs staff that third parties may report sexual abuse on behalf of detainees. CBP make public reporting procedures for sexual abuse of detainees at: https://www.cbp.gov/about/care-in-custody The website provides a toll-free Joint Intake Center Hotline phone number, email address, and physical address to allow different methods of reporting to the JIC. The website also provides, the phone number, email address, and an online reporting site for the DHS OIG. Local SME and agent interviews confirmed that third parties are provided different methods of reporting and further state if they received a third-party allegation, they would promptly notify their supervisor, document the report, and process the allegation. The PAQ reflects that two third party referrals were made by the Office of Civil Rights and Civil Liberties, upon receiving a referral from the Office of Refuge and Resettlement (ORR) regarding an inappropriate UC on UC touching incident. The incidents are in the investigative process.

§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:

(a)(b): The facility meets the standard provisions. CBP Directive 2130-030 requires all staff to immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse/assault; retaliation against detainees or staff who made such a report or participated in an investigation of sexual abuse, or any staff neglect or violation of responsibilities contributing to an incident or retaliation. CBP Directive 3340-025F, Reporting Significant Incidents to the U.S. Custom and Border Protection Watch, dated November 2, 2021, directs staff that sexual abuse and/or assault be reported to a unified hub which operates 24/7 to assure all significant incidents are reported immediately to all required leadership. All interviewed agents affirmed these responsibilities. When staff were asked how they could report outside of the chain-of-command, they all reported they could call DHS OIG or the JIC directly. Agents further stated that supervisors reviewed the PREA reporting requirements during musters as reminders throughout the year. A laminated job aid on reporting requirements was made available to all staff. April 2023 emails confirm staff receive reminders and "DHS PREA Standard in Focus" to ensure requirements are reviewed on a regular basis.

(c): The facility meets the standard provision. CBP Directive 2130-030 states except as necessary to report the incident, CBP and its staff shall not reveal any information related to the incident except as necessary to aid the detainee, to protect other detainees or staff, or to make security and management decisions. Agent interviews verify that the dissemination of information regarding a sexual assault is limited to their immediate supervisor, other staff necessary to protect the detainee and the crime scene, and only those others on a "need to know" basis.

(d): The facility meets the standard provision. CBP Directive 2130-030 requires the facility to report sexual abuse and/or assault allegations involving alleged victims under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute to the designated State or local services agency under applicable reporting laws. On January 16, 2024, an alleged inappropriate touching between minors was reported to the Donna Police Department by facility staff. The PAQ document states all notifications had been made. Interviews with local SMEs reveals sexual assault of victims under the age of 18 years and vulnerable adults, will be reported to the state of Texas Child Protective Services agency by the supervisor on duty or their designee and at the direction of the HQ OPR/SAAI Coordinator. The SME SOS interview confirmed this practice during the on-site visit.

§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:

The facility meets the standard. CBP TEDS and a Memorandum, dated August 13, 2014, from the Chief, U. S. Border Patrol, to all Chief Patrol Agents and all Division Chiefs requires any agency employee who believed circumstances exist which place a detainee at imminent risk of sexual assault to take immediate action to protect the detainee. Interviews with local SMEs and agents confirm that a detainee who may be at risk would immediately be protected by isolation or direct constant supervision (sight and sound) or both. The detainee would be removed from contact with other detainees and would be supervised, as directed by the local SME WC or supervisor on duty.

§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:

(a): The facility meets the standard provision. CBP Directive 2130-030 requires that should a detainee have been sexually abused and/or assaulted at another facility prior to arriving at the Donna CPC, the prior agency or administrator must be notified. Interview with the local SME SBPA verified that the PAIC or their designee would make the notification. A memorandum dated October 2015 from USBP Chief was issued with the title "Implementation of the CBP National Standards on TEDS" for staff review.

(b): The facility meets the standard provision. The standard provision requires that notification be made within 72 hours of receiving the allegation. This process was confirmed during interviews with local SMEs who stated the notifications would be made immediately which meet the standard provision.

(c): The facility meets the standard provision. The local SME SBPA indicated that the notification would also be notated in the **standard** (b) (7)(E).

(d): The facility meets the standard provision. The local SME SBPA reported that the Donna CPC follows all agency reporting requirements as specified in CBP Directive 2130-030. He stated that upon notification from another facility of an allegation of sexual abuse/assault which occurred at the Donna CPC, the JIC shall be notified immediately using the same process as if the detainee was present at the facility. Notifications would also be made to the PSA Coordinator by the supervisor on duty or WC per SME interviews.

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

- $\hfill\square$ 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:

(a): The facility meets the standard provision. CBP Directive 2130-030 details the responsibilities for the first agent on scene of a reported allegation. The Directive and the PREA training through the Acadis training portal provide the necessary steps to be taken if a detainee is sexually assaulted. The first responding agent or their supervisor is to perform all first responder duties delineated in the standard provision. Interviews were conducted with SMEs and agents, in which they explained their duties to include, separating the alleged victim and abuser, preserving, and protecting the crime scene if the abuse occurred within a time period that would allow for the collection of evidence, and requesting the alleged victim and ensuring the alleged abuser do not take any action that could destroy evidence. During the SME and agent interviews, they were able to articulate that they would ensure detainees do not eat or drink, use the toilet, or change/destroy clothing that may contain physical and or forensic evidence. Agents expressed the importance of maintaining any area/room in which a sexual assault may have occurred and secured from allowing others to enter to safeguard any potential evidence. The local SMEs and agents also stated that in addition to training all law enforcement personnel on first responder duties, the Donna CPC reviews these duties on a regular basis through staff musters and quarterly trainings. Staff also have the responder duties on their issued Quick Reference Card. The Quick Reference Cards provide important information for first responders if they witness or receive a report of sexual abuse. The card directs staff to notify their supervisor; separate the alleged victim and alleged abuse; preserve and protect the crime scene; request the alleged victim and direct the alleged abuser not to do anything that could destroy physical evidence, and refer the incident to the appropriate law enforcement agency; promptly report to the Joint Intake Center and the Commissioner's Situation Room (CBP WATCH); provide access to emergency medical treatment and crisis intervention services; and report allegations involving alleged victims under the age of 18 or a vulnerable adult under a State or local vulnerable persons statute to the designated State or local services agency. The card also states that upon receipt of an allegation that a detainee was sexually abused while confined at another facility, notify the appropriate office of the agency or administrator at the facility where the alleged abuse occurred; and if the alleged victim is transferred to another DHS facility, inform the receiving facility of the alleged incident and the potential need for medical or social services.

(b): The facility meets the standard provision. CBP Directive 2130-30 addresses non-law enforcement duties and requires the non-law enforcement staff to request the alleged victim does not take actions that may destroy evidence and to ensure the alleged abuser does not take any actions that could destroy physical evidence, including washing,

brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, and notify law enforcement staff. The local SME stated that the Donna CPC only allows trained law enforcement, trained medical staff and trained caregivers interactions with detainees during their entire holding period. The contract staff have also received first responder duty training in line with the DHS PREA Standards and were able to articulate during interviews the steps necessary to protect a victim of sexual abuse should they be the first responder.

§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)
- \Box Does not meet Standard (requires corrective action)

Notes:

(a): The facility meets the standard provision. A memorandum from the Acting Executive Director, Privacy and Diversity Office, dated February 2, 2018, advising staff of the issuance of CBP Directive 2130-030, constitutes CBP's written institutional plan for utilizing a coordinated multidisciplinary team approach to respond to sexual abuse and/or assault. The Directive provides a clear progressive plan for all components of addressing sexual abuse in holding facilities. On August 15, 2022, CBP developed a job aid, Quick Reference Card, which details first responder duties defining sexual assaults of a detainee by another detainee, sexual assault of a detainee by an employee, contractor, or volunteer. The job aid also includes first responder duties, notifications for investigations, forensic medical examinations, and incident reporting. Interviews with all local SMEs and agents verified an awareness of their requirement to provide medical care. They were also aware detainees must have access to victim advocates, if so desired and would be provided at the Knapp Medical Center, or the Children's Advocacy Center of Hildalgo & Starr Counties.

(b)(c): The facility meets the standard provision. CBP Directive 2130-030 requires the staff to notify another DHS facility if the victim of sexual abuse/assault is transferred there. This notification must include the detainee's need for medical or social services. These requirements were confirmed through the interview with the SME SBPA and the notification would be made by the PAIC or a designated supervisor.

§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:

The facility meets the standard. Regarding an allegation of sexual abuse by a staff member, interviews with local SMEs verified agency policy is to remove the staff member from contact with detainees pending the outcome of an investigation into alleged sexual abuse/assault or violations of agency policies at the consideration and discretion of agency management including the PAIC and Sector Chief. The PAIC would reassign any staff member whose allegations of sexual abuse/assault or violations of policy had been made against, and from public contact. This reassignment would remain in effect until the completion of the investigation. The Donna CPC would follow the same procedures for any contractor who has been alleged to commit the same violations as CBP staff. The PAIC or Sector Chief would seek removal of the contractor from the facility. The Donna CPC does not currently have any volunteers at the facility. This practice was confirmed during interviews with local SMEs. There were no allegations of sexual assault during the audit period at the Donna CPC according to the SME HQ/OPR interview.

§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:

The facility meets the standard. CBP TEDS prohibits all CBP staff from retaliating against any person, including a detainee, who alleges or complains about mistreatment, participates in sexual activity as a result of force, coercion, threat, or fear of force. CBP Directive 51735-013B clearly prohibits retaliation or sexually abusing and/or assaulting a detainee. The training on the implementation of this policy was verified by interviews with local SMEs. Interviews with agents report that retaliation is prohibited by the Directive, and all have been trained to look for signs of it occurring. All agents interviewed were able to provide examples of retaliation and reporting such behavior immediately to their supervisor on duty.

§115.171 – Criminal and administrative investigations.

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

Notes:

(a): The facility meets the standard provision. CBP Directive 2130-030 states CBP personnel may be subject to disciplinary action up to and including removal from their position and Federal Service for a substantiated allegation of sexual abuse/assault and/or for violating CBP's sexual abuse policies. CBP Directive 51735-013B gives notice to all CBP personnel they may be subject to disciplinary action for substantiated allegations of sexual abuse and/or assault. Interviews with HQ HRM/LER SME verified that disciplinary action is pursued in all cases of substantiated sexual assault or for violations of sexual abuse policies with removal of their position and the employee being barred from future federal service as the presumptive action. The HQ HRM/LER SME interviews confirmed that there have not been any removals or resignations during the audit period. Local SME interviews confirmed their awareness of the disciplinary process for staff and contractors who violate the sexual abuse policy and procedures.

(c): The agency meets the standard provision. The HQ PDO/DPSA Coordinator revealed there was one allegation of sexual assault by a staff member which was later reclassified as an indecent assault made during the 12-month audit period at the Donna CPC. The alleged incident was reported in the HQ OPR/SAAI SME confirms all allegations of sexual abuse would be referred to the appropriate law enforcement agency by the PAIC/RGV Sector Chief and notification is coordinated by the HQ OPR/SAAI SME.

(d): The facility meets the standard provision. The interview with HQ OPR/SAAI SME verified that removals for substantiated sexual abuse/violations of sexual abuse policies would be reported to relevant licensing bodies, to the extent known by HQ OPR/SAAI staff.

§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:

(a): The facility meets the standard provision. Interviews with the local SMEs revealed that all suspected contractor perpetrators of sexual abuse would immediately be removed from contact with detainees. The Donna CPC does not currently utilize any volunteers. The medical contractors were observed in both the outside entry and the medical screening room, along with contract caregivers, located in the detainee processing area of the facility. The interviews with medical contractors with Loyal Source and Caregivers with Luke, confirmed they have received the PREA training and are aware of any consequences associated with detainee sexual abuse. Interviews with the local SMEs indicated the consequences of an alleged sexual abuse and/or assault would be immediate removal pending an investigation. The interview with the HQ OPR/SAAI SME verified that any substantiated allegations of sexual abuse by a contractor or a volunteer would result in notification of the allegation to appropriate law enforcement agencies and licensing authorities by the RGV Sector Chief or their designee.

(b): The facility meets the standard provision. Local SME interviews verified that any contractor suspected of perpetrating sexual abuse would be removed from all duties where detainee contact would occur pending the outcome of the investigation. Local SME interviews confirmed that there have been no allegations of sexual abuse against a detainee by a contractor during the audit period.

§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:

(a)(b): The facility meets the standard provisions. Commissioners memorandum dated July 15, 2014, Implementation of the Standards to Prevent, Detect, and Respond to Sexual Abuse and Assault in Holding Facilities /Prison Rape Elimination Act (PREA); the Acting Chief USBP memorandum dated March 6, 2018, Standards to Prevent, Detect, and Respond to Sexual Abuse and Assault in CBP Holding Facilities; Chief USBP memorandum dated October 8, 2015, Implementation of the CBP National Standards on Transport, Escort, Detention and Search (TEDS); and Chief USBP memorandum dated August 13, 2014; and CBP's Policy on Zero Tolerance of Sexual Abuse and Assault; Acting Commissioner's memorandum dated January 19, 2018, Implementation of the Standards to Prevent, Detect, and Respond to Sexual Abuse and Assault in CBP Holding Facilities were all provided in support of providing timely, unimpeded access to emergency medical treatment and crisis intervention services, including emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care. Per local SME interviews, a detainee victim of sexual assault and/or abuse at the Donna CPC are to be immediately transported to Knapp Medical Center, or the Children's Advocacy Center of Hildalgo & Starr Counties where they would address any medical emergency or to utilize the SANE for a victim of sexual assault and/or abuse when appropriate. A forensic medical examination (FME) would only be performed with the detainee's consent and where medically and evidentiarily appropriate. A determination on whether the exam is evidentiarily appropriate is made by HO OPR. The services would be provided to the victim at no charge regardless of the victim's cooperation with the sexual assault investigation. Interviews with the local SMEs verified these services would be provided at no charge, regardless of the detainee's cooperation with any part of an investigation.

§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:

The agency meets the standard. The HQ PAQ indicates there have been no completed investigations of sexual abuse allegations at the Donna CPC during the audit period therefore, no incident reviews have been conducted. Interview with the HQ PDO/DPSA Coordinator reveals their office regularly receives sexual abuse incident reviews within 30 days after the conclusion of a sexual abuse investigation at a facility. The Incident Review Committee (IRC) is comprised of three CBP HQ Program Managers and the local PFC. The PFC indicated that the PAIC and RGV Sector Chief would take any recommendations made by the IRC and make a concerted effort to address deficiencies within their span of control and budgetary restrictions. The HQ OPR/SAAI SME confirmed that the IRC would meet within 30 days after the conclusion of any sexual abuse/assault investigation and prepare a report of its findings.

§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)
- \boxtimes Not Applicable (provide explanation in notes):

Notes:

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

ADDITIONAL NOTES

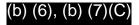
Directions: Please utilize the space below for additional notes, as needed. Ensure the provision referenced is clearly specified.

ADDITIONAL NOTES

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.



Auditor's Signature

August 26, 2024

Date