

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



U.S. Customs and  
Border Protection

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<b>AGENCY INFORMATION</b>			
<b>Name of Agency:</b>	U.S. Customs and Border Protection		
<b>PROGRAM OFFICE</b>			
<b>Name of Program Office:</b>	Office of Field Operations		
<b>SECTOR OR FIELD OFFICE</b>			
<b>Name of Sector or Field Office:</b>	Laredo 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>	109 Shiloh Drive, Laredo, Texas 78045		
<b>Mailing Address:</b> <i>(if different from above)</i>			
<b>SHORT-TERM HOLDING FACILITY BEING AUDITED</b>			
<b>Information About the Facility</b>			
<b>Name of Facility:</b>	Laredo Bridge 1 (Gateway to the Americas)		
<b>Physical Address:</b>	100 Convent Street, Laredo, Texas 78040		
<b>Mailing Address:</b> <i>(if different from above)</i>	P.O Box 3130, Laredo, Texas 78044		
<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
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## 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) onsite audit of Customs and Border Protection (CBP) Office of Field Operations (OFO) Laredo Bridge I (Gateway to the Americas International Bridge) was conducted on Tuesday, July 16, 2024, from 5:30 a.m. until 6:00 p.m. The onsite audit was conducted by (b) (6), (b) (7)(C), a Certified PREA Auditor, contracted through Creative Corrections, LLC., of Beaumont, Texas. This was the second PREA audit for Laredo Bridge I. The first audit was conducted on March 5, 2019. The Laredo Bridge I is a short-term processing and holding facility that detains male and female adults, and families for a period specified to be under 72 hours, pending transfer for removal to their country of origin, detention, or placement within another Department of Homeland Security (DHS) facility. Laredo Bridge I is adequately staffed and supervised 24 hours a day, seven days a week.

The purpose of the audit was to determine compliance with Subpart B of the DHS PREA Standards. The onsite audit followed the Auditor's electronic review of CBP's PREA policies and procedures along with 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's PAQ, and other supporting materials such as training curricula, training aids, directives, and memoranda to demonstrate compliance with the U.S. Department of Homeland Security (DHS) PREA standards.

Laredo Bridge I is situated in the San Agustin Historical District in downtown Laredo, Texas and is the identified bridge crossing within the Laredo POE that processes CBP One appointments. Laredo Bridge I consist of one building, four primary vehicle lanes, one bicycle lane, and 14 pedestrian lanes. The main building has soft and secondary inspection areas. The hard secondary inspection contains (b) (7)(E) hold rooms, with (b) (7)(E) single occupancy hold rooms, and (b) (7)(E) multi-occupancy hold rooms. The multi-occupancy hold rooms are used to hold family units, adult males, and adult females. In addition, there are two hold rooms used to separately hold Unaccompanied Children (UC).

The Point of Contact for Laredo Bridge I was (b) (6), (b) (7)(C), Watch Commander (WC). (b) (6), (b) (7)(C), Creative Corrections Program Manager, accompanied the Auditor while onsite. Upon arrival, the Auditor was met by WC (b) (6), (b) (7)(C) who provided a private interview area (administrative conference room) to conduct interviews with staff and detainees. The Auditor was provided with a staff roster to randomly select staff for interviews. The Auditor randomly selected local SMEs and officers from (b) (7)(E). The Auditor also randomly selected a contractor employed by Loyal Source Medical. Laredo Bridge I shifts are assigned as the following: (b) (7)(E). Upon arrival, the Auditor discussed the audit format with the WC.

At approximately 8:00 a.m., the Auditor was escorted by the WC during the site inspection. The Auditor was accompanied by the HQ National PREA Coordinator, HQ Deputy Prevention of Sexual Assault (DPSA) Coordinator, and Creative Corrections Program Manager. The site inspection consisted of reviewing all areas of the Laredo Bridge I in which the Auditor started from the detainee's point of entry. The Auditor observed a consistent line of individuals walking across the Laredo Bridge I from Mexico. The individuals entered a long, enclosed pathway with an emerald, green indoor/outdoor carpet runner. Officers directed the individuals along the way. At nearly the pathway's halfway mark, a medical practitioner stood with a clipboard to ask preliminary questions inquiring of any immediate medical concerns or need for medications. (b) (7)(E).

At the end of the pathway, individuals entered the sallyport where the Auditor observed *I Speak* posters in English and Spanish along with initial processing information. The television monitor displayed the agency's zero tolerance policy, the information pertaining to prevention, detection, and response to sexual abuse and assault, and the DHS OIG hotline number to report sexual abuse and assault via audio in Spanish and Creole. The Auditor also observed audit notices posted in English and Spanish. In addition, there were *Keep Detention Safe* posters on the sallyport walls in English, Spanish, and Creole as well as age-appropriate posters with colorful animated illustrations. Children are priority and are escorted upstairs for processing to ensure their safety. (b) (7)(E). The Auditor observed the sallyport occupied by only males individually completing their intake packets on a clipboard. One of the male detainees was tuned in with absorbing the PREA information presented via video in Creole.

Women, however, are separated and held in another room for an additional layer of safety and security. Detainees are provided with risk assessment forms which includes questions pertaining to their physical safety, while waiting to continue the intake process. After the intake process and risk assessments are reviewed and completed, detainees are appropriately placed in an assigned hold room. The written risk assessment is uploaded into the designated system of record, United Secondary System (USEC), and then securely discarded to ensure confidentiality.

The Auditor observed the private area where officers conduct pat-down searches prior to entering the soft secondary area. In the soft secondary area, there were five adjacent stations separated by a half wall or partition allowing for some privacy while officers continue to verify an individual's documentation. (b) (7)(E)

In the hard secondary area, the Auditor observed a medical room, a pantry, and a hold room designated for UC. There was a clothing closet stocked with clothes of varying sizes from infants to adults. The Auditor observed another room designated to hold an individual's luggage while being held at Laredo Bridge I. (b) (7)(E)

A total of (b) (7)(E) hold rooms ((b) (7)(E) single occupancy and (b) (7)(E) multi-occupancy rooms) were situated in an L-shape around the officer's station for direct supervision. The (b) (7)(E) single occupancy rooms consist of (b) (7)(E) wet cell (toilet and sink) and (b) (7)(E) dry cell. (b) (7)(E)

The Command Center is a separate, secured room located behind the main processing area (b) (7)(E) provide additional supervision of detainees. The Auditor observed two supervisors and a Chief working in the Command Center. (b) (7)(E)

Scope of the Audit: Prior to the onsite audit, the Auditor was able to review the HQ and Local PAQs, the HQ Responsive Documents and Data Requests, the Comprehensive Supervision Guidelines, agency policies and memoranda, HQ participation documents, and the Laredo Medical Center's (LMC's) website. The Auditor conducted telephonic interviews with the HQ SMEs prior to the onsite audit. The Auditor made several attempts to conduct an interview with LMC's SANE Coordinator. However, the Auditor was requested to send such request in writing via electronic email; and after sending the written request, the Auditor was still unable to gather requested information from the SANE Coordinator. Therefore, the Auditor contacted the LMC Emergency Room nurse who verified having a SANE program.

During the onsite audit, the Auditor interviewed three randomly selected local SMEs, seven officers, one contractor, and one detainee. Staff were selected from all (b) (7)(E) shifts. There were two detainees held at Laredo Bridge I while the Auditor was onsite; however, only one was over the age 14. There were no detainees identified with disabilities, or who self-identified as lesbian, gay, bisexual, transgender, queer or questioning, intersex, or asexual (LGBTQIA+).

An exit briefing for Laredo Bridge I was held in conjunction with Laredo Bridge II (Juarez-Lincoln International Bridge) since both facilities were audited on two consecutive days and share the same leadership. The exit briefing was held in the Laredo Bridge I's conference room and conducted by Creative Corrections Certified PREA Auditor (b) (6), (b) (7)(C). Those in attendance for the briefing were:

- (b) (6), (b) (7)(C) Assistant Port Director (APD)
- (b) (6), (b) (7)(C) Watch Commander (WC)
- (b) (6), (b) (7)(C) Supervisory CBP Officer (SCBPO)
- (b) (6), (b) (7)(C) HQ Privacy & Diversity Office (PDO)/Deputy Prevention of Sexual Assault Coordinator (DPSA)
- (b) (6), (b) (7)(C) HQ OFO National PREA Coordinator
- (b) (6), (b) (7)(C) Program Manager (PM) Creative Corrections, LLC
- (b) (6), (b) (7)(C) Certified PREA Auditor, Creative Corrections, LLC

During the exit briefing, the Auditor discussed the observations made during the onsite inspection. The Auditor explained the audit process which includes the pre-audit document review, the onsite audit, and the post audit review of policies, protocols, and documentation to determine compliance of 25 DHS Subpart B Standards at Laredo Bridge I. The Auditor explained the final determination would be made after triangulating all the documents, onsite inspection, interviews, and review of the background information. The Auditor also advised the attendees that background information for a random selection of 15 employees and three contractors were requested while onsite and would be reviewed post audit. The Auditor further stated that PREA training records for all randomly selected staff were reviewed while onsite.

**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 Auditor reviewed all relevant policies, procedures, and documents in assessing Laredo Bridge I. The onsite audit was completed on Tuesday, July 16, 2024, and the findings report was submitted August 17, 2024.

Laredo Bridge I has met 23 standards: 115.111; 115.113; 115.114; 114.115; 115.117; 115.118; 115.121; 115.122; 115.131; 115.132; 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.

Laredo Bridge I exceeded the requirements for one standard: 115.116 and 115.141.

SUMMARY OF AUDIT FINDINGS	
Number of standards exceeded: 2	
Number of standards met: 23	
Number of standards not met: 0	
OVERALL DETERMINATION	
<input type="checkbox"/> Exceeds Standards (Substantially Exceeds Requirements of Standards)	<input checked="" type="checkbox"/> Low Risk
<input checked="" type="checkbox"/> Meets Standards (Substantial Compliance; Complies in All Material Ways with the Standards for the Relevant Review Period)	<input type="checkbox"/> Not Low Risk
<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:

(a): The facility meets the standard. The standard requires the agency 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. The Acting OFO Assistant Commissioner issued a notice (dated August 12, 2014) advising staff that effective May 16, 2014, the agency would be implementing the Standards to Prevent, Detect, and Respond to Sexual Abuse and Assault in Holding Facilities. Staff were advised of their responsibility for taking measures to protect the health, welfare, security, and safety of individuals in their custody. A memorandum (dated March 11, 2015) from the Commissioner was sent to all CBP employees providing notification of CBP's zero tolerance policy toward all forms of sexual abuse and assault. This memorandum emphasized CBP's commitment to protecting the safety of individuals in CBP custody and providing effective safeguards against sexual abuse and assault of those individuals. CBP Directive 2130-030, *Prevention, Detection and Response to Sexual Abuse and Assault in CBP Holding Facilities* (dated January 19, 2018) establishes procedures for the prevention, detection, and response to sexual abuse and assault in CBP holding facilities. The Directive further states that CBP prohibits sexual abuse and assault of a detainee by another detainee; sexual abuse or assault of a detainee by agents, officers, other CBP personnel, contractors, and volunteers, and retaliation against any person, including a detainee, who reports, complains about, or participates in an investigation of sexual abuse or assault. The Directive also requires pertinent information regarding CBP's zero-tolerance policy to be visible or continuously and readily available to detainees through posters, pamphlets, or other written formats. The CBP National Standards on *Transport, Escort, Detention & Search* (TEDS) (dated October 2015) incorporated the agency's CBP Zero Tolerance Policy prohibiting all forms of sexual abuse of individuals in CBP custody, including in detention facilities, during transport, and during processing. In recognition of Sexual Assault Awareness & Prevention Month (April), the Privacy & Diversity Office (PDO) sent information via electronic mail (email) to all CBP employees in 2018 and 2022 through 2024 to reiterate the agency's zero-tolerance policy by providing several internal links for staff to stay informed. During the onsite inspection, the Auditor observed several zero tolerance posters upon entry, processing areas, and holding areas. Local SME, officer, and contractor interviews indicated that they were familiar with the agency's zero tolerance policy through posters, Acadis training, musters (roll call), and emails. Local SME interviews indicated that the Laredo Bridge I implemented the agency's zero tolerance policy by separating male and female detainees, separating juveniles from adults, unless in a family unit, conducting (b) (7)(E) security checks, separating juveniles by age and gender, conducting initial risk assessments of detainees, conducting pat-down searches, placing partitions in front of the toilets to ensure privacy, (b) (7)(E) monitoring 24 hours a day, seven days a week.

### §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:

(a): The facility meets the standard provision. The standard requires that each facility maintain adequate levels of detainee supervision through appropriate staffing, (b) (7)(E), to protect detainees against sexual abuse. CBP TEDS is the agency's comprehensive detainee supervision guidelines which requires staff to closely

and frequently supervise hold rooms occupied by detainees to ensure adequate occupancy levels, safety, and supervision. Hall Monitors are activated to conduct routine security, and wellness checks once an individual is detained in a hold room. Security checks are to be conducted (b) (7)(E) in the USEC. During the site inspection, the Auditor observed all single and multi-occupancy hold rooms situated around the officer's station. (b) (7)(E) were observed in the hold rooms and around the officer's station. Each multi-occupancy hold room has a large window for staff to maintain a clear line of sight of detainees. The Command Center is a separate, secured room with two supervisors and a Chief monitoring the hold room areas, main lobby, and exterior perimeters 24 hours a day, seven days a week. Local SME interviews verified that detainees are supervised at the Laredo Bridge I (b) (7)(E) and activating hall monitors to provide clear and direct supervision of detainees. Detainees identified as having an increased risk of sexual victimization receive additional monitoring. Local SMEs interviewed indicated that they would assess and close non-critical roles or posts, reassign officers to needed areas, transfer officers from other facilities, transfer detainees to neighboring facilities, and/or activate overtime protocols, when addressing an influx of detainees, juveniles, or staff shortages. While onsite, the Auditor observed an adequate level of supervision, through staff's presence on all (b) (7)(E) shifts (b) (7)(E) needed to adequately supervise detainees on a regular basis.

(b): The facility meets the standard provision. The standard requires the agency to develop and document comprehensive detainee supervision guidelines to determine and meet each facility's detainee supervision needs and must review those supervision guidelines and their application at each facility at least annually. CBP Directive 2130-030 requires the development and documentation of comprehensive detainee supervision guidelines to determine and meet each facility's detainee supervision needs. Supervision guidelines and their application at each facility must be reviewed at least annually to determine adequate levels of detainee supervision and monitoring. The results of those guidelines must be provided to the PSA Coordinator. In addition to the annual review, two times a year between May and June and November and December, an internal inspection is conducted by supervisors to ensure adequate supervision, and a Supervision Review Report is submitted to the WC. The HQ OFO memorandum (dated April 1, 2021) *Review of Comprehensive Detainee Supervision Guidelines* was distributed to all OFO holding facilities reiterating the requirements of the mandatory annual review process. Local SME interviews confirmed that supervision strategies are evaluated on a regular and annual basis. The Auditor reviewed Laredo Bridge I's most recent *Review of Detainee Supervision Guidelines (dated December 11, 2023)*.

(c): The facility meets the standard provision. The standard requires that in determining adequate levels of detainee supervision (b) (7)(E), agencies shall take into consideration the physical layout of each holding facility, 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 the agency's custody. The HQ OFO memorandum (dated April 1, 2021) was distributed to all OFO holding facilities reiterating the requirements set forth in this standard provision. During the interview, the Local SME indicated that supervisors gather information throughout the year to review the physical layout of the holding facility, the composition of the detainee population, the prevalence of substantiated and unsubstantiated incidents of sexual abuse, and any other relevant factors, including length of time detainees spend in CBP custody. The Auditor reviewed Laredo Bridge I's most recent *Review of Detainee Supervision Guidelines (dated December 11, 2023)*. The review specified that Laredo Bridge I takes into consideration the facility layout of each holding facility, the composition of the detainee population, the prevalence of substantiated and unsubstantiated incidents of sexual abuse when determining adequate levels of detainee supervision (b) (7)(E). The Auditor concludes that all areas required by the standard were detailed and comprehensive. During the site inspection, the Auditor observed adequate levels of staff supervision (b) (7)(E).

**§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:**

(a): The facility meets the standard provision. The standard requires that juveniles must be detained in the least restrictive setting appropriate to their age and special needs, provided that such 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. The Acting OFO Assistant Commissioner issued a memorandum (dated August 12, 2014) to all Directors of Field Operations and the Director of Preclearance Operations with an attachment of a summary of the standards, requiring that each facility muster the summary of the standards. The summary includes a section for juveniles and families which states that juveniles are to be placed in the least restrictive setting, appropriate to the juvenile's age and special needs, providing the setting is consistent with the safety and security of the juvenile and others and officers to consider the best interest of the juvenile at all decision points beginning at the first encounter and continuing through processing, detention, transfer, or repatriation. During the onsite audit, the Auditor observed the [REDACTED] multi-occupancy hold rooms located in front of the officer's station. Such rooms are used to hold juveniles and family units. The multi-occupancy room was conducive to a juvenile's age and special needs as there was a large window for well-rounded viewing, a television and DVD player for entertainment, couches for lounging, mats, and toys for playing, and juveniles having full access to a fully stocked pantry. All staff interviewed reported that juveniles remain within their family unit when possible. If a juvenile is identified as a UC, they are placed in a hold room separate from adult detainees. The hold room is under direct supervision in front of the officer station, [REDACTED] (b) (7)(E).

(b): The facility meets the standard provision. The standard requires that unaccompanied juveniles generally be held separately from adult detainees. Juveniles may temporarily remain with a non-parental adult family member where the family relationship has been vetted to the extent feasible and the agency determines that remaining with the non-parental adult family member is appropriate, under the totality of the circumstances. CBP TEDS requires UC to be held separately from adult detainees; however, a juvenile may temporarily remain with a non-parental adult family member if the family relationship has been vetted to the extent possible and a CBP supervisor determines it to be appropriate under the totality of the circumstances. CBP TEDS also mandates that facilities to maintain family unity to the greatest extent operationally feasible, absent a legal requirement, safety or security concerns that require separation. Local SME and staff interviews indicated that there is a designated room to hold UC separate from adult detainees. Such interviews indicated that prior to placing a juvenile with a family unit, a vetting process is completed determine appropriate unification. The vetting process includes officers review documentation such as birth certificates, passports, and other legal documents, reviewing the electronic database, observing interactions between the juveniles and adults, and separately interviewing the juveniles and adults. UC are separated by age and gender. Local SME and officer interviews indicated that officers take on the role of a caregiver when juveniles are being held at the Laredo Bridge I.

**§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:**

(b)(c): The facility meets the standard provision. The standard requires that cross-gender strip searches or cross-gender visual body cavity searches shall not be conducted except in exigent circumstances, including consideration of officer safety, or when performed by medical practitioners. An agency shall not conduct visual body cavity searches of juveniles, and instead, shall refer all such body cavity searches of juveniles to a medical practitioner. The standard also requires that such searches be documented. CBP TEDS requires that all searches must be conducted under the appropriate legal authority and standards, and officers must be diligent in efforts to protect detainee's legal rights, and treat them with dignity, respect, and an appropriate level of privacy. CBP TEDS provides direction on the different types of searches conducted by staff and mandates that when operationally feasible, the officer conducting the search must be of the same gender, gender identity, or declared gender as the detainee being searched. A muster *Processing Transgender Applicants for Admission* (dated December 10, 2018) was issued to CBP staff providing details on searching detainees according to their declared identity or gender identity. *DHS PREA Standards - In Focus* newsletter (dated April 4, 2023) emphasized search procedures and definitions as outlined in the standard. CBP TEDS prohibits cross-gender strip (partial body) searches or cross-gender visual body cavity searches. Prior to conducting a strip (partial body) search, staff must obtain supervisory approval, even in an exigent circumstance, with a staff member

performing the search and the necessary staff to witness the search. Such search may also be performed by a medical practitioner depending on the circumstance requiring the search and must be documented in an electronic system of record. CBP TEDS prohibits officers from conducting intrusive body cavity searches and conducted only on the most exceptional circumstances, and only by medical practitioners at a medical facility. CBP TEDS further prohibits visual body cavity searches of juveniles and must be performed by a medical practitioner and documented in the electronic system of record. The local PAQ indicated that Laredo Bridge I did not perform any cross-gender searches during the audit period. Local SMEs and officers interviewed were knowledgeable of the prohibition against cross-gender strip searches and cross-gender visual body cavity searches. There was only one detainee interviewed. The detainee indicated that she had not been subjected to searches of this nature. The local PAQ indicated no strip (partial body) searches or visual body cavity searches were performed at Laredo Bridge I within the audit documentation period. Local SME and staff interviews indicated that opposite-gender partial body searches are not authorized at Laredo Bridge I and that supervisory approval must be provided prior to conducting a visual body cavity search. Such interviews also indicated that only medical staff are authorized to conduct visual body cavity searches of juvenile detainees, and that prior supervisory approval must be granted. All staff interviewed indicated that they had not conducted or witnessed a strip (partial body) search or visual body cavity search. Staff indicated that all partial body searches and visual body cavity searches are documented in the Incident Log Report (IOIL) secured electronic database.

(d): The facility meets the standard provision. The standard requires the agency to implement policies and procedures that enable 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 cell checks or is otherwise appropriate in connection with a medical examination or monitored bowel movement under medical supervision. CBP TEDS indicates the requirements to enable 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. Local SMEs, officers, and contractors interviewed indicated that they knock and announce their presence prior to entering an area where detainees are likely to be engaging in the above activities. During the site inspection, the Auditor observed partitions in front of the toilets located in the hold rooms [REDACTED] (b) (7)(E) [REDACTED]. During the site inspection, the Auditor did not observe any showers at Laredo Bridge I.

(e): The facility meets the standard provision. The standard prohibits the agency and facility from searching or physically examining a detainee for the sole purpose of determining the detainee's gender. If the detainee's gender is unknown, it may be determined during conversations with the detainee, by reviewing medical records (if available), or, if necessary, learning that information as part of a broader medical examination conducted in private, by a medical practitioner. CBP TEDS restates the requirements of this standard provision. In accordance with the HQ OFO Memorandum (dated December 10, 2018) *Processing Transgender Applicants for Admission*, officers will generally rely upon the gender identifier listed on a travel document in determining a detainee's gender. Local SMEs and officers interviewed indicated that they would review all available documentation and specifically ask the detainee their self-identity when determining the detainee's gender and process the detainee accordingly. Also, Local SMEs and officers indicated that they would not conduct a search or examine a detainee for the sole purpose of determining the detainee's gender. There were no transgender or intersex detainees identified at Laredo Bridge I during the onsite audit.

(f): The facility meets the standard provision. The standard requires the agency to train law enforcement staff in proper procedures for conducting pat-down searches, including cross-gender pat-down searches and searches of transgender and intersex detainees. All pat-down searches shall be conducted in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs and agency policy, including consideration of officer safety. CBP TEDS indicates whenever operationally feasible, officers conducting a search or that are present during a medical examination, must be of the same gender, gender identity, or declared gender as the detainee being searched. CBP TEDS further requires all searches to be conducted in a professional, thorough, and reasonable manner, consistent with the type of search required. While onsite, the Auditor verified training documentation confirming staff's knowledge of proper procedures for conducting pat-down searches to include that of transgender and intersex detainees. Interviews with Local SMEs and officers confirmed that they received initial training and refresher training related to searches, including how to conduct cross-gender pat-down searches and searches of



transgender and intersex detainees. Such interviews verified that male officers conduct pat-down searches of male detainees, and female officers conduct pat-down searches of female detainees. Also, Local SMEs and officers interviewed indicated that they communicate respectfully and professionally with each detainee being searched.

(f): The facility meets the standard provision. The standard requires the agency to train law enforcement staff in proper procedures for conducting pat-down searches, including cross-gender pat-down searches and searches of transgender and intersex detainees. All pat-down searches shall be conducted in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs and agency policy, including consideration of officer safety. CBP TEDS directs staff to conduct searches in accordance with legal authority and standards and to remain diligent in their efforts to protect a detainee's legal rights and to treat them with dignity, respect, and an appropriate level of policy. CBP TEDS further requires that when operationally feasible, staff conducting the searches must be of the same gender, gender identity, or declared gender as the detainee being searched. *Professionalism when Processing Transgender Applicants for Admission* weekly muster was issued to officers. The muster states that during the inspection process, all travelers are to be treated with dignity and respect. The muster also states that inappropriate comments, remarks, gestures, or innuendos, including those of a sexual nature to staff and travelers will not be tolerated in the workplace and that such incidents will be fully investigated, and appropriate corrective actions will be taken, if warranted. Officers interviewed verified that they received training on how to conduct pat-down searches of male, female, transgender, and intersex detainees. Such searches are conducted in a systematic order which includes informing detainees of the pat-down search prior to searching the detainee. Only male officers conduct pat-down searches of male detainees and female officers conduct pat-down searches of females. Transgender and intersex detainees are searched by an officer of the same gender in which they identify. Local SME interviews verified that that staff are trained to conduct standard, routine pat-down searches systematically and respectfully. Since the Auditor was unable to observe a pat-down search of a detainee while onsite, one of the officers demonstrated a thorough, systematic pat-down search in accordance with the training received.

**§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:**

(a): The facility meets the standard provision. The standard requires the agency to take appropriate steps to ensure that detainees with disabilities, including those who are deaf, hard of hearing, blind, low vision, intellectual, psychiatric, or speech disabilities to have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse. Such steps include providing access to in-person, telephonic, or video interpretive services to ensure effective, accurate, and impartial interpretation for detainees. The standard also requires the agency to ensure that written materials related to sexual abuse are provided in formats for detainees with developmental diversity or impairments to their vision and allows for the agency to not take actions that would result in a fundamental alteration of a service, program, or activity, or are of an undue financial or administrative burden. CBP Directive 2130-030 requires the facility to take appropriate steps to provide reasonable accommodations to detainees with disabilities so that they may have an equal opportunity to participate in and benefit from CBP's efforts to prevent sexual abuse which includes detainees who are hearing impaired, those who are blind, low vision, or those who have intellectual, psychiatric, or speech disabilities. CBP Directive 2130-033, *Nondiscrimination for Individuals with Disabilities in CBP-Conducted Services, Programs & Activities (Non-Employment)* (dated July 8, 2021), states that CBP is committed to providing individuals with disabilities an equal opportunity to access, participate in, and benefit from all CBP services, programs, and activities. The policy establishes roles and responsibilities of CBP staff to ensure there is no discrimination for members of the public who have disabilities. This Directive also provides additional direction for staff. CBP TEDS also asks staff to identify disabilities such as mental, physical, or developmental disabilities during the risk assessment process and make reasonable accommodations and extra efforts communicate with detainees. *PREA Guide to Communicating with Detainees with Disabilities* Job Aid (dated September 2021) was created to provide guidance to staff for effectively communicating with detainees with disabilities. CBP PDO *DHS Standards – In Focus* newsletter (dated April 4, 2023) provides information to staff regarding effective communication for detainees who have disabilities. The newsletter further provided muster points for supervisors to present to staff during musters. The Auditor did not observe any detainees with such disabilities as indicated in the standard. In accordance with local SME,

officer, and contractor interviews, information regarding sexual abuse and assault is provided to detainees who are deaf or hard of hearing via posters or American Sign Language (ASL) video services. Staff would use the PREA video with audio capabilities or verbally inform detainees of the agency's sexual abuse and assault policy who are blind or have visual impairment. Such interviews indicated that staff would speak slowly and plainly for those detainees who are intellectually or mentally impaired.

(b): The facility exceeds the standard provision. The standard requires the agency to take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse to detainees who are limited English proficient, including steps to provide in-person or telephonic interpretive services that enable effective, accurate, and impartial interpretation, both receptively and expressively, using any necessary specialized vocabulary. CBP Directive 2130-030 requires employees to take reasonable steps to provide access to services for detainees who are limited English proficiency (LEP). CBP Directive 2130-031, *Roles & Responsibilities of U.S. Customs & Border Protection Offices & Personnel Regarding Provision of Language Access* (dated December 4, 2018) mandates managers and supervisors to ensure employees has current information for internal CBP language resources. This Directive further defines the roles and responsibilities of CBP staff in providing meaningful access to all programs and activities. While onsite, the Auditor observed PREA posters in English, Spanish, and Creole. The Auditor observed the *I Speak* poster in multiple areas of the facility, in which staff uses to assist literate, LEP individuals in identifying their primary or preferred language. In addition to English and Spanish, CBP has PREA posters translated into 12 other languages for adult detainees and 15 other languages for juvenile detainees for use as needed. CBP's translated PREA posters may be accessed through CBP's internal website. Most staff employed at the Laredo Bridge I speak English and Spanish. For detainees who do not speak either English or Spanish, staff indicated that they point to the *I Speak* posters to determine a detainee's primary or preferred language then use interpreter services to assist. Local SME interviews verified that the facility identifies detainees with disabilities through observation, detainee risk assessments, and an additional layer of prescreening assessment conducted by medical staff upon a detainee's entry in which the Auditor observed during the onsite audit. To accommodate an influx of Creole speaking detainees entering Laredo Bridge I, the facility took an extra measure to have an age appropriate PREA video translated into Creole. The Auditor also observed PREA informational posters written in Creole in addition to English and Spanish required by this standard provision.

(c): The facility meets the standard provision. The standard requires the agency to provide in-person or telephonic interpretation services in matters relating to sexual abuse that enable effective, accurate, and impartial interpretation, by someone other than another detainee, unless the detainee expresses a preference for another detainee and the agency determines that such interpretation is appropriate and consistent with DHS policy. The standard also states that the provision of interpreter services for minors, alleged abusers, detainees who witness the alleged abuse and detainees who have a significant relationship with the alleged abuser is not appropriate in matters relating to allegations of sexual abuse. CBP Directive 2130-030 states that another detainee may not provide interpretation unless the detainee requests another detainee to do so, however only when it is determined that such interpretation is consistent with CBP policies. In addition, the Directive states that interpretation may not be made by minors, alleged abusers, detainees who may be witnesses, or detainees who have a significant relationship with the alleged abuse. When asked would staff use another detainee to interpret for a sexual abuse allegation, officers informed that they would use another detainee to immediately inform them of a concern. However, the moment the detainee expresses a concern of sexual abuse or assault, the officer would use interpreter services to obtain the report. The contractor interview verified that interpreter services would be used, and responses would be documented.

**§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. The standard prohibits the agency from hiring or promoting anyone who may have contact with detainees, or enlisting the services of any contractor or volunteer who may have contact with detainees, who has engaged in sexual abuse in a prison, jail, holding facility, community confinement facility, juvenile facility, or other institution; who has been convicted of engaging or attempting to engage in sexual activity

facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or who has been civilly or administratively adjudicated to have engaged in such activity. CBP Directive 2130-030 mandates the Office of Human Resources Management (HRM) to ensure compliance with hiring, promotion and discipline requirements as outlined in the standard provision. CBP HRM's *Standard Operating Procedures (SOP)* (dated February 29, 2016) *Prison Rape Elimination Act Hiring & Promotion* provides specific direction on the hiring and promoting of CBP employees who have direct contact with detainees to comply with Subpart B of the DHS Standards. Interviews with Headquarters (HQ) Office of Professional Responsibility (OPR)/Personnel Security Division (PSD) and the HQ HRM/Hiring Center SMEs confirmed the process for determining employment suitability and screening out applicants for employment or promotion who may have engaged in the misconduct described in the standard provision. In accordance with the HQ OPR/PSD SME's interview, the National Crime Information Center (NCIC) is checked to determine an arrest history as well as LexisNexis database system to determine whether the applicant or employee has any civil discrepancies or adjudications. Such checks are considered high-yield checks that allow for a checks and balance system to ensure thoroughness. If the HQ OPR/PSD SME provisionally clears the applicant, the applicant comes on board and can work in the facility. The process takes about 42 days to complete. The Auditor reviewed a blank email template that is sent to applicants after a suitability determination is made. The facility does not have any volunteers.

(b): The facility meets the standard provision. The standard requires the agency to directly ask all applicants who may have contact with detainees directly about previous sexual misconduct as described in §115.117(a) in written applications or interviews for hiring or promoting and in any interviews or written self-evaluations conducted as part of reviews of current employees. The agency shall also impose upon employees a continuing affirmative duty to disclose any such misconduct. The CBP HRM's SOP mandates all external applicants and all internal promotional candidates to answer specific questions related to previous misconduct during the written application or self-evaluation and/or assessment process. The applicant or promotional candidate must acknowledge prior misconduct. If there is a discrepancy pertaining to the applicant or promotional candidate's assessment relating to such behavior, the HQ HRM/Labor and Employee Relations (LER) determines that the application will not be considered. The agency provides virtual annual trainings, copies of CBP Directive 51735-013B (dated December 9, 2020) *Standards of Conduct* which includes disciplinary actions, Musters, and briefings to inform employees that they have a continuing affirmative duty to disclose any misconduct constituting sexual abuse in holding facilities. All employees receive copies of such policies upon onboarding. The Auditor reviewed a blank copy of the *Assessment Questionnaire* in which applicants are required to complete during the assessment process to confirm the required questions are directly asked. Interviews with the HQ HRM/CBP Hiring Center and the HQ HRM/LER SMEs confirmed all applicants, promotional candidates, and contractors must complete an application asking directly about previous sexual misconduct and impose a continuing duty to disclose any such misconduct.

(c): The facility meets the standard provision. The standard requires the agency to conduct a background investigation before hiring new employees who may have contact with detainees to determine whether the candidate is suitable for employment. The agency shall conduct an updated background investigation for agency employees every five years. CBP Directive 2130-030 mandates background investigations for applicants seeking employment who may have contact with detainees to determine suitability. Updated background investigations are conducted every five years for CBP staff who may have contact with detainees. In accordance with the HQ OPR/PSD SME's interview, the agency has a process in place to conduct background investigations to determine whether candidates for hire are suitable for employment through in-person interviews with previous or current supervisors and co-workers along with employee file reviews. If there is a discrepancy or concern in such investigation, the investigator gives the applicant the opportunity to elaborate. Background investigations are conducted, at least, every five years on employees, contractors, and volunteers who are in high-risk public trust areas. The agency automatically enrolls employees in the Continuous Evaluation (CE) System, a personnel security investigative process to continuously review the background of employees. The HQ OPR/PSD SME explained the CE process and informed that the system allows for an ongoing assessment of an individual's continued eligibility. The Auditor submitted a list of 15 randomly selected employees and three randomly selected contractors of different ranks who are employed at Laredo Bridge I to the PSA Coordinator to ensure background investigations are conducted in accordance with the standard requirements. The Auditor promptly received requested background investigations of all 18 randomly selected staff. All randomly selected staff received a background investigation prior to them being hired and are included in the CE process. Therefore, the Auditor verified that all staff received background investigations in accordance with the standard requirements.

(d): The facility meets the standard provision. The standard requires the agency to perform a background investigation before enlisting the services of any contractor who may have contact with detainees. CBP Directive 2130-030 mandates background investigations for contractors who may have contact with detainees to determine suitability. Subsequent background investigations are conducted every five years for contractors who may have contact with detainees. The HQ OPR/PSD interview confirmed that all contractors initially undergo a background investigation prior to being hired and are enrolled in the CE process for ongoing monitoring.

(e): The facility meets the standard provision. The standard requires that any material omissions regarding the conduct described in §115.117(a), or the provision of materially false information, be grounds for termination or withdrawal of an offer of employment, as appropriate. The CBP HRM's SOP indicates that any material omissions by an applicant or current employee regarding such misconduct or the provision of materially false information shall be grounds for termination or withdrawal of an offer of employment, as appropriate. CBP Directive 51735-013B mandates CBP employees to maintain high standards of honesty, integrity, impartiality, character, and professionalism to ensure the proper performance of government business and the continued trust and confidence of the public. During the interview with the HQ HRM/LER SME, the Auditor was informed that employment or promotional offers are rescinded upon learning of material omissions regarding the conduct described in §115.117(a) or the provision of materially false information. The Auditor was informed that the *Table of Penalties Disclosure* are electronically provided to employees during training and prior to onboarding.

(f): The facility meets the standard provision. Unless prohibited by law, the standard requires the agency to provide information on substantiated allegations of sexual abuse involving a former employee to an institutional employer for whom such employee has applied to work, when requested. The CBP HRM's SOP allows for the provision of any substantiated allegations of sexual abuse regarding former employees upon receiving a request to do so from an institutional employer for whom such an employee has applied to work, unless prohibited by law. During the interview with the HQ HRM/LER SME, the Auditor confirmed the required information is provided when requested. The agency's electronic mail address, [https://IAFILEROOM@cbp.dhs.gov](mailto:IAFILEROOM@cbp.dhs.gov) is publicly displayed on the agency's website. Background investigators from other facilities or agencies may submit a request using the above electronic mail address to gather information on substantiated allegations of sexual abuse involving former employees. The request is sent to HQ OPR who has the authority to check previous employee files.

**§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:**

(a)(b): The standard provisions are not applicable. The standard requires that when the agency designs or acquires a new holding facility or plans any substantial expansion or modification of an existing holding facility, the standard requires the agency to consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect detainees from sexual abuse. (b) (7)(E)

The local PAQ indicated that the agency has not acquired a new facility and Laredo Bridge I has not undergone a major expansion since the previous audit. The local PAQ and Local SME interviews confirmed that Laredo Bridge I has not made any (b) (7)(E) upgrades since the last audit. During the onsite inspection, the Auditor did not observe any areas that had been renovated or undergone construction. Local SME interviews indicated that Laredo Bridge I was acquired in either 2017 or 2018 and that the agency took into consideration the ability to protect detainees from sexual abuse by implementing partitions in front of detainee toilets, (b) (7)(E) placing the officer's station in close proximity of detainee hold rooms during a major remodel in 2019 after undergoing corrective action.

**§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:**

(c): The facility meets the standard provision. The standard requires that where evidentiarily or medically appropriate, at no cost to the detainee, and only with the detainee's consent, the agency shall arrange for or refer the alleged victim detainee to a medical facility to undergo a forensic medical examination (FME), including a Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) where practicable. If SAFEs or SANEs cannot be made available, the examination can be performed by other qualified health care personnel. CBP Directive 2130-030 and CBP TEDS reiterate the standard provision. The local PAQ indicated that detainees at Laredo Bridge I are transported to Laredo Medical Center (LMC) where SANEs are on duty 24 hours a day, seven days a week to administer forensic medical examinations at no cost, as verified through interview of Local SMEs and officers. Prior to and after the onsite audit, the Auditor made several attempts to gather information pertaining to their SANE program at LMC. However, the information was not provided to the Auditor. Therefore, the Auditor contacted the LMC Emergency Room nurse who verified having a SANE program. During the Local SME interviews, the Auditor was informed that forensic medical examinations are provided to detainees at no cost.

(d): The facility meets the standard provision. The standard requires that if, in connection with an allegation of sexual abuse, the detainee is transported for a forensic medical examination to an outside hospital that offers victim advocacy services, the detainee shall be permitted to use such services to the extent available, consistent with security needs. CBP Directive 2130-030 and CBP TEDS reiterate the standard provision. The Auditor made several telephonic attempts to verify the victim advocacy services available to detainees receiving forensic medical examinations at LMC. Therefore, the Auditor conducted an internet search and verified that Serving Children and Adults in Need (SCAN) provides crisis intervention by program staff and trained advocates at hospitals 24 hours a day, seven days a week. Such intervention includes active listening, assessment of immediate and long-term needs, identification of coping skills, exploration of options, problem solving, safety planning, assessment of potential injury to self or others, explanation of victim's rights, the effects of sexual violence and possible reactions, and referrals to other resources. SCAN provides hotline services to victims of sexual abuse and assault at 1-800-355-7226. Local SME interviews confirmed their awareness that advocacy services are available to detainees.

(e): The facility meets the standard provision. The standard requires that to the extent that the agency is not responsible for investigating allegations of sexual abuse, the standard requires the agency to request that the investigating agency follow the requirements of §115.121(a) through (d). Interviews with Local SMEs identified that the Laredo Police Department (LPD) is the local investigating agency. In accordance with the Local SME interview, a letter is sent to the Chief of Laredo Police Department (LPD) to request that standard guidelines be followed. This letter was sent during the annual assessment process. The Auditor reviewed a copy of CBP's request that LPD follow the requirements of §115.121(a) through (d) via memorandum (dated December 18, 2023).

**§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:**

(c): The facility meets the standard provision. The standard requires agency protocol ensure that each allegation is promptly reported to the Joint Intake Center (JIC) and, unless the allegation does not involve potentially criminal behavior, promptly referred for investigation to an appropriate law enforcement agency with the legal authority to conduct criminal investigations. The agency may separately, and in addition to the above reports and referrals, conduct its own investigation. CBP Directives 2130-030 and 3340-025F (dated November 2, 2021) Reporting Significant Incidents to the U.S. Customs & Border Protection WATCH mandates staff to consider every allegation of sexual abuse/assault as a significant incident that requires prompt reporting to the JIC and the Commissioner's Situation Room (CBP WATCH), and if potentially criminal, to the appropriate law enforcement agency. CBP TEDS specifies information required to be reported to the JIC and CBP WATCH. CBP WATCH operates 24 hours a day, seven

days a week and is available to all CBP staff. Directive 2130-330 provides reporting information to staff and requires staff to immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse against any detainee to the JIC and the Commissioner's Situation room (CBP WATCH). The local PAQ indicated there were no allegations of sexual abuse reported at Laredo Bridge I during the audit period. Local SMEs interviewed confirmed that they would promptly report such incidents to CBP Watch and the JIC.

(d): The facility meets the standard provision. The standard requires the agency to ensure that all allegations of detainee sexual abuse are promptly reported to the PSA Coordinator and to the appropriate offices within the agency and within DHS to ensure appropriate oversight of the investigation. The HQ PDO/DPSA Coordinator confirmed that there were no allegations of sexual abuse reported at Laredo Bridge I within the audit period. However, the HQ PDO/DPSA Coordinator would receive such notifications from the facility. Local SME interviews verified that all allegations of sexual abuse and assault are promptly reported to the PSA Coordinator and any other appropriate offices with the agency and DHS 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): The facility meets the standard provision. The standard requires the agency train or require the training of all employees, contractors, and volunteers who may have contact with holding facility detainees, to be able to fulfill their responsibilities under the standards, to include training on eight specific topics. CBP Directive 2130-030 indicates that all uniformed agents/officers, special agents, fact finders, contractors, and volunteers who may have contact with detainees in CBP holding facilities must receive the required training. Newly hired CBP staff and contractors must have training completed within one year of onboarding. Also, volunteers must complete training prior to having contact with detainees. The HQ PDO's Executive Director distributed a written memorandum (dated November 23, 2022) indicating the standard requirements and indicated that the required training was added to the contractor's learning plans. The local PAQ indicated that there are no volunteers at Laredo Bridge I. The Auditor verified training records for staff and contractors while onsite. The Federal Emergency Management Agency's (FEMA's) training course (last modified July 11, 2019), *Preventing & Addressing Sexual Abuse in CBP Holding Facilities*, is developed specifically for all CBP staff and available online to address the requirements of the standard. In reviewing CBP's training curriculum, *Preventing & Addressing Sexual Abuse in CBP Holding Facilities*, the Auditor verified that all CBP employees and contractors are trained on the agency's zero-tolerance policy for all forms of sexual abuse: 1) the right of detainees and employees to be free from sexual abuse, and from retaliation for reporting sexual abuse; 2) definitions and examples of prohibited and illegal sexual behavior; 3) recognition of situations where sexual abuse may occur; 4) recognition of physical, behavioral, and emotional signs of sexual abuse, and methods of preventing such occurrences; procedures for reporting knowledge or suspicion of sexual abuse; 5) how to communicate effectively and professionally with detainees, including lesbian, gay, bisexual, transgender, queer or questioning, intersex, and asexual (LGBTQIA+) or gender nonconforming detainees; 6) and the requirement to limit reporting of sexual abuse to staff with on a need-to-know basis in order to make decisions concerning the victim's welfare and for law enforcement or investigative purposes. Online training is provided to contractors via Acadis, electronic training system. All officers interviewed confirmed completing and understanding the required training through Acadis and ongoing musters.

(b): The facility meets the standard provision. The standard requires all current employees, contractors, volunteers who may have contact with holding facility detainees to be trained within two years of the effective date of the standards, and that the agency provide refresher information, as appropriate. CBP continuously provides training on the agency's zero-tolerance policy and sexual abuse and assault prevention to its employees through the PREA Resource Center, training intranet portal. The local PAQ indicated there are no volunteers at the Laredo Bridge I. Local SMEs and officers confirmed that they receive biannual refresher training through Acadis, and ongoing refresher training on the agency's zero-tolerance policy and sexual abuse and assault prevention through emails and at musters. Local SMEs confirmed via interviews that there were no volunteers at the facility. The Auditor reviewed contractor and staff training records and verified training completion within the time required by this standard provision. The Auditor reviewed examples of refresher training via email and muster topics provided to staff.

(c): The facility meets the standard provision. The standard requires the agency document the completed training by employees who may have contact with detainees and maintain for at least five years confirmation that contractors and volunteers have completed the required training. CBP Directive 2130-030 mandates documentation and records be maintained by the Contracting Officer's Representative for at least five years after course completion for all contractors. Training records are maintained electronically as required by the standard and as verified by the Auditor while onsite. Contractor interviewed verified having received training on contractor responsibilities regarding sexual abuse and assault prevention, detection, and response in accordance with the agency's policy and procedure. The services of volunteers are not enlisted at Laredo Bridge I.

**§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:**

The facility meets the standard. The standard requires the agency to make public its zero-tolerance policy regarding sexual abuse and ensure that key information regarding the agency's zero tolerance policy is visible or continuously and readily available to detainees, for example, through posters, detainee handbooks, or other written formats. CBP Directive 2130-030 indicates that reasonable efforts be made to ensure detainees in CBP holding facilities are aware of CBP's zero-tolerance policy and that such information is available to the public. CBP's posters informing of the agency's zero-tolerance policy and reporting mechanisms are developed in age-appropriate formats displaying colorful images that are easy to understand. CBP provides information on the agency's zero-tolerance policy publicly on its website at <https://www.cbp.gov/about/care-in-custody>. The Auditor observed age appropriate PREA posters throughout the facility written in English, Spanish, and Creole. One poster included a box stating, "Report Sexual Abuse Now," in six other commonly used languages. Local SME and staff interviews indicated that Laredo Bridge I provides information on the agency's zero tolerance policy against all forms of sexual abuse and assault to detainees through posters that are posted on the walls throughout the facility and through the intake process. Some staff even confirmed that they have provided such information directly to detainees. The detainee interview verified observing posters on the wall in Creole.

**§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:**

(a): The facility exceeds the standard provision. The standard requires that before placing any detainees together in a holding facility, agency staff shall consider whether, based on the information before them, a detainee may be at a high risk of being sexually abused, and when appropriate, shall take necessary steps to mitigate any such danger to the detainee. CBP TEDS requires staff to assess all available information to determine if a detainee may be considered at a high risk of being sexually abused or at a high risk of posing a threat to others prior to placing them together in a hold room or holding facility. CBP Directive 2130-030 requires detainees be initially assessed, and those determined to be at a high risk of sexual victimization be provided with heightened protection, which may include continuous sight and sound supervision, placement in a single occupancy hold room, monitoring in open areas, or placement in a hold

room actively monitored (b) (7)(E) by an employee in close proximity to intervene, unless no such option is determined to be feasible. The Auditor observed several detainees in the sallyport area individually completing their risk assessment on a form provided by officers along with a clipboard and ink pen. The detainees kept the completed form with them to accompany during their risk assessment process which is completed in the soft secondary area where there are five adjacent stations separated by a half wall or partition allowing for some privacy while officers continue to verify the detainee's information written on the assessment forms and additional documentation. This method allows for a smoother intake process. This is a unique process and goes above the standard requirement. Prior to being held together, local SME and staff interviews indicated that detainees at Laredo Bridge I are individually assessed to determine whether a detainee may be at risk of being sexually abused or being sexually abusive toward other detainees. Staff interviewed indicated that this process also asks detainees about their own concerns of physical safety. All officers interviewed were able to explain the need for assessing detainees prior to placing them in a hold room with other detainees. Officer interviews verified that detainees who pose a greater risk of being sexually abused would be placed in a hold room separate from other detainees and monitored closely. During the site inspection, the Auditor observed several hold rooms in which detainees at a high risk of being sexually abused could be held, particularly the hold rooms directly across from the officer's station.

(b): The facility exceeds the standard provision. The standard requires all detainees who may be held overnight with other detainees to be assessed to determine their risk of being sexually abused by other detainees or sexually abusive toward other detainees; staff shall ask each such detainee about their own concerns about their physical safety. CBP Directive 2130-030 requires staff to identify and reduce danger to a detainee and ask the detainee of their own concerns for their physical safety. The Auditor reviewed a blank Risk Assessment form listing all required questions in this standard. The Auditor also observed several detainees in the sallyport area individually completing their risk assessment on a form provided by officers along with a clipboard and ink pen. The detainees kept the completed form with them to accompany during their risk assessment process which is completed in the soft secondary area where there are five adjacent stations separated by a half wall or partition allowing for some privacy while officers continue to verify the detainee's information written on the assessment forms and additional documentation. This method allows for a smoother intake process and allows for detainees to privately report any incident pertaining to sexual abuse or assault directly to the processing officer. If such incident is reported, the detainee is referred to a medical practitioner onsite who may determine the need for additional medical treatment at the Laredo Medical Center prior to being assigned a hold room. This is a unique process and goes above the standard requirement. Local SMEs and officer interviews verified risk assessments are conducted in accordance with the standard provision requirements, including specifically asking the detainees about their own concerns of physical safety. The detainee interviewed verified having received a risk assessment prior being held in an assigned hold room. While onsite, the Auditor was unable to observe the risk assessment screening process, however, the Auditor requested to view randomly selected dates of risk assessments conducted at the Laredo Bridge I during the audit period:

1. The Auditor randomly selected a detainee from a list of detainees who were processed on July 16, 2023. The Auditor determined the detainee received a risk assessment.
2. The Auditor randomly selected a detainee from a list of detainees who were processed on September 16, 2023. The Auditor determined the detainee received a risk assessment.
3. The Auditor randomly selected a detainee from a list of detainees who were processed on October 18, 2023. The Auditor determined the detainee received a risk assessment.
4. The Auditor randomly selected a detainee from a list of detainees who were processed on November 16, 2023. The Auditor determined the detainee received a risk assessment.
5. The Auditor randomly selected a detainee from a list of detainees who were processed on December 24, 2023. The Auditor determined the detainee received a risk assessment.
6. The Auditor randomly selected a detainee from a list of detainees who were processed on January 16, 2024. The Auditor determined the detainee received a risk assessment.
7. The Auditor randomly selected a detainee from a list of detainees who were processed on February 16, 2024. The Auditor determined the detainee received a risk assessment.
8. The Auditor randomly selected a detainee from a list of detainees who were processed on March 16, 2024. The Auditor determined the detainee received a risk assessment.
9. The Auditor randomly selected a detainee from a list of detainees who were processed on April 16, 2024. The Auditor determined the detainee received a risk assessment.



10. The Auditor randomly selected a detainee from a list of detainees who were processed on May 16, 2024. The Auditor determined the detainee received a risk assessment.

(c): The facility exceeds the standard provision. The standard requires the agency to consider, to the extent that the information is available, to use the following criteria to assess detainees for risk of sexual victimization: 1) whether the detainee has a mental, physical, or developmental disability; 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 LGBTQIA+ or gender nonconforming; 8) whether the detainee has self-identified as having previously experienced sexual victimization; 9) and the detainee's own concerns about their own physical safety. CBP TEDS advises that the assessment will include each criterion required by this standard provision. The Auditor reviewed the information asked of detainees while onsite at the Laredo Bridge I to ensure it contained the required information. During the onsite audit and prior to individuals entering the sallyport, the Auditor observed a medical practitioner standing in the exterior sheltered pathway near the pedestrian bridge individually asking detainees if they had any medical conditions or concerns that needed to be addressed immediately. Then, upon entering the sallyport, individuals were provided their own clipboard and an ink pen to review and complete the detainee risk assessment. In addition, such individuals entered the soft secondary area where there were officer stations separated by partitions to review and complete the detainee assessments along with the detainee. This three-step assessment process is exceptional in ensuring a detainee's safety prior to being held in a hold room. Local SMEs and officers interviewed indicated their awareness of the risk assessment questions described in this standard provision through observation, a review of the detainee's file, risk assessment, and the detainee's gender identity. The detainee interviewed verified that upon entering Laredo Bridge I, questions pertaining to the detainee's age, name, country of origin, and any potential criminal or detention history was asked by staff. This detainee was a UC and confirmed not being around other detained individuals.

(d): The facility exceeds the standard provision. The standard requires that if detainees are identified pursuant to the assessment under this section to be at high risk of victimization, staff shall provide such detainees with heightened protection, to include continuous direct sight/sound supervision, single-cell housing, or placement in a cell actively monitored (b) (7)(E) by a staff member sufficiently proximate to intervene, unless no such option is determined to be feasible. CBP TEDS mandates staff to provide detainees identified to be at a high risk of sexual victimization with heightened protection, which includes continuous direct sight and sound supervision, placement in a single occupancy hold room, monitoring in an open area, or placement in a hold room actively monitored (b) (7)(E) by an officer that is in close proximity to intervene, unless no such option is determined to be feasible. During the Auditor's interviews with Local SMEs and officers, the Auditor was informed that if a detainee was determined to be at a high risk of being sexually abused, the detainee would be immediately placed in a hold room separate from other detainees or placed in front of the officer to ensure the detainee's safety via close monitoring. Local SME interviews indicated that they would gather additional information, from the detainee who is determined to be at a higher risk of sexual victimization, to determine next steps which may include transporting the detainee to another facility to ensure the detainee's overall safety. Such due diligence exceeds the standard requirement.

(e): The facility meets the standard provision. The standard requires the facility to implement appropriate controls on the dissemination of sensitive information provided by detainees under this section. CBP TEDS mandates staff to take efforts to ensure assessments are conducted in a way that provides detainees the greatest level of privacy possible. CBP facilities are required to implement appropriate controls on the dissemination of private and/or sensitive information provided by detainees during the risk determination process. Staff may only disclose information on a need-to-know basis. Risk assessments are conducted in the soft secondary area. Each interview room has a door and provides the detainee with adequate privacy while disclosing sensitive information. Such information is electronically documented and accessed using individually assigned login credentials. The USEC provides time stamps to keep a record of who accessed the detainee information and when such information was obtained or reviewed. Local SMEs and officers interviewed emphasized the agency's confidentiality requirement and that disclosure of such information is on a need-to-know basis.

**§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. The standard requires the agency to develop policies and procedures to ensure that detainees have multiple ways to privately report sexual abuse, retaliation for reporting sexual abuse, or staff neglect or violations of responsibilities that may have contributed to such incidents and shall provide instructions on how detainees may contact DHS OIG, or as appropriate, another designated office, to confidentially and, if desired, anonymously, report these incidents. CBP Directive 2130-030 and CBP TEDS emphasize the standard requirements. During the onsite audit at Laredo Bridge I, the Auditor observed consistent postings of PREA posters informing staff and detainees of multiple ways to report sexual abuse, retaliation for reporting sexual abuse, or staff neglect or violations of responsibilities that may have contributed to sexual abuse. Local SME, officer, and contractor interviews verified detainees may report sexual abuse: 1) verbally or in writing to staff, 2) through a third-party, 3) telephonically to the DHS OIG, or 4) to their consulate or any other outside entity. Such interviews confirmed that detainees may report anonymously. The detainee interview verified that reporting information is indicated on posters.

(b): The facility meets the standard provision. The standard requires the agency to provide and inform detainees of at least one way for them to report sexual abuse to a public or private entity or office that is not part of the agency, and that is able to receive and immediately forward detainee reports of sexual abuse to agency officials, allowing the detainee to remain anonymous upon request. CBP TEDS indicates that staff must provide instructions on how detainees may contact the DHS OIG, which is an office outside of CBP that is able to receive and immediately forward detainee reports of sexual abuse to CBP staff. While onsite, the Auditor observed PREA posters posted throughout processing areas and hold room areas informing detainees of the 24 hours a day, seven days a week DHS OIG telephone number, 1-800-323-8603. The Auditor called the DHS OIG number provided to confirm the ability to make a sexual abuse report from the facility. The Auditor was informed that the DHS OIG is a separate entity from Laredo Bridge I and that the DHS OIG can immediately forward detainee reports of sexual abuse to agency officials while allowing detainees to remain anonymous. In accordance with Local SME and officer interviews, a detainee may contact the DHS OIG by requesting to make a call; the escorting officer will escort the detainee the administrative conference room where the Auditor was provided to work in while onsite. (b) (7)(E)

After being escorted to the administrative conference room, the officer would dial the DHS OIG number, slant the door for audio privacy, and stand outside of the room until the detainee has completed the call while maintaining safety and security of the detainee. Also, Local SME and officer interviews confirmed that detainees may contact their consulate or any other outside entity.

(c): The facility meets the standard provision. The standard requires agency policies and procedures to include provisions for staff to accept reports made verbally, in writing, anonymously, and from third parties. All verbal reports must be promptly documented. CBP Directive 2130-030 requires staff to accept and promptly document in a Significant Incident Report (SIR) any allegations of sexual abuse and assault of detainees made verbally, in writing, anonymously, or from third parties. Local SME and officers confirmed that detainees may report abuse verbally or in writing to staff, anonymously, and through a third party. All staff interviewed indicated that all sexual abuse and assault allegations are taken seriously, documented, and immediately reported to supervisors regardless of how the information is received.

**§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:**

The facility meets the standard. The standard requires the agency to establish a method to receive third-party reports of sexual abuse in its holding facilities. The agency shall make public information on how to report sexual abuse on behalf of a detainee. CBP Directive 2130-030 indicates that third parties who are not connected to a detainee may also report allegations. CBP publicly distributes its reporting procedures for sexual abuse on the agency's website at <https://www.cbp.gov/about/care-in-custody>. The website indicates that reports are confidential, can be made verbally or in writing, and lists contact information for the JIC and DHS OIG. Any person can contact the JIC or DHS OIG by telephone, fax, electronic mail, or through written correspondence mailed to a designated post office box. Laredo Bridge I did not receive any reports of sexual abuse or assault during the audit period. Local SME and officer interviews confirmed the ability for third parties to report sexual abuse or assault on behalf of detainees. Such reports are processed in the same manner as receiving the report directly from a detainee.

**§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): The facility meets the standard provision. The standard requires the agency to require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse that occurred to any detainee; retaliation against detainees or staff who reported or participated in an investigation about such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Agency policy shall include methods by which staff can report misconduct outside of their chain of command. Initially, CBP employees were notified of CBP's zero-tolerance policy of sexual abuse and assault through a written memorandum (dated March 11, 2015). Employees were reminded of their obligation to report any allegation of employee misconduct by notifying the JIC and/or DHS OIG via phone call, electronic mail, or written correspondence. CBP employees may also contact their CBP Internal Affairs (IA) Office. The memorandum further indicated that agency staff are required to immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse, assault, or retaliation. CBP Directive 2130-030 emphasizes the standard requirement for CBP staff to make reasonable efforts to report the required information as promptly as possible. CBP Directive 51735-013B reiterates the agency's immediate reporting obligations and provides staff with contact information that includes the ability to report outside of their chain of command. CBP TEDS mandates staff to immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse against any detainee, retaliation against detainees or staff who reported or participated in a sexual abuse or assault, and staff neglect or violation of responsibilities that may have contributed to a sexual abuse or assault incident. While at Laredo Bridge I and during the interviews with Local SMEs, officers, and contractors, the prohibition of retaliation for reporting such incidents was unanimously confirmed.

(b): The facility meets the standard provision. The standard requires that any staff member who becomes aware of alleged sexual abuse must immediately follow the reporting requirements set forth in the agency's written policies and procedures. CBP Directive 2130-030 mandates all CBP staff to immediately follow the agency's written reporting requirements. The local PAQ indicated that there were no allegations of sexual abuse reported at Laredo Bridge I during the audit period. However, during officer interviews, all staff confirmed their duty to immediately report misconduct, retaliation, and staff neglect as well as their ability to report outside of their chain of command, when necessary.

(c): The facility meets the standard provision. The standard prohibits the agency and staff from revealing any information related to a sexual abuse report, apart from such report to anyone other than to the extent necessary to help protect the safety of the victim or prevent further victimization of other detainees or staff in the facility, or to make medical treatment, investigation, law enforcement, or other security and management decisions. CBP Directive 2310-030 reiterates the standard requirement. In an exception to making the initial report of sexual abuse or assault, the CBP prohibits all staff from revealing 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 governed by Subpart B of the DHS standards. During the interviews with Local SMEs, officers, and contractors, the Auditor was informed that all

staff have the responsibility to keep information about sexual abuse to a need-to-know basis, outside of their reporting obligations.

(d): The facility meets the standard provision. The standard requires that if the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable person statute, the agency is required to report the allegation to the designated State or local services agency under applicable mandatory reporting laws. CBP Directive 2130-030 reiterates the standard requirement and requires any CBP employee who is unsure whether a detainee is a vulnerable adult under an applicable State or local law, the employee should contact their Office of Chief Counsel (OCC) for legal consultation on whether the individual may qualify under applicable law. Texas State law defines a vulnerable person as a child or an adult with a disability, or an adult aged 65 or older. Reports of abuse of vulnerable people must be made to the Texas Department of Family & Protective Services (TDFPS). Local SME and contractor interviews verified their responsibility to make the required reports to TDFPS. Such reports are made by the supervisor on duty through the chain of command.

**§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. The standard requires that when an agency employee has a reasonable belief that a detainee is subject to a substantial risk of imminent sexual abuse, they are required to take immediate action to protect the detainee. CBP Directive 2130-030 requires staff to provide heightened protection to a detainee who is determined to be of high risk through sight and sound supervision, placement in a single occupancy hold room, monitoring in open areas or placement in a hold room with active (b) (7)(E) monitoring by an officer who could immediately intervene. *DHS PREA Standards – In Focus* newsletter (dated April 5, 2023) was issued to remind staff of the need to immediately protect a detainee if they have a reasonable belief the detainee is at a substantial risk of imminent sexual abuse. During Local SME and officer interviews, staff indicated that they would protect the detainee by keeping the detainee in front of them for close monitoring or place the detainee in a hold room separate from other detainees.

**§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. The standard requires that upon receiving an allegation that a detainee was sexually abuse while confined at another facility, the agency that received the allegation is required to notify the appropriate office of the agency or the administrator of the facility where the alleged abuse occurred. CBP Directive 2130-030 indicates that if a detainee was sexually abused and/or assaulted at another facility prior to arriving at Laredo Bridge I, the prior agency or administrator must be notified. Local SMEs interviewed verified their responsibility to report sexual abuse experienced by a detainee at another facility upon their arrival to the facility. The supervisor on duty would report immediately to the other facility's administrator via phone and follow up with an email notification used to report all sexual abuse incidents.

(b)(c): The facility meets the standard provisions. The standard requires the notification provided in paragraph (a) of this section be provided as soon as possible, but no later than 72 hours after receiving the information. The standard requires the agency document the notifications. Local SME interviews confirmed such notification would be immediately reported by the supervisor on duty via phone call to the other facility to ensure the detainee received the immediate help needed. Such reports are also provided to the other facility via written correspondence through the established email notification system. Laredo Bridge I did not receive or make any notifications pertaining to the standard requirement during the audit period. Local SMEs confirmed that such notifications would be made to the other facility, immediately, via phone and written notification by the supervisor on duty.

(d): The facility meets the standard provision. The standard requires any agency office that receives such notification, to the extent the facility is covered by this subpart, ensure that the allegation is referred for investigation in accordance with these standards. Laredo Bridge I did not receive any notification of this nature during the audit period. Local SMEs verified such notifications would be immediately reported to the JIC and HQ OPR and investigated as required by this standard provision by the supervisor on duty.

**§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:**

(a): The facility meets the standard provision. The standard requires that upon learning of an allegation that a detainee was sexually abused, the first law enforcement staff member to respond to the report, or their supervisor, shall be required to: 1) separate the alleged victim and abuser, 2) preserve and protect, to the greatest extent possible, any crime scene until appropriate steps can be taken to collect any evidence, 3) if the sexual abuse occurred within a time period that still allows for the collection of physical evidence, request the alleged victim not to take any actions that could destroy physical evidence, 4) and if the sexual abuse occurred with a time period that still allows for the collection of physical evidence, ensure the alleged abuser does not take any actions that could destroy physical evidence. CBP employees were initially informed of agency's zero-tolerance policy of sexual abuse and assault via a written memorandum (dated on March 11, 2015). The memorandum required staff to have an immediate response to allegations of sexual abuse involving detainees held in CBP holding facilities by separating an alleged victim from the alleged abuser, preserving, and protecting any crime scene, and ensuring that an alleged victim has timely, unimpeded access to emergency medical treatment and crisis intervention services. CBP Directive 2130-030 and CBP TEDS provide full guidance on first responder duties after receiving a detainee's allegation of sexual abuse or assault. Both Directives emphasize the standard's requirements. CBP staff receive training on first responder duties through Acadis. Local SMEs and officers were able to explain their first responder duties after receiving such report. They further explained that upon receiving a report of sexual abuse or assault, they would immediately separate the victim from the alleged abuser, preserve evidence, and contact the supervisor on duty. The supervisor would then contact the Command Center. The Command Center contacts the WC, JIC, OPR, PSA Coordinator, local law enforcement (if of criminal nature), Child Protective Services (CPS) (if juveniles are involved), and local Emergency Medical Services (EMS) to have the victim transported to LMC.

(b): The facility meets the standard provision. The standard requires that if the first staff responder is not a law enforcement staff member, the responder is required to request that the alleged victim not take any actions that could destroy physical evidence and then notify law enforcement staff. CBP Directive 2130-30 notes if the first staff responder if not a law enforcement staff member, the responder shall request that the alleged victim not take any actions that could destroy physical evidence and then notify law enforcement staff. The contractor interview indicated awareness of having a mandatory reporting requirement to the supervisor on duty, the LPD, CPS (if juveniles are involved), and EMS. Officers and the contractor also explained that the victim would be instructed not to destroy physical evidence by not eating, drinking, brushing teeth, changing clothes, or using the restroom. While onsite, the Auditor verified that contractors receive first responder training which is included in the training curriculum.

**§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:**

(a)(b): The facility meets the standard provisions. The standard requires the agency to develop a written institutional plan and use a coordinated, multidisciplinary team approach to responding to sexual abuse. The standard also requires that if a victim of sexual abuse is transferred between facilities covered by Subpart A or B, the agency is to inform the receiving facility of the incident and the victim's potential need for medical or social services, as permitted by law. CBP Directive 2130-030 is the agency's written institutional plan and provides clear guidance for utilizing a coordinated,

multidisciplinary approach to respond to allegations of sexual abuse or assault. This Directive mandates staff to inform the receiving DHS agency of the alleged incident and the alleged victim's potential need for medical or social services. The local PAQ indicated that there were no allegations of sexual abuse or assault reported to Laredo Bridge I during the audit period. Local SMEs interviewed were knowledgeable of the information in CBP Directive 2130-030 and their individual responsibilities in responding to allegations of sexual abuse or assault. During onsite interviews, Local SMEs confirmed their knowledge and responsibilities pertaining to the standard requirements. Such notifications would be made through the designated email correspondence (chain of command).

(c): The facility meets the standard provision. The standard requires the agency to make the same notifications required in (b) if the victim is transferred from a DHS holding facility to a facility not covered by Subpart A or B unless the victim requests otherwise. CBP Directive 2130-030 requires staff to inform the receiving non-DHS agency of the alleged incident, as permitted by law, and the alleged victim's potential need for medical or social services, unless the alleged victim requests otherwise. The local PAQ indicated that there were no incidents of sexual abuse or assault reported at the Laredo Bridge I during the audit period. Local SMEs confirmed their knowledge of the standard requirement and confirmed that there were no reports of sexual abuse or assault reported at the facility within the audit period.

**§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. The standard requires agency management to consider whether any staff, contractor, or volunteer alleged to have perpetrated sexual abuse 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. CBP Directive 2130-030 and the HQ OFO memorandum (dated August 12, 2014) indicate that agency management shall consider whether any staff, contractor, or volunteer alleged to have perpetrated sexual abuse and/or assault 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. CBP Directive 2130-030 also requires the Office of Acquisition (OA) that where there is an investigation of sexual abuse or assault is initiated against a contractor or an investigation result in a substantiated allegation of such conduct, the OA must take appropriate action consistent with the contract, the Directive, and applicable procurement regulations. There were no allegations of sexual abuse or assault reported at Laredo Bridge I during the audit period. Local SME interviews indicated that the required separation, pending investigation, would occur and that HQ OPR would be contacted. Such separation may include reassigning staff to another location or facility. The supervisor on duty would notify the contractor's supervisor through the chain of command. The contractor's supervisor will then remove the contractor from the facility pending the outcome of the investigation. There are no volunteers at this facility.

**§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. The standard prohibits agency employees of retaliation against any person, including a detainee, who reports, complains about, or participates in an investigation into an allegation of sexual abuse, or for participating in sexual activity because of force, coercion, threats, or fear of force. CBP Directives 2130-030, 51735-013B, and CBP TEDS prohibits any form of retaliation against any person, to include detainees, who reports, files a complaint, or participates in an investigation of sexually abuse or assault or participation in sexual activity as a result of force, coercion, threats, or fear of force. Training on the implementation of this policy was verified by interviews with local SMEs. Local SME, officer, and contractor interviews confirmed that retaliation is prohibited by CBP Directive 2130-030, and all have been trained to look for signs of it occurring. All staff interviewed were able to recite examples of retaliation, and stated they would immediately report such behavior.

**§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:**

(a): The facility meets the standard provision. The standard requires that staff be subject to disciplinary or adverse action up to and including removal from their position and the Federal service for substantiated allegations of sexual abuse or violating agency sexual abuse policies. CBP employees were initially notified of CBP's zero-tolerance policy of sexual abuse and assault through a written memorandum (dated March 11, 2015). Employees were informed that violation of the prohibition against sexual abuse and assault was subject to disciplinary or adverse action up to the presumptive action being removal from their position and future Federal service. Criminal misconduct by employees would be referred for investigation and potential prosecution, as appropriate. CBP Directive 2130-030 indicates that CBP staff may be subject to disciplinary action up to and including removal from their position with the presumptive action being removal and prohibition from future Federal Service for a substantiated allegation of sexual abuse and assault and/or for violating CBP's sexual abuse policies. CBP Directive 51735-013B informs all CBP staff that they may be subject to disciplinary action for substantiated allegations of sexual abuse and/or assault. There were no allegations of sexual abuse or assault reported at Laredo Bridge I during the audit period. In accordance with the HQ HRM/LER interview, OPR investigates all PREA violations and provides the HQ HRM/LER with the investigation. There is a Discipline Review Board made of three managers who reviews, confirms misconduct, and provides the employee with disciplinary action(s) in a written letter. The employee can respond depending upon the requirements of the Collective Bargaining Agreement (CBA). Local SME interviews verified that upper management makes the disciplinary decisions that could include removal from position.

(c)(d): The facility meets the standard provisions. The standard requires each facility report all removals or resignations in lieu of removal for violations of agency or facility sexual abuse policies to appropriate law enforcement agencies unless the activity was clearly not criminal. Also, the standard requires each agency make reasonable efforts to report removals or resignations in lieu of removal for violations of agency or facility sexual abuse policies to any relevant licensing bodies, to the extent known. CBP Directive 2130-030 requires the reporting of all removals or resignations in lieu of removal to appropriate law enforcement agencies for violations of agency or facility sexual abuse and/or assault policies unless the activity was clearly not criminal. There were no allegations of sexual abuse or assault reported at the facility during the audit period. During the HQ OPR/Sexual Abuse and Assault Investigations (SAAI) Coordinator interview, the Auditor was advised that HQ OPR/PSD would address such removals and requirements described in this standard provision.

**§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. The standard requires that any contractor or volunteer suspected of perpetrating sexual abuse be prohibited from contact with detainees. The agency must consider whether to prohibit further contact with detainees by contractors or volunteers who have not engaged in sexual abuse but have violated other provisions with the standards. The agency must be responsible for promptly reporting sexual abuse allegations and incidents involving alleged contractor or volunteer perpetrators to an appropriate law enforcement agency as well as to the JIC or another appropriate DHS investigative office in accordance with DHS policy and procedures. Also, the agency must make reasonable efforts to report to any relevant licensing body, to the extent known, incidents of substantiated sexual abuse by a contractor or volunteer. There are no volunteers working at the Laredo Bridge I. An interview with the HQ OFO SME verified that there has not been any allegations of sexual abuse or assault at Laredo Bridge I during the audit period. However, if there was such an incident, the supervisor on duty would contact the contractor's manager, call JIC, notify the PSA Coordinator, CBP Watch, the local law enforcement agency, OPR, and immediately remove from their role pending investigation. Removal notification is made verbally and in writing to the HQ PDO. Local SME interviews indicated that all suspected contractor perpetrators of sexual abuse would be immediately removed from contact with detainees pending the outcome of the investigation.

(b): The facility meets the standard provision. The standard requires that contractors and volunteers suspected of perpetrating sexual abuse may be removed from all duties requiring detainee contact pending the outcome of an investigation, as appropriate. CBP Directive 2130-030 reiterates the standard requirements described in this provision. There were no allegations of sexual abuse or assault reported at Laredo Bridge I during the audit period. Local SME interviews verified that the contractor's supervisor would be contacted regarding the contractor suspected of perpetrating sexual abuse or assault and would remove the contractor from the facility pending the outcome of the investigation.

**§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. The standard requires detainee victims of sexual abuse to have 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 medical care. Such services are to be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. CBP Directive 2130-030 reiterates the standard requirements set forth in the provisions. Local SME interviews indicated a detainee victim of sexual abuse or assault at Laredo Bridge I must be immediately transported to Laredo Medical Center, where they would address any medical emergency or use SANE's services when appropriate. All staff interviewed confirmed such services would be provided to the victim without financial cost and regardless of their cooperation and participation with 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 facility meets the standard provision. The standard requires the agency to conduct a sexual abuse incident review at the conclusion of every investigation of substantiated or unsubstantiated sexual abuse. Where the allegation was not determined to be unfounded, the agency must prepare a written report recommending whether the allegation or investigation indicated that a change in policy or practice could better prevent, detect, or respond to sexual abuse. Such review must ordinarily occur within 30 days of the agency receiving the investigation results from the investigative authority. The agency must implement the recommendations for improvement or must document its reasons for not doing so in a written response. The report and response must be forwarded to the agency PSA Coordinator. CBP Directive 2130-030 reiterates the standard requirements. The local PAQ indicated that there were no incidents of sexual abuse or assault reported at Laredo Bridge I during the audit period. The interview with the HQ OFO SME verified that there were no sexual abuse or assault allegations at the facility during the audit period. However, the agency's incident review process is done immediately after concluding an investigation into the incident of sexual abuse or assault. HQ OPR investigates the allegation, completes the investigation, and sends the investigative report to the HQ OPR/SAAI. HQ PDO/PSA Coordinator ultimately completes the incident review and determines accuracy. Policy or procedural changes may be implemented as a result of the incident review. The HQ PDO/DPSA Coordinator confirmed their office ordinarily receives sexual abuse incident reviews within 30 days of the conclusion of a sexual abuse investigation at a facility. The sexual abuse incident status is received from the OPR Joint Integrity Case Management System (JICMS) electronic database, on a weekly basis via a comprehensive report that includes the open and close dates as well as disposition of the investigation. The PSA Coordinator reviews the closed case reports for accuracy and sends to the HQ OFO National PREA Coordinator for review. A 14-day reminder is distributed as well as a 29-day reminder to ensure the review is completed prior to the 30-day requirement. The PDO/PSA finalizes the incident review report and saves into secured database where only the PSA Coordinator and the PSA Coordinator's supervisor have access. Local SME interviews indicated not having to undergo such process during the audit period as there were no allegations of sexual abuse or assault made; however, they verified that they would implement recommendations made following conclusion of a sexual abuse incident 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**

*November 12, 2024*

**Date**