

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



U.S. Customs and
Border Protection

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AGENCY INFORMATION			
Name of Agency:	U.S. Customs and Border Protection		
PROGRAM OFFICE			
Name of Program Office:	Office of Field Operations		
SECTOR OR FIELD OFFICE			
Name of Sector or Field Office:	Laredo Field Office		
Name of Chief or Director:	(b) (6), (b) (7)(C)		
PREA Field Coordinator:	(b) (6), (b) (7)(C)		
Physical Address:	109 Shilo Drive, Laredo, Texas 78045		
Mailing Address: <i>(if different from above)</i>			
SHORT-TERM HOLDING FACILITY BEING AUDITED			
Information About the Facility			
Name of Facility:	Laredo Bridge II (Juarez-Lincoln International Bridge)		
Physical Address:	700 Zaragosa Street (End I-35), Laredo, Texas 78040		
Mailing Address: <i>(if different from above)</i>	P.O. Box 3130, Laredo, Texas 78044		
Telephone Number:	(b) (6), (b) (7)(C)		
Facility Leadership			
Name of Officer in Charge:	(b) (6), (b) (7)(C)	Title:	Port Director
Email Address:	(b) (6), (b) (7)(C)	Telephone Number:	(b) (6), (b) (7)(C)

AUDIT FINDINGS

NARRATIVE OF AUDIT PROCESS AND DESCRIPTION OF FACILITY CHARACTERISTICS:

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

The Prison Rape Elimination Act (PREA) onsite audit of U.S. Customs and Border Protection (CBP), Office of Field Operations (OFO), Laredo Bridge II (Juarez-Lincoln International Bridge) was conducted on Wednesday, July 17, 2024, from 5:00 a.m. to 5:45 p.m. The 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 II. The first audit was conducted on March 7, 2019. Laredo Bridge II is a short-term holding facility detaining adult males and females, and/or families for a period specified to be under 24 hours, pending transfer for removal to their country of origin, detention, or placement within another Department of Homeland Security (DHS) facility.

Laredo Bridge II is in Laredo, Texas, adjacent to the Laredo Bridge I (Gateway to the Americas Bridge). Laredo Bridge II operates as one of four vehicular international bridges situated in Laredo, Texas and connects the United States of America to Mexico.

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, Headquarter (HQ) OFO memoranda, and telephonic interviews with CBP and HQ OFO Subject Matter Experts (SMEs). The electronic documents were provided on the secure CBP SharePoint website which included the HQ and Local Pre-Audit Questionnaires (PAQs), training curricula and educational materials, and any other supporting documents to demonstrate compliance with the DHS PREA standards.

The Point of Contact for Laredo Bridge II was (b) (6), (b) (7)(C) a, Watch Commander (WC). The Auditor was accompanied by (b) (6), (b) (7)(C), Creative Corrections Program Manager. There are (b) (7)(E) different shifts for staff at Laredo Bridge II. The shifts are: (b) (7)(E) Upon arrival, the Auditor was met by the Juarez-Lincoln escorting officer and informally introduced to the Laredo Bridge II leadership team. After introductions, the Auditor reviewed the audit schedule with team members and was provided a private interview room to begin conducting staff interviews.

At approximately 8:00 a.m., all parties were provided a tour of Laredo Bridge II by the WC. The tour followed the path an individual would take from their entry into the facility, intake, processing, and placement in holding. Laredo Bridge II is comprised of a large gray building consisting of 14 vehicular, non-pedestrian lanes and one bus lane and sallyports to accept persons or groups of persons placed into custody and providing entry into the detainee holding area. There is an exterior vehicular secondary processing area outside of the main lobby entrance. The main lobby is an open space with metal detectors and baggage scanners primarily used to process individuals (individuals who didn't clear primary and secondary vehicular checks and/or bus passengers) and their belongings. Officers conduct the individual screening assessment with detainees in the interview rooms located behind the main lobby, which leads into a corridor, detainee holding rooms, and staff offices. Amongst the screening assessment, detainees are asked questions regarding their own views and concerns of their safety. (b) (7)(E)

(b) (7)(E) There is a secured public entrance which leads to an administrative area with staff offices and conference rooms.

Laredo Bridge II has a separate secure Command Center that is monitored by first- and second-line supervisors 24 hours a day, seven days a week. (b) (7)(E)

(b) (7)(E) There are no showers at this facility. Officers maintain visual interior and exterior observation 24 hours a day, seven days a week (b) (7)(E). The facility maintains adequate officers to provide a safe and secure environment for detainees. Established staff positions are appropriate and flexible depending upon operational needs. Overtime protocols are initiated when there is a staffing shortage or an influx of detainees.

Juveniles who are part of a family unit or identified as Unaccompanied Children (UC) are held in the least restrictive setting as possible separately from adult detainees. (b) (7)(E)

(b) (7)(E) direct staff monitoring and consists of at least one television, a DVD player, sectional couches, toys, mats, and gaming systems along with having access to a fully stocked snack pantry. The facility has two areas separate from the detention hold rooms designated for UC. The number of detainees depends on the composition of the detainee population. Detainees are typically held at Laredo Bridge II for less than 24 hours, under normal operations. This facility operates under the U.S. Customs & Border Protection short-term holding regulations.

Laredo Bridge II has (b) (7)(E) multi-occupancy hold rooms. (b) (7)(E) used as an office space for the hall monitor officer whose sole responsibility is to directly supervise detainees. There are (b) (7)(E) multi-occupancy rooms with large, oversized windows. The toilets in the hold rooms are located behind a privacy partition allowing for privacy when using the bathroom. (b) (7)(E)

Only Laredo Bridge II officers have direct contact with detainees. Hold rooms are cleaned between stays by non-law enforcement janitorial or maintenance contractors. Cleaning crews never come in direct contact with any detainee without an officer's presence.

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. Therefore, the Auditor contacted the LMC Emergency Room nurse who verified having a SANE program.

The Auditor was escorted by supervisory staff throughout the site inspection while at Laredo Bridge II and was allowed to revisit any needed areas. Throughout the site inspection, the Auditor was able to obtain a full understanding of the facility's process. The Auditor had complete access to the facility and observed all detainee processing areas, six hold rooms; vehicular, bus, and bus passenger processing. There was only one detainee held at the facility during the Auditor's onsite audit. The Auditor was unable to conduct an interview with the detainee as the detainee was held for criminal charges. The Auditor observed numerous PREA Audit Notices posted in various areas of the facility in both English and Spanish for staff and detainees to view along with posters advising detainees of their right to be free from sexual abuse. Posters were observed with detainee reporting numbers and explaining the agency's zero-tolerance policy.

During the onsite audit, the Auditor interviewed Laredo Bridge II's officers from all three shifts. The Auditor interviewed four local SMEs and eight officers. Interviews were conducted randomly and based on the size of the facility and staff availability. The Auditor reviewed 26 detainee risk assessments.

An exit briefing for Laredo Bridge II was held in conjunction with Laredo Bridge I (Gateway to the Americas 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 II. The Auditor explained the final determination would be made after triangulating all the documents, onsite inspection, interviews, and review of the background information. The background information for a random selection of 20 staff was requested while onsite. The information was received promptly during the post audit phase. The Auditor confirmed PREA training records for all randomly selected staff while onsite. There were no reported allegations of sexual abuse or assault within the audit period.

SUMMARY OF OVERALL FINDINGS:

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

The Auditor reviewed all relevant policies, procedures, and documents in assessing Laredo Bridge II (Juarez-Lincoln International Bridge). The Laredo Bridge II onsite audit was completed on Wednesday, July 17, 2024, and the findings report was submitted on August 14, 2024.

Laredo Bridge II met 25 standards: 115.111; 115.113; 115.114; 115.115; 115.116; 115.117; 115.121; 115.122; 115.131; 115.132; 115.141; 115.151; 115.154; 115.161; 115.162; 115.163; 115.164; 115.165; 115.166; 115.167; 115.176; 115.177; 115.182; and 115.186. Standard 115.118 was not applicable.

SUMMARY OF AUDIT FINDINGS	
Number of standards exceeded: 0	
Number of standards met: 25	
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 provision. 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 prevent, detect, and respond to such conduct. Initially, Laredo Bridge II employees were informed of CBP's zero-tolerance policy of sexual abuse and assault through a written memorandum (dated March 11, 2015). The memorandum emphasized CBP's committed efforts to ensuring the sexual safety of detainees in CBP's custody as well as implementing preventive mechanisms to deter sexual abuse and assault. In October 2015, the CBP *National Standards on Transport, Escort, Detention & Search* (TEDS) was issued to reiterate CBP's zero-tolerance policy; and on January 19, 2018, the CBP Directive 2130-030, *Prevention, Detection and Response to Sexual Abuse and/or Assault in CBP Holding Facilities* was issued, also mandating zero tolerance toward all forms of sexual abuse and/or assault in holding facilities and outlining the agency's approach to prevent, detect, and respond to sexual abuse and assault in CBP holding facilities. Likewise, the Directive mandates CBP holding facilities to inform all detainees of the agency's zero-tolerance policy through visible and readily available information such as posters, pamphlets, or other written formats. In observance of the Sexual Assault Awareness & Prevention Month (April), the Privacy & Diversity Office (PDO) distributed electronic mail to all CBP employees, reminding them of the agency's zero-tolerance policy and its requirements. Written notification of the agency's zero-tolerance policy in both English and Spanish was visible throughout the Laredo Bridge II's interview rooms, processing areas, and holding area corridors. All staff interviewed were familiar with the contents of the agency's zero tolerance policy, and all Local SMEs interviewed indicated that the zero-tolerance policy on sexual abuse is communicated to facility staff through annual online training in the Acadis software application and ongoing Musters (roll call training). Local SMEs indicated that the zero-tolerance policy was implemented through training, detainee assessments, (b) (7)(E). Officers interviewed confirmed that they are familiar with the agency's zero-tolerance policy through annual training in Acadis and ongoing Musters. There was only one detainee held at Laredo Bridge II while the Auditor was onsite. However, the Auditor was unable to interview as the detainee was being held for criminal charges.

§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) and recorded in the designated electronic system of record, (b) (7)(E). During the site inspection, the Auditor observed all hold rooms which are on two different corridors situated amongst staff offices or interview rooms. (b) (7)(E). Each multi-occupancy hold room has large windows for staff to

maintain a clear line of sight of detainees. The Supervisory Command area is a separate room with first- and second-line supervisors monitoring the hold area corridors, interview rooms, main lobby, and exterior perimeters 24 hours a day, seven days a week. Local SMEs via interviews confirmed that security and wellness checks are conducted every 15 minutes and documented in the (b) (7)(E) electronic database. 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 or staff shortages. While onsite, the Auditor observed an adequate level of supervision, through staff's presence (b) (7)(E) 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. 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 II'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 II's most recent *Review of Detainee Supervision Guidelines* (dated December 11, 2023). The review specified that Laredo Bridge II 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 be detained in the least restrictive setting appropriate to the juvenile's 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. In accordance with CBP TEDS, officers must place each vulnerable detainee in the least restrictive setting appropriate to their age and special needs as such setting is consistent with the need to ensure the safety and security of the detainee and that of others. There were no juveniles held at the facility while the Auditor was onsite. In accordance with Local SME interviews, juveniles are assessed promptly and held in hold rooms by their age and gender. Officers indicated that juveniles are held in designated family rooms in accordance with their age and gender. While onsite, the

Auditor verified hold rooms designated for juveniles are in the least restrictive setting. The hold rooms consisted of two sectional couches, a television, a DVD player, a large window, a playpen, children's tables, and a baby bouncer. (b) (7)(E), an officer directly supervises juveniles.

(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, after vetting such relationship. CBP TEDS requires Unaccompanied Children (UC) to be held separately from adult detainees and to temporarily allow juveniles to remain with a non-parental adult family member upon vetting to the extent feasible and after a supervisor determines that remaining with the non-parental adult family member is appropriate, under the totality of the circumstances. Local SMEs and officers indicated that UC are immediately separated from adults, processed promptly, and kept separate from adults unless it is determined that keeping them with the family unit is appropriate after adequate vetting. In accordance with Local SMEs and officers, the vetting process includes reviewing all accompanied documentation such as birth certificates, passports, and citizenship documentation. The vetting process includes observing interactions between the child(ren) and the non-parental adult(s) and interviewing the child(ren) separate from the accompanied adult(s), depending upon the age of the child(ren). There were no juvenile detainees held at Laredo Bridge II while the Auditor was onsite.

§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): The facility meets the standard provision. The standard requires that cross-gender strip (partial body) 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 use of strip (partial body) and visual body cavity searches may, under certain conditions, be necessary to protect the safety of staff, other detainees, the public, and to detect and secure evidence of criminal activity. CBP TEDS indicates that whenever operationally feasible, officers conducting a search or officers who are present at a medical examination, must be of the same gender, gender identity, or declared gender as the detainee being searched. Cross-gender strip searches or cross-gender visual body cavity searches must not be conducted except in exigent circumstances including consideration of officer safety, or when performed by medical practitioners. Officers must not conduct visual body cavity searches of juveniles and shall refer all such body cavity searches of juveniles to a medical practitioner. Prior supervisory authorization must be obtained in all cases involving juvenile strip and visual body cavity searches. In accordance with HQ OFO memorandum (dated December 10, 2018) *Processing Transgender Applicants for Admission*, officers conducting a personal search, other than an immediate pat-down, must be of the gender the individual identifies as, which may differ from their appearance, or anatomy. Officers are trained to ensure strip searches and visual body cavity searches of all detainees are conducted in accordance with CBP TEDS mandates. Such searches of detainees are conducted in a respectful, dignified manner, and given the appropriate level of privacy. In accordance with the Local PAQ, there has been no partial body searches or visual body cavity searches of any detainees during the audit period. All Local SMEs and officers interviewed indicated that cross-gender strip searches and visual body cavity searches are not authorized unless in exigent circumstances and that juveniles are referred to a medical practitioner when such searches are needed. The Auditor was unable to interview the only detainee held at the Laredo Bridge II as the individual was held for criminal charges.

(c): The facility meets the standard provision. The standard requires that all strip searches and visual body cavity searches be documented. CBP TEDS provide guidelines of permitted searches and search conditions. A strip search requires a person to remove or arrange some or all clothing to permit a visual inspection of the person's breasts, buttocks, or genitalia related to searches for contraband. A visual body cavity search is categorized as a medical examination to view contraband in the anal or vaginal cavity via X-ray. Prior to conducting a strip search, officers must obtain approval from a supervisor. All strip (partial body) searches and visual body cavity searches, the reason for the search, and the supervisory approval must be documented in the Incident Log Report (IOIL) electronic database. The

local PAQ indicated no strip (partial body) searches or visual body cavity searches were performed during the audit period at Laredo Bridge II. However, while onsite, the Auditor was informed that a most recent strip search report was retrieved. The report confirmed that a strip (partial body) search was conducted within the audit period. Therefore, the auditor reviewed written documentation and verified that two female officers conducted a partial body search of a female detainee. The partial body search of the female detainee was approved by the supervisor and Chief prior to administering. Local SMEs and officers interviewed confirmed that all strip (partial body) searches and visual body cavity searches must be approved by a supervisor and documented.

(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 and officers 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. (b) (7)(E)

. During the site inspection, the Auditor did not observe any showers at Laredo Bridge II.

(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. Auditor was unable to conduct a detainee interview while onsite due to pending criminal charges.

(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. Also, Local SMEs and officers interviewed indicated that they communicate respectfully and professionally with each detainee being searched.

§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 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. When necessary to ensure effective communication with detainees who are deaf or hard of hearing, detainees who are blind or have low vision, detainees who have an intellectual, psychiatric, or speech disability, such steps include providing access to in-person, telephonic, or video interpretive services, and written materials related to sexual abuse are provided in formats or through methods that ensure effective communication for detainees with the above disabilities. However, an agency is not required to 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 that employees take appropriate steps to provide reasonable accommodations to detainees who are deaf or hard of hearing, detainees who are blind or have low vision, or detainees who have intellectual, psychiatric, or speech disabilities to ensure them an equal opportunity to participate in and benefit from CBP's efforts to prevent sexual abuse. CBP Directive 2130-033 (dated July 8, 2021) Nondiscrimination for Individuals with Disabilities in CBP-Conducted Services, Programs & Activities (Non-Employment) indicates the roles and responsibilities of CBP's facilities and staff to ensure nondiscrimination for members of the public with disabilities and providing additional direction for staff. CBP TEDS indicates that detainees with identified mental, physical, or developmental disabilities are identified as vulnerable or at-risk, and reasonable accommodations must be made along with additional efforts to ensure an at-risk detainee's ability to understand staff's instructions, questions, and applicable forms. Staff are instructed to take steps to communicate with detainees in an effective manner, utilizing auxiliary aides and services, such as access to in-person, telephonic, or video interpretive services. The PDO Job Aid (dated September 2021) PREA Guide to Communicating with Detainees with Disabilities was issued to CBP staff to provide guidance on communicating effectively with detainees with disabilities. The local PAQ indicated that staff were not aware of any detainees who are deaf or hard of hearing, detainees who are blind or have low vision, or detainees who have intellectual, psychiatric, or speech disabilities being held at the Laredo Bridge II during the audit period. Local SMEs and officers interviewed indicated that they may have to point to the age appropriate PREA posters or use closed caption video to inform detainees who are deaf or hard of hearing of the agency's efforts to prevent, detect, and respond to sexual abuse. Staff further informed the Auditor that the agency's efforts to prevent, detect, and respond to sexual abuse would be read by staff or the PREA video with audio capabilities would be played for detainees who are blind or have low vision. Such information would be read or verbally communicated using plain words and slower speech for detainees who have an intellectual or psychiatric disability. There were no detainees with a disability held at Laredo Bridge II while the Auditor was onsite.

(b): The facility meets 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 for detainees who are limited English proficient (LEP), 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 in ensuring meaningful access to services for LEP detainees. CBP Directive 2130-031 (dated December 4, 2018) Roles & Responsibilities of U.S. Customs & Border Protection Offices & Personnel Regarding Provision of Language Access indicates the roles and responsibilities of CBP staff in providing LEP detainees with meaningful access to the agency's programmatic activities. During the site inspection, the Auditor observed PREA posters, and I Speak Language Identification posters in both English and Spanish in interview rooms and hold area corridors. The "I Speak" language identification posters assist staff and literate LEP detainees in identifying a detainee's fluent or preferred language. There are 70 languages identified on such posters. Once the detainee's language is identified, staff uses Language Assistance Services to interpret. Local SMEs and officers interviewed indicated that they can effectively communicate with detainees who speak Spanish, as most are bilingual. The Auditor was unable to interview detainees at the Juarez-Lincoln International Bridge.

(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. CBP Directive 2130-030 prohibits staff from using another detainee to interpret unless the detainee victim expresses a preference for the other detainee to interpret, and CBP has determined that such interpretation is consistent with DHS policy. Staff is prohibited from using minors, alleged abusers, detainees who may be witnesses, or detainees who have a significant relationship with the alleged abuser for interpreter services. The PDO PREA Job Aid (September 2021) Guide to Communicating with Detainees with Disabilities reiterates that staff must not rely on minors, alleged abusers, detainees

who may be witnesses, or detainees who have a significant relationship with the alleged abuser to interpret or facilitate communication. During the interviews with Local SMEs and officers, the Auditor was informed that most staff can effectively communicate with detainees who speak Spanish, as most are bilingual. Staff stated they would use the I Speak posters when necessary to identify other languages. Staff were able to identify contact information for Language Assistive Services. All Local SMEs and officers indicated that they would use such services instead of using another detainee to interpret complaints relating to sexual abuse.

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

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

Notes:

(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 20 randomly selected staff of different ranks who are employed at Laredo Bridge II 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 20 randomly selected staff. All randomly selected staff received a background investigation prior to being hired. There were seven staff who had background investigations that exceeded the five-year subsequent background investigation requirement. However, all staff 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 §115.17(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, 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): The standard provision is not applicable. The provision 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. The local PAQ indicated the agency has not acquired a new facility and that the Laredo Bridge II has not undergone a major expansion since the last audit. While onsite, the Auditor observed minor construction (flooring) near the employee canteen but did not observe any areas that appeared to be of a structural change or expansion. Local SMEs confirmed that the facility had not been substantially expanded or modified.

(b): The standard provision is not applicable. (b) (7)(E)

(b) (7)(E)

§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 II 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. 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. The local PAQ indicated there were no allegations of sexual abuse reported at Laredo Bridge II 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 II 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 II. 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 II. Local SMEs and officers confirmed that they receive annual and ongoing refresher training on the agency's zero-tolerance policy and sexual abuse and assault prevention through Acadis, electronic mail, and at musters. The Auditor was unable to conduct a contractor interview while onsite, and Local SMEs confirmed via interviews that there were no volunteers at the facility. However, 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 electronic mail 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. The Auditor was unable to conduct a contractor interview onsite. The services of volunteers are not enlisted at Laredo Bridge II.

§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 in the interview rooms and the hold room corridors written in English and Spanish. One poster included a box stating, "Report Sexual Abuse Now," in six other commonly used languages. Local SMEs and officer interviews confirmed that PREA posters are posted on the walls in the hold room areas and corridors where detainees are located. The Auditor was unable to interview the only detainee held at Laredo Bridge II as the detainee was held on criminal charges.

§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 meets 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 via video surveillance by an employee in close proximity to intervene, unless no such option is determined to be feasible. Local SMEs interviewed verified the requirement to consider if a detainee may be at a high risk of being sexually abused before placing the detainee in a hold room with other detainees. 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 room closest to the hall monitor's office.

(b): The facility meets 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. 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 Auditor was unable to interview the only detainee held at Laredo Bridge II as the detainee was held for criminal charges. 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 facility during the audit period:

1. The Auditor randomly selected two detainees from a list of detainees who were processed on July 18 – 19, 2023. The Auditor determined both detainees received risk assessments.
2. The Auditor randomly selected two detainees from a list of detainees who were processed on August 20 – 25, 2023. The Auditor determined both detainees received risk assessments.
3. The Auditor randomly selected two detainees from a list of detainees who were processed on September 15 – 18, 2023. The Auditor determined both detainees received risk assessments.
4. The Auditor randomly selected two detainees from a list of detainees who were processed on October 9 - 15, 2023. The Auditor determined both detainees received risk assessments.
5. The Auditor randomly selected two detainees from a list of detainees who were processed on November 8 - 15, 2023. The Auditor determined both detainees received risk assessments.
6. The Auditor randomly selected two detainees from a list of detainees who were processed on December 24 - 27, 2023. The Auditor determined both detainees received risk assessments.
7. The Auditor randomly selected two detainees from a list of detainees who were processed on January 6 – 22, 2024. The Auditor determined both detainees received risk assessments.
8. The Auditor randomly selected two detainees from a list of detainees who were processed on February 5 – 15, 2024. The Auditor determined both detainees received risk assessments.
9. The Auditor randomly selected two detainees from a list of detainees who were processed on March 8 -10, 2024. The Auditor determined both detainees received risk assessments.
10. The Auditor randomly selected two detainees from a list of detainees who were processed on

April 13, 2024. The Auditor determined both detainees received risk assessments.

11. The Auditor randomly selected two detainees from a of detainees list who were processed on May 18 – 20, 2024. The Auditor determined both detainees received risk assessments.
12. The Auditor randomly selected two detainees from a list of detainees who were processed on June 1 - 11, 2024. The Auditor determined both detainees received risk assessments.
13. The Auditor randomly selected two detainees from a list of detainees who were processed on July 5, 2024. The Auditor determined both detainees received risk assessments.

(c): The facility meets 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 II to ensure it contained the required information. 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.

(d): The facility meets 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 on video 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 via video surveillance 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 and closely monitored to ensure the detainee’s safety.

(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. There were no detainees being processed at Laredo Bridge II during the Auditor’s onsite audit. Risk assessments are conducted in interview rooms. 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 electronic database (b) (7)(E) 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 II, 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 and officer 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. Local SME and officer interviews confirmed that detainees may report anonymously. The Auditor did not conduct a detainee interview as the only detainee held at the facility was held for criminal charges.

(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 private interview rooms and PREA posters posted throughout the hold room corridors and interview rooms 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 II 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 to a private office such as the office the Auditor was provided to work in while onsite. Then, the officer would dial the DHS OIG number, slant the door for audio privacy, and stand outside of the office 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 II 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. There was only one detainee held

at the facility while the Auditor was onsite. The Auditor was unable to conduct an interview with the detainee as the detainee was held on criminal charges.

§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 II and during the interviews with Local SMEs and officers, 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 II 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 2130-030 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 and officers, 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 SMEs interviewed 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 TEDS requires immediate action to protect detainees when employees have a reasonable belief the detainee is subject to 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 II, 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.

(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 II 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 II 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 [REDACTED] 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 (if juveniles are involved), and 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 2130-030 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 Auditor was unable to conduct a contractor interview while onsite. 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 II 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 II during the audit period. Local SMEs confirmed their knowledgeable 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. There were no allegations of sexual abuse or assault reported at Laredo Bridge II 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 from retaliating 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 TEDS indicates the prohibition of CBP retaliating against any person, including a detainee, who alleges or complains about mistreatment, participates in an investigation into an allegation of staff misconduct, including sexual abuse, or for participating in sexual activity as a result of force, coercion, threats, or fear of force. CBP Directive 51735-013B prohibits retaliation against a detainee for reporting sexual abuse or assault. Local SME and officer interviews verified that retaliation is not allowed in the agency or facility for reporting or participating in the investigation of such incidents. All staff interviewed were aware of signs of retaliation and advised that they would immediately report retaliation the same way they would report an incident of sexual abuse or assault.

§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 and prohibited 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 II 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 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 II. While onsite, the Auditor observed a maintenance contractor working throughout the corridors but was unable to interview due to shift change. An interview with the HQ OFO SME verified that there has not been any allegations of sexual abuse or assault at Laredo Bridge II 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 by 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 II 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 II 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 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 II 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 PDO/PSA Coordinator who 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/PSA 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 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 5, 2024

Date