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



AUDITOR			
Auditor:	(b) (6), (b) (7)(C)	Organization:	Creative Corrections, LLC
Email Address:	(b) (6), (b) (7)(C)	Telephone Number:	(b) (6), (b) (7)(C)
	AGEN	CY	
Name of Agency:	U.S. Customs and Border Protection		
	PROGRAM	OFFICE	
Name of Program Office:	U.S. Border Patrol		
	SECTOR OR FIE	LD OFFICE	
Name of Sector or Field Office:	El Paso		
	(b) (6), (b) (7)(C)		
PREA Field Coordinator:	(b) (6), (b) (7)(C)		
Sector or Field Office Physical Address:			
Mailing Address: (if different from above)	Same as above		
	SHORT-TERM HOLDING FA	CILITY BEING AUDITE	D
Information About the Facility			
Name of Facility:	Lordsburg Station		
Physical Address:	sical Address: 26 Pipeline Road, Lordsburg, NM 88045		
Mailing Address: (if different from above)			
Telephone Number:	Telephone Number: (b) (6), (b) (7)(C)		
Facility Leadership			
Name of Officer in Charge:	(b) (6), (b) (7)(C)	Title:	Acting Patrol Agent-in-Charge
Email Address:	(b) (6), (b) (7)(C)	Telephone Number:	(b) (6), (b) (7)(C)

AUDIT FINDINGS

NARRATIVE OF AUDIT PROCESS AND DESCRIPTION OF FACILITY CHARACTERISTICS:

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

The Prison Rape Elimination Act (PREA) on-site audit of Customs and Border Protection's (CBP) U.S. Border Patrol (USBP) Lordsburg Station, Lordsburg, New Mexico, was conducted February 5, 2019. The audit was conducted by (b) (6), (b) (7)(C) PREA Auditor, contracted through Creative Corrections, LLC. This is the first PREA Audit for Lordsburg Station. Lordsburg Station is a short-term holding facility that holds adult male and female detainees, family units (which includes one or more juvenile) and detainees who are under the age of 18 and have been identified as unaccompanied alien child (UAC). Detainees are to be held at Lordsburg Station for a maximum of 72 hours. The purpose of the audit is to determine compliance with Subpart B of the Department of Homeland Security (DHS) Standards to Prevent, Detect, and Respond to Sexual Abuse and Assault in Confinement Facilities.

(b) (6), (b) (7)(C) Assistant Chief, USBP, Headquarters (HQ) served as the HQ Audit Contact. The point of contact established for Lordsburg Station was (b) (6), (b) (7)(C) PREA Field Coordinator. The Auditor was notified three weeks prior to the on-site portion of the audit pre-audit documentation was ready to be reviewed. The documentation provided was complete and included pre-audit questionnaires (PAQ) from HQ and Lordsburg Station.

An entry-briefing, led by CBP Prevention of Sexual Assault (PSA) Coordinator, (b) (6), (b) (7)(C) was conducted shortly after arrival at the facility on February 5, 2019. Those in attendance included:

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

Associate Chief, USBP, HO

Acting Patrol Agent-in-Charge, Lordsburg Station Deputy Patrol Agent-in-Charge, Lordsburg Station

Assistant Chief, USBP, HQ

Senior Policy Advisor, DHS Office for Civil Rights and Civil Liberties (CRCL)

Senior Policy Advisor, DHS CRCL

Special Operations Supervisor (SOS), Lordsburg Station Assistant Chief, Office of Field Operations (OFO), HQ

Operations Officer, USBP, HQ

Program Manager, Creative Corrections

Once introductions were given, the Auditor introduced herself and provided an overview of the audit process and answered questions.

Immediately following the entry-briefing a tour of the facility was provided. All areas of the facility were toured to include the sallyport, shower facility, property room, hold rooms, interview rooms, medical office, kitchenette, and prosecution room. The Auditor observed the facility has enough cameras to aid in protecting detainees from sexual abuse.

(b) (7)(E) is in all detainee areas, including holding rooms. The Auditor also noted multiple PREA posters highlighting reporting methods for sexual abuse and zero tolerance.

Lordsburg Station consists of one building with (b) (7)(E) Each hold room has a toilet located behind a half-wall which allows privacy for detainees when using the toilet. Each hold room (b) (7)(E) located in the opposite corner of the toilet area. The Auditor (b) (7)(E) do not capture detainees using the toilets.

Every detainee enters Lordsburg Station through the sallyport to begin the intake process. This area is completely open and (b) (7)(E) Detainees are separated into specific groups before entering the intake area. Detainees are escorted by groups to the processing area. The processing area consists of processing stations that allow for direct supervision into the hold rooms. It also contains a medical room, kitchenette, interview room, a padded hold room, and an isolation hold room.

Immediately following the tour, the Auditor randomly selected staff and detainees for interview. Interviews with staff and detainees continued throughout the day.

While on-site the Auditor was able to tour the facility and observe all areas where agents and detainees interact. The Auditor was allowed to revisit areas as requested. The Auditor was able to conduct private and confidential interviews with staff and detainees. The audit notice was posted, and the Auditor did not receive any letters of correspondence from any detainee or agent. The Auditor researched services provided by Gila Regional Medical Center and La Pinon Sexual Assault Recovery Services.
The Auditor interviewed 9 Agents, 3 Supervisors and 13 detainees. The detainees consisted of adult males, adult females and family units with children over the age of 14. The countries represented in this sample include Honduras, Guatemala and Brazil, with Spanish being the primary language spoken. The Auditor used Language Services Associtates as interpretive servies to assist with the interviews.
Lorsdburg Station has had no sexual abuse allegation reported in the past 12 months.

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.

opened by PSA Coordinator, (b)	an exit briefing was conducted at approximately 3:30 p. (6), (b) (7)(C) and then turned over to the Auditor for an cin attendance at the exit-briefing included as follows:	.m. The exit-briefing was overview of the on-site audit
(b) (6), (b) (7)(C) (b) (6), (b) (7)(C)	Associate Chief, USPB, HQ Acting Patrol Agent-in-Charge, Lordsburg Station Assistant Chief, USBP, HQ Senior Policy Advisor, DHS CRCL Senior Policy Advisor, DHS CRCL SOS, Lordsburg Station Assistant Chief, OFO, HQ Operations Officer, USBP, HQ Program Manager, Creative Corrections	
During the exit-briefing the Aud	litor discussed her observations made during the on-site	review.
Of the 25 standards reviewed, the Auditor found Lordsburg Station met 16 standards: 115.111; 115.114; 115.117; 115.122; 115.131; 115.132; 115.154; 115.162; 115.164; 115.165; 115.166; 115.167; 115.176; 115.177; 115.182, and 115.186. Standard 115.118 was non-applicable. Eight standards were not in compliance: 115.113; 115.115; 115.116; 115.121; 115.141; 115.151; 115.161, and 115.163.		
SUMMARY OF AUDIT FINDING	S	
Number of standards exceeded: 0		
Number of standards met: 16		
Number of standards not met: 8		
OVERALL DETERMINATION		
☐ Exceeds Standards (Substantia	ally Exceeds Requirements of Standards)	☐ Low Risk

 \square Meets Standards (Substantial Compliance; Complies in All Material Ways with the

Standards for the Relevant Review Period)

□ Does Not Meet Standards (Requires Corrective Action)

Not Low Risk

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.

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): A review of CBP Directive 2130-030, Prevention, Detection and Response to Sexual Abuse and/or Assault in CBP Holding Facilities, dated 01/19/2018, and CBP Policy on Zero Tolerance of Sexual Abuse and Assault signed by CBP's Commissioner on March 11, 2015, confirm CBP has zero tolerance towards all forms of sexual abuse and sexual harassment in facilities it operates directly or under contract. The Directives establish CBP's procedures for the prevention, detection, and response to sexual abuse and assault in CBP holding facilities. The Directive includes definitions of prohibited behaviors regarding sexual abuse and sexual harassment. Similar language is found in CBP National Standards on Transport, Escort, Detention, and Search, (TEDS), dated October 2015. The Local Subject Matter Experts (SME) state information on CBP's zero tolerance policy is disseminated to staff through emails and the Performance and Learning Management System (PALMS). All Supervisors and Agents interviewed report they are familiar with the contents of CBP's zero-tolerance policy. When asked what zero-tolerance means to them, Agents stated zero-tolerance means no sexual abuse is allowed.
§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) CBP Policy on Zero Tolerance of Sexual Abuse requires the agency ensure sufficient supervision of detainees to protect them from sexual abuse. During the tour the Auditor noted all hold rooms are in direct line of site of Agents in the processing area. Each hold room has a large window for officers to easily see inside. Each hold room has a opposite of the toilet so Agents in the (b) (7)(E) can see the complete room. The (b) (7)(E) The Auditor also viewed the (b) (7)(E) The Auditor also viewed the (b) (7)(E) This room sits directly behind the processing station and is slightly elevated. In addition to viewing (b) (7)(E) there is a large window for staff to view the hold rooms directly in front of the processing station. The Auditor observed multiple occupied hold rooms. The population of detainees was divided into family units with adult males, family units with adult females, adult males, and adult females. The hold room where UACs would be held was empty. Each hold room also had a sign alerting staff to the make-up of the detainee population being held within. The PREA Field Coordinator advises spot checks of cells are done every 15 minutes and (b) (7)(E) Supervisors report the separating of adult males, adult females, family units and UACs enhances Lordsburg Station's level of supervision to keep detainees sexually safe. (b)(c): CBP Directive 2130-030 requires USBP to develop and document comprehensive detainee supervision guidelines to determine and meet each facility's detainee supervision needs and review those guidelines and application at each facility at least annually. The standard requires in determining adequate levels of detainee supervision, the following is to be taken into consideration: physical layout, composition of detainee population, prevalence of substantiated and unsubstantiated incidents of sexual abuse, findings and recommendations of sexual abuse incident review reports, and any other relevant factors in include but not limited to the length of time detainees are in agency custody

being processed and/or held in comparison to previous years, and takes into account all areas required by the subsection (c) of the standard, resulting in non-compliance of subparts (b) and (c). Corrective Action: Provide documentation of an annual review of the supervision guidelines (b) taking into account all areas listed in subsection (c) of the standard.

(e) of the standard
§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): CBP TEDS requires Lordsburg Station to place each juvenile in the least restrictive setting appropriate to their age
and special needs, provided the setting is consistent with the need to ensure the safety and security of the detainee
and that of others. Local SME staff and Agents report all juveniles who are a part of family units or identified as UAC
are held in the least restrictive setting as possible. They state juveniles are kept with their families. The Auditor
interviewed multiple family units. Each family unit reports they have never been separated from their children while at
Lordsburg Station.
(b): CBP TEDS requires UACs to be held separately from adult detainees. The Local SME staff report UACs are kept
separate from the adults and are then separated by gender. They are placed in a holding room closest to the officer's
station and the door is not locked. This way they can come out when they need to if they want a snack or ask the
officer a question. UACs are processed through intake immediately to limit the time they are near adult detainees.
Most Agents interviewed report UACs are kept in hold rooms closest to the processing station. All Agents report
juveniles who are identified as UAC are kept separate from adults. Local SME staff state relationships between a child
and a non-parental family member (b) (7)(E)
(b) (7)(E) The family units interviewed report they brought documentation
with them to prove the parental relationship. Documentation ranged from birth certificates, vaccine records and report
cards. Interviews with adult detainees with children report Agents interviewed them about their relationship with the
child and state they were asked for documentation of their relationship with the child. There were no UACs held at the
facility during the on-site portion of the audit to interview.
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§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)
	X	Does not meet Standard (requires corrective action)

Notes:

(b) CBP TEDS details the type and conditions under which searches can and will be performed to ensure the safety of Agents, civilians and detainees. It prohibits cross-gender strip searches or cross-gender visual body cavity searches except in exigent circumstances including consideration of officer safety, or when performed by medical practitioners. CBP TEDS details that officers/agents are not to conduct visual body cavity searches of juveniles and are to refer all such searches to a medical practitioner. Document review and interviews confirm there have been no strip searches and/or body cavity searches conducted at this facility in the past 12 months. Interviews with Supervisors report only medical staff can conduct strip and visual body searches of juveniles. Interviews with Agents reveal they are not familiar with strip or body cavity searches of juveniles. When asked if strip or body cavity searches were approved for juveniles and who would conduct them, the Agents interviewed did not know. After reviewing policy and conducting interviews with Agents and Supervisors, the Auditor determined Lordsburg Station is non-compliant with the subsection (b) of standard 115.115 as Agents are not aware of who can conduct strip and visual body cavity searches of juvenile detainees. Corrective Action: Provide documentation all staff have been trained on the policy requirements for strip/body cavity searches of juveniles.

(c): CBP TEDS requires strip and body cavity searches be recorded in the electronic system of record. Interviews with Supervisors and Agents confirms staff are aware strip and body cavity searches need to be documented.

(d): CBP TEDS specifies the requirements 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 under medical supervision. Local SMEs and all Agents report detainees can shower and use the restroom without staff of the opposite gender viewing them. Detainees interviewed state they have privacy to use the restroom in the hold rooms and to take a shower. The shower area for Lordsburg Station consists of six individual

portable shower units along with portable toilets outside the sallyport. Observation and staff interviews confirm the showers and toilets have doors the detainees can close for privacy when using. The Auditor also verified (5)(7)(E)in these areas do not infringe on detainee privacy. Detainees change their clothes behind a closed door and out of the sight of Agents. All but one hold room have a toilet located behind a half wall which cannot be seen by staff from the observation windows. The walls allow privacy for the detainee and ensures safety and security of the facility. The hold (b) (7)(E) located in the opposite corner of the toilet area. The Auditor verified that (b) (7)(E) do not capture detainees performing bodily functions. However, when the Auditor viewed the family hold room, it was discovered the toilet area can be viewed directly from the door. This allows for any person, detainee or staff, who walks by to view a person performing bodily functions resulting in non-compliance. **Corrective Action:** Develop a plan to ensure the privacy of detainees who need to perform bodily functions while being held in this room. CBP TEDS requires all officers/agents of the opposite gender to announce their presence when entering an area where detainees are likely to be showering, performing bodily functions or changing clothing, except in exigent circumstances or when such viewing is incidental to routine cells checks. While the PREA Field Coordinator reports policy is in place requiring staff to announce their presence when entering an area where detainees are likely to be in a state of undress, the remaining SME staff report they were not aware of this requirement. Of the nine Agents interviewed, four report they make the announcement before entering a hold room, two Agents report they never enter a hold room; they report they stand at the door and communicate with the detainees. Three Agents report they had no knowledge of the requirement to announce their presence when entering the hold rooms. The inconsistent responses reflect staff are not clear on the requirement on announcements resulting in non-compliance. Corrective Action: Provide documentation all staff at Lordsburg Station have been trained on the requirements of announcements as stated in the standard. (e): CBP TEDS prohibits staff from searching or physically examining a detainee for the sole purpose of determining the detainee's gender-related characteristics. If the detainee's gender is unknown, CBP TEDS states officers/agents will ask the detainee their gender or gender identity. If the detainee declines to state their gender, the gender will be recorded in the appropriate electronic system(s) of record as unknown. There were no detainees on-site who identified as transgender or intersex to be interviewed. Agents at Lordsburg Station report they do not search detainees solely for the purpose of determining gender. However, most supervisors and Agents indicate they are not familiar with how to ascertain a detainee's gender if it is unknown. Most staff responses ranged from relying on fingerprints and documentation to taking the detainee to the hospital for medical professional to determine gender. The inconsistent responses reflect staff are not clear on the policy directing staff to ask a detainee to state their gender if the detainee's gender is unknown resulting in non-compliance. **Corrective Action:** Provide documentation all staff have been trained on the procedures to determine detainee gender. (f): The PREA Field Coordinator reports all staff have been trained in how to conduct pat searches, including crossgender searches, but he reports staff have not been trained on how to conduct searches of transgender detainees. Most Agents interviewed state they have not been trained to conduct pat searches on the opposite sex or on detainees who identify as transgender or intersex. Additionally, the Auditor was not provided the search training curriculum. This standard is in non-compliance. Corrective Action: Provide the training curriculum on how to conduct cross-gender pat-down searches and pat-searches of transgender or intersex detainees. Provide verification all staff at Lordsburg Station has been trained on conducting cross gender pat searches and searches of transgender detainees.

§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)
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(a): CBP TEDS and CBP Directive 2130-030 require detainees with disabilities (e.g., detainees who are hearing impaired, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities) have access to CBP efforts to prevent, detect, and respond to sexual abuse and/or assault. When necessary to ensure effective communication with detainees who are hearing impaired, steps shall include providing access to in-person, telephonic or video interpretive services that enable effective, accurate, and impartial interpretation, both receptively and expressively using any necessary specialized vocabulary. In addition, written materials related to sexual abuse will be provided in formats or through methods that ensure effective communication with detainees with disabilities, including detainees with limited reading skills, or who are blind or have low vision. Whenever translation or interpretation services are provided, it must be recorded in the appropriate electronic systems of record. The PREA Field Coordinator reports if Agents have a detainee with disabilities, they are to ask them questions to learn more about the disability. He also reports there are visual aids Agents can use to communicate with detainees who are hearing impaired and if a detainee was visually

impaired Agents would read everything to them. He adds if a detainee came in with intellectual disabilities, Agents would ask family members to help staff in communicating with them. The Supervisors report they did not know how to work with detainees who had disabilities. All Agents interviewed state they have not been trained on how to work with detainees with disabilities, and state they are unclear on how to communicate with disabled detainees. This lack of knowledge results in non-compliance for subsection (a) of this standard. It is noted that after on the audit, CBP issued Corrective Action: It is noted after the on-site audit, CBP issued a job aid on February 19, 2019, to the nationwide workforce titled Guide to Communicating with Detainees with Disabilities; the job aid provides guidance to officers and agents on communicating effectively with detainees with disabilities pursuant to the DHS Standards to Prevent, Detect, and Respond to Sexual Abuse and Assault in Confinement Facilities. However, the aid does not complete corrective action and documentation is needed all staff at Lordsburg have been trained on how to identify and communicate with disabled detainees, to include informing staff which specific aids are available at Lordsburg Station.

(b): CPB Protocol for Identifying Limited English Proficient (LEP) Persons and Providing Language Services, dated

- October 2017, outlines steps Lordsburg Station is to take to identify LEP detainees. This Protocol directs staff to ask detainees to identify their primary language through the "I Speak" posters, the "Habla?" poster for indigenous language, the "I speak" pocket guide or booklet and the Indigenous Language Identification Tool to identify a resource to provide language assistance. The Auditor also reviewed the Over-the-Phone Translation Services, dated April 15, 2012. This document outlines CPB's new service with the Interpreters and Translators Incorporated to provide over-the-phone translation services for over 150 languages. All interviews reveal Agents are familiar with the translation service. All detainees interviewed report no concerns in communicating with staff. Most detainees state they can read and speak Spanish or English.
- (c): CBP TEDS requires Lordsburg Station, in matters relating to allegations of sexual abuse, to provide in-person or telephonic interpretation services that enable effective, accurate, and impartial interpretation, by someone other than another detainee, unless the detainee expresses a preference for anther detainee to provide interpretation, and the supervisor determines that such interpretations is appropriate and consistent with the operational office's policies and procedures. It further states the use of interpreter services by minors, alleged abusers, detainees who witnessed the alleged abuse, and detainees who have a significant relationship with the alleged abuser is not appropriate in matters relating to allegations of sexual abuse. Almost all Agents interviewed, including the Local SME staff report they would not allow another detainee to act as an interpreter for another detainee.

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

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

Notes:

(a)(c)(d): CBP Directive 2130-030 requires the Office of Human Resource Management (HRM) to establish policy and procedures and ensure CBP does not hire or promote personnel who have had previous substantiated allegations of engaging in sexual abuse and/or assault to any positions where the employee may interact with detainees in CBP holding facilities. If further informs CBP personnel they may be subjected to disciplinary or adverse action up to and including removal from their position and Federal service for substantiated allegations of sexual abuse and/or assault and/or for violating CBP's sexual abuse policies. An interview with the HQ Hiring Center SME reveals CBP follows federal guidelines and policy requirements. The SME states CBP has delegated authority to do their own suitability determinations after security forms are completed. She states CBP runs a series of background checks, then a polygraph examination. She reports the same process is followed when it comes to promotions and for contract staff except, contract staff do not undergo a polygraph examination. She also states CBP Directive 2130-030 requires background investigations for applicants for employment who may have contact with detainees to determine suitability and that updated background investigations are conducted every five years for CBP personnel who may have contact with detainees. It further requires background investigations be conducted for contractors who may have contact with detainees before enlisting their services. The HO Hiring Center SME reveals all employees and contractors receive periodic background investigation checks every five years. The Auditor submitted names of 13 staff for verification of background investigations. The HQ Hiring Center SME completed the form, "PREA Audits: Background Investigation for Employees and Contractors" and returned it to the Auditor via email. A review of the form confirms all staff submitted had the required background investigations and five-year investigations completed in a timely manner per this standard.

(b)(e)(f): The HQ Hiring Center SME reveals all applicants, including those applying for promotion, are asked about previous sexual abuse with any person in a jail, prison, holding facility, juvenile facility, community confinement facility or other institution. The SME reports staff have a continuing duty to report and that material omissions or providing

false information are grounds for termination or withdrawal of job offer. The SME states this information is provided to staff on hiring when issued the Employee Code of Conduct document and they are reminded annually during training through PALMS. It was also shared information on substantiate sexual abuse investigations involving former employees would be shared with potential employers if a release was signed by the former employee. The Auditor asked all staff interviewed what would happen if they failed to report sexual abuse of a detainee. Most staff reported they would be terminated for failing to report.

§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)
Notes:
An interview with the PREA Field Coordinator reveals Lordsburg Station has not made any substantial expansions or
modifications to the current building. They also have not (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): CBP TEDS and Directive 2130-030 require Lordsburg Station provide timely, (including emergency) unimpeded
access to medical treatment and crises intervention services, including sexual assault forensics medical exam,
emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted
standard of care to all detainee victims of sexual abuse/assault. CBD TEDS also requires the forensic medical
examination should be done by qualified health care personnel, including a Sexual Assault Forensic Examiner (SAFE) or
Sexual Assault Nurse Examiner (SANE) where practicable. The PREA Field Coordinator reports victims of sexual abuse
would be taken to Gila Regional Medical Center (GRMC) at no cost to detainees. Currently, there is no SANE program
at this hospital. However, a qualified medical professional would conduct the forensic exam. The interviews with
Supervisors reveal they have no knowledge on where detainees would receive a forensic medical exam. This lack of
knowledge results in a finding of non-compliance for subsection (c) of this standard. Corrective Action: Provide
documentation Supervisors have been trained on where detainee victims are taken for forensic exams.
(d): CBP TEDS and Directive 2130-030 require officers/agents allow detainee victims access to victim advocacy
services, to the extent available and consistent with security needs, while at the hospital for forensic exam due to
sexual abuse/assault. The PREA Field Coordinator reports victim advocate services for detainees at Lordsburg are
through La Pinon Sexual Assault Recovery Services. La Pinon provides crises intervention services, medical advocacy
and therapeutic counseling. Interviews with Supervisors reveal they have no knowledge of the requirement to allow a
detainee access to victim advocacy services. The lack of knowledge results in a finding of non-compliance for
subsection (d) of this standard. Corrective Action: Provide documentation Supervisors have been trained to allow a
detainee victim access to victim services while at the hospital. It is recommended Agents be informed of this as well.
(e): An interview with the PSA Coordinator confirms there have been no reports of sexual abuse or sexual assault at
Lordsburg Station in the last 12 months. The PREA Field Coordinator advises Hidalgo County Sheriff's Office has been
asked to follow PREA standards when conducting an investigation at Lordsburg Station.
§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)(d): CBP Directive 2130-030 requires staff with knowledge, suspicion, or information of any incident of sexual abuse

(c)(d): CBP Directive 2130-030 requires staff with knowledge, suspicion, or information of any incident of sexual abuse and/or assault of a detainee in a holding facility; retaliation against any person, including a detainee, who reports, complains about, or participates in an investigation about an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation to report to the Joint Intake Center. (JIC). Local SME Staff report all such incidents are reported JIC, PSA Coordinator, and Hidalgo County Sheriff's Office unless non-criminal. The PREA Field Coordinator reports either himself or the Watch Commander would make the required notifications. There have been no sexual abuse allegations at Lordsburg Station in the past 12 months and therefore

no records of notifications to review.
§115.131(a) through (c) – Employee, contractor and volunteer training. Exceeded Standard (substantially exceeds requirement of standard) Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) Does not meet Standard (requires corrective action) Notes:
(a)(b): CBP Directive No. 2130-030 requires all uniformed agents and officers, special agents, fact finders, contractors and volunteers who may have contact with the detainees in CBP holding facilities receive the training required in Subpart B of the DHS Standards. The Auditor reviewed the curriculum for Preventing and Addressing Sexual Abuse and Assault of Individuals in CBP Custody. This 45-minute online course covers all components outlined in this subsection. All Agents interviewed could explain the training they received on preventing, detecting and responding to sexual abuse. They advise the training covers zero-tolerance, the detainees right to be free from sexual abuse, warning signs of abuse, communicating with those detainees who identify as gay, lesbian, bisexual, transgender, intersex or gender-nonconforming the right to be free from relation and how to report sexual abuse. An interview with the contract medical personnel reveals she received training on CBP Directive 2130-030. When discussing the training, she advised she received information on zero-tolerance and was given a Quick Reference Card for first responders. She states the training covered behavior of victims in confinement, examples of sexual abuse, detainees' right to free form sexual abuse, zero-tolerance on retaliation, how to preserve evidence and how to report sexual abuse. (c): A review of policy, document review, and staff interviews confirms CBP maintains records of all staff, contractors and volunteers trained on the agency's sexual abuse policy and records of any refresher training the staff have received in accordance with CBP Directive 2130-030. The Auditor reviewed a spreadsheet created by Lordsburg Station which listed all staff assigned the facility. This spreadsheet listed the initial training on CBP 2130-030, and all annual refresher training staff have received since the initial training. Review of the spreadsheet confirms staff have received training within the timeframes established in the standard. All Agents interv
§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:
Throughout the on-site portion of the audit, the Auditor observed multiple PREA information posters (Keep Detention Safe) posted in the holding and processing areas. The posters inform the reader of the zero-tolerance policy at CBP and how to report sexual abuse allegations. These posters were in English and Spanish. The Local SMEs state information is provided to detainees through posters and verbalization of policy when requested by the detainee. All Agents interviewed report information on sexual abuse prevention is provided through posters in the facility. Most Agents also state PREA information is discussed during processing. However, eight out of nine detainees interviewed report they were not informed or did not know about sexual abuse prevention. Five of the nine detainees advise they do not know how to report sexual abuse.
§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) X Does not meet Standard (requires corrective action)

Notes:

(a)(b)(c): CBP TEDS states before placing detainees together in a holding facility, officers/agents shall assess the information before them to determine if the detainee may be considered an at-risk detainee, or at risk of posting a threat to others. This assessment by policy includes whether the detainee has exhibited a mental, physical or developmental disability; the age of the detainee; their physical build; any prior arrests or incarcerations; if the detainee identified as LGBTI or gender non-conforming; any prior sexual victimization, and the detainee's own concerns about his/her physical safety. Most Agents interviewed report all detainees are assessed for risk of sexual victimization and the risk for being sexually abusive towards other detainees through the intake process. They advise this is done before they are placed in a hold room. The PREA Field Coordinator reports all detainees are assessed in the intake process and are separated by this classification. He reports if they are flagged for higher risk of sexual abuse they are housed separately. He also states all required items are taken into consideration when determining a detainee's risk for sexual victimization. Most Agents interviewed support this statement. The Auditor was able to view random detainee Alien files and found the risk assessment was completed on detainees. The assessment was completed the day the detainee was processed into Lordsburg Station. The PREA Field Coordinator reports all detainees are asked about their concerns for their physical safety at intake. Of the nine Agents interviewed, two did not have knowledge of the intake process, four stated they specifically ask detainees about this concern and three were not aware they are required to ask this statement. Twelve of the thirteen detainees interviewed report they were not asked about their concern for their physical safety or any personal questions during the intake process. Failure to ask a detainee if they have concerns for their physical safety while at Lordsburg Station results in a finding of noncompliance for subsection (b) of this standard. Corrective Action: Provide documentation all staff responsible for assessing detainees are aware of the requirement to directly ask a detainee if they have concerns about their own physical safety. This question is about safety from sexual abuse, not safety for asylum issues. (d): CBP TEDS requires officers/agents to provide detainees identified as at high risk of sexual abuse victimization with heightened protection. This includes continuous direct sight and sound supervision, single-occupancy hold room, monitoring in open areas or placement in a hold room actively monitored on video by an officer/agent sufficiently proximate to intervene, unless no such option is determined to be feasible. Interviews with Agents and Supervisors report detainees who have been identified as being at a higher risk for sexual abuse will be placed in a hold room separate from other detainees. This hold room will be near the processing station. They advise this allows Agents at the processing station to directly see into the hold room and to hear if anything is going on. (e): CBP TEDS states efforts should be taken to ensure all assessments are conducted in a way that provides detainees the greatest level of privacy possible. It further requires all CBP facilities implement appropriate controls on the dissemination of private and/or sensitive information provided by detainees under this section and officers/agents are only to disclose this information to those personnel with a need to know. Supervisors report through interviews all information obtained on the DHS Risk Assessment is kept detainees' files located in the prosecution room. The PREA Field Coordinator also advises an Agent must provide a reason as to why they would need back into these files. Most of the Agents interviewed report information collected to determine a detainee's risk to be sexually abused is kept 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)
\boxtimes	Does not meet Standard (requires corrective action)

Notes:

(a)(b)(c): CBP Directive 2130-030 and CBP TEDS require detainees be provided multiple ways to privately report sexual abuse and/or assault, retaliation for reporting sexual abuse and/or assault, or staff neglect or violations of responsibilities that may have contributed to such incidents. It further requires the facility provide at least one way for detainees to report sexual abuse to a public or private entity not connected to the agency and detainees must be able to report confidentially and anonymously if desired, as well as both verbally and in writing. The Directive states procedures for reporting alleged sexual abuse and/or assault are to be visible or continuously and readily available to detainees at holding facilities and posted on the CBP public website. The telephone information for OIG is found on the Keep Detention Safe posters. Interviews with detainees reveal most of the detainees are aware of the telephone number; however, they are not clear if they could make reports privately. Agents and Local SMEs state a detainee could make a telephone call to OIG. However, during the tour of Lordsburg, it was discovered the telephone the detainees are to use is in an interview room. During interviews, Agents and Local SMEs indicate detainees would have to tell staff why they want to make a call before staff would take them to the room. This does not allow detainees the ability to making confidential and anonymous reports to OIG. This results in a finding of non-compliance for subsection

(a) of this standard. **Corrective Action:** Develop a plan to demonstrate detainees can report sexual abuse confidentially and anonymously. Provide documentation all staff are aware of the means for detainees to confidentially/anonymously report sexual abuse.

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

Notes:

Information on third-party reporting can be found on the CBP website at https://www.cbp.gov/about/care-and-custody/how-make-report. The website provides detainees multiple ways to privately report sexual abuse and/or assault, retaliation for reporting sexual abuse and/or assault, or staff neglect or violations of responsibilities that may have contributed to such incidents. Third parties not connected to a detainee can report these allegations. Reports are confidential and may be made anonymously, if desired, both verbally and in writing. Reports can be made to a CBP official at the holding facility or by: Calling the toll-free Joint Intake Center Hotline at 1-877-2INTAKE or sending a fax to (202) 344-3390; Sending an e-mail message to Joint.Intake@dhs.gov; Writing to the Joint Intake Center at P.O. Box 14475, 1200 Pennsylvania Avenue, NW, Washington, D.C. 20044; Calling the DHS Office of Inspector General (OIG) at 1-800-323-8603 or 1-844-889-4357 (TTY); or sending a fax to (202) 254-4297; Accessing the online DHS OIG Complaint/Allegation Form; or Writing to DHS OIG/MAIL STOP 0305, Attn: Office of Inspector General - Hotline, 245 Murry Lane SW, Washington, D.C., 20528-0305. The PREA Field Coordinator reports if the facility receives a report of sexual abuse from a third party, the facility would treat it is if it was a direct report from the victim. Most Agents interviewed reported they could accept a third-party report of sexual abuse. They advise this type of report would immediately be forwarded to a supervisor.

§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)
- X Does not meet Standard (requires corrective action)

Notes:

(a)(b): CBP TEDS requires 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 an investigation about such an incident; and staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. CBP Directive 2130-030 states staff have a duty to make reasonable efforts to report as promptly as possible any knowledge, suspicion, or information of the following: an incident of sexual abuse and/or assault of a detainee in a holding facility; retaliation against any person, including a detainee, who reports, complains about, or participates in an investigation about an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. The PREA Field Coordinator reports during an interview all staff carry a PREA Quick Reference Card which informs staff of reporting duties in accordance to the Directive. Agents interviewed were able to discuss their responsibilities for reporting sexual abuse. When asked how Agents can report sexual abuse outside of their chain of command, most reported they could make a report to any supervisor on duty. (c): CBP Directive 2130-030 states except as necessary to report the incident, CBP and its staff shall not reveal any information related to the incident except as necessary to aid the detainee, to protect other detainees or staff, or to make security and management decisions contemplated by Subpart B of the DHS Standards. The Local SME staff and all Agents interviewed report information regarding a sexual abuse allegation is revealed only to those with a need to know. They advise confidentiality regarding sexual abuse allegations is a requirement and expectation. (d): CBP Direction 2130-030 requires the facility to report sexual abuse and/or assault allegations involving alleged victims under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute to the designated State or local services agency under applicable mandatory reporting laws. During interviews with Supervisors they were unclear who would be responsible for notifying State agencies when a juvenile or vulnerable adult was a victim of sexual abuse. Based on this information, this portion of 115.161 is non-compliant. **Corrective Action:** Provide documentation of the plan on who is responsible for notifying State agencies when a juvenile or vulnerable adult is a victim of sexual abuse.

§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:
CBP TEDS states if an officer/agent has a reasonable belief that a detainee is subject to a substantial risk of imminent sexual abuse, he or she shall take immediate action to protect the detainee. Local SME Staff reports if a detainee is in imminent danger of sexual abuse, Agents will remove the detainee from the area or situation. Agents will ask questions to make sure no incident has occurred and notify their supervisor. All Agents interviewed reported their responsibility is to separate the detainee from everyone else. Once they have ensured their safety, they will notify their supervisor of the situation.
§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): CBP Directive 2130-030 requires Lordsburg Station upon receipt of an allegation a detainee was sexually abused and/or assaulted while confined at another facility; notify the appropriate office of the agency or the administrator of the facility where the alleged sexual assault and/or abuse occurred. The PREA Field Coordinator advises he believes the Patrol Agent-in-Charge or himself, would make all the necessary notifications to another facility if they received a report of sexual abuse from a detainee. (b)(c): CBP Directive 2130-030 does not indicate the notification to other confinement facilities is to be done no later than 72 hours. The Directive requires the notification be documented. The PREA Field Coordinator indicated the notification would be done as soon as possible. After the on-site visit, the Auditor was provided an August 13, 2014, memorandum from the Chief, USBP, titled Implementation on the Standards to Prevent, Detect, and Respond to Sexual Abuse and Assault in CBP Holding Facilities. The memorandum specifies the requirement to notify another confinement facility when an allegation of sexual abuse is received in reference to the other facility. The memo states the notification is to occur as soon as possible, but no later than 72 hours after receiving the allegation, and for the supervisor to document the notification. This deficiency is abated. (d): The standard requires if Lordsburg Station receives an allegation from another facility of a sexual abuse occurring at Lordsburg Station, staff are to ensure the incident is referred for investigation. Through an interview with the PREA Field Coordinator, it was unclear to the Auditor who, upon receipt of a report from another facility of a sexual assault allegation occurring at Lordsburg Station, who would refer the allegation for investigation. Without the ability to confirm who is responsible for this notification, the Auditor was not able to confirm compliance with this standard. Corrective Action: Provide documentation of Supervisors
§115.164(a) and (b) − First 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): CBP Directive 2130-030 details the responsibilities for the first law enforcement staff on scene of a reported

(a): CBP Directive 2130-030 details the responsibilities for the first law enforcement staff on scene of a reported allegation of sexual abuse. The Directive and PREA training in PALMS reinforces this policy requiring law enforcement staff members to separate the alleged victim and abuser, preserve and protect the crime scene, and if the abuse occurred within a time period that still allows for the collection of physical evidence, request the alleged victim and abuser do not take any actions that could destroy physical. Local SME Staff and Agents report they are to immediately separate the victim form the abuser. They are to preserve as much evidence as possible which include not allows the victim or abuser to get a drink or use the rest room. Agents report they are then to contact a supervisor.

(b): CBP TEDS states if the first staff responder is not law enforcement staff, the responder must request that the alleged victim not take any actions that could destroy physical evidence and then notify law enforcement staff.

The contract medical staff report if they are a first responder, they are to immediately contact a supervisor. They are then to keep the victim with them and until a supervisor arrives. Lordsburg Station does not have any other non-law

enforcement staff who have contact with detainees.
§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)(c): CBP Directive 2130-030 is defined as CBPs Coordinated Response Plan. It defines the roles and responsibilities of staff when a sexual abuse allegation is reported. It discusses protection of the victim, working with detainees with disabilities, officer/agent responsibilities, non-officer/agent responder duties and medical treatment. CBP TEDS states if a known or reported victim of sexual abuse is transferred within CBP or to the custody of another component within DHS, the officer/agent must, as permitted by law, inform the receiving CBP office or DHS component of the incident and the victim's potential need for medical or social services. If a known or reported victim of sexual abuse is transferred outside of DHS, the officer/agent must, as permitted by law, inform the receiving agency or office of the incident and the victim's potential need for medical or social services, unless the victim requests otherwise. The PREA Field Coordinator reports Agents must separate the detainee from the abuser and make sure they do not drink or use the restroom while they are waiting for medical treatment. The Field PREA Coordinator states the detainee would then be transported to Gila Hospital for a forensic exam and would then have access to advocacy services. He also adds the local Sheriff's office would be contacted for an investigation as well as notification made to JIC. Most Agents interviewed referred to the PREA Quick Reference Card and advised the Auditor they would separate the detainee from the abuser, preserve as much evidence as they could and contact their supervisor. Most of the Agents knew detainees would be taken to the hospital but were unsure if a forensic exam would be completed.
§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:
CBP Directive 2130-030 requires agency management 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. The PREA Field Coordinator states the ability to remove staff and contractors from contact with a detainee who accuses them of sexual abuse is available. He states staff, contractors, or volunteers can be reassigned to different duties. There is also the option of placing them on administrative leave pending the outcome of an investigation.
§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:
CBP Directive 2130-030 and CBP TEDS prohibits CBP staff from 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. All Agents interviewed report protection from retaliation was covered in their initial training on CBP Directive 2130-030. They report retaliation is not tolerated and protection from retaliation also encompasses them.
§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.
inya – neiei to the CDr Bextan 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)
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)(c)(d): CBP Directive 2130-030 states CBP personnel may be subjected to disciplinary or adverse action up to and
including removal from their position and Federal service for substantiated allegations of sexual abuse and/or assault
and/or for violating CBP's sexual abuse policies. When asked about the agency's process for reviewing reports of
misconduct and proposing and considering discipline for employees who violate the sexual abuse policy, and interview
with the HQ Labor Employee Relations (LER) SME states "For allegations substantiated through investigation we can
suspend an employee up to 14 days. If more than 15 days, it must go to a review board hearing. This includes
suspension, demotions or re-assignment". An interview with the HQ Sexual Abuse and Assault Investigations (SAAI)
SME states "when discussing the process for reporting all removals or resignations in lieu of removal for violating the
agency's sexual abuse policy, the local level does not get involved. OPR consults with LER and the decision is based on
their findings." The PREA Field Coordinator reports he is not involved in any of these decisions. He only enforces their
decision. He states any disciplinary actions toward employees would come from HQ. His responsibility involves
notifying Hidalgo County Sheriff's Office when an allegation is reported. He reports HQ would notify any licensing bodies for staff who have violated the sexual abuse policy.
bodies for stall who have violated the sexual abuse policy.
§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)(b): CBP Directive 2130-030 requires any contractor or volunteer suspected of perpetrating sexual abuse and/or
assault be removed from all duties requiring detainee contact pending the outcome of an investigation, as appropriate.
The interview with the PREA Field Coordinator reveals the facility would take direction from LER as it relates to contractors who have violated CBP sexual abuse polices. He advised they would be barred from entering this facility
pending the investigation. The PREA Field Coordinator reports that he is not involved in any of these decisions to
permanently ban a contractor or volunteer for the facility. He only enforces the decision of LER. He states any
removal of contractors or volunteers would come from HQ. His responsibility involves notifying Hidalgo County
Sheriff's Office when an allegation is reported. He reports HQ would notify any licensing bodies for contractors who
have violated the sexual abuse policy.
§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): CBP Directive 2130-030 requires alleged sexual assault victims be provided timely unimpeded access to
emergency medical treatment and crisis intervention services, including emergency contraception and sexually
transmitted infections prophylaxis, in accordance with professionally accepted standards of care. It also requires
emergency medical treatment services be provided to the alleged victim without financial cost and regardless of
whether the victim names the alleged abuser or cooperates with any investigation arising out of the incident.

The PREA Field Coordinator reports detainees will be taken directly to the hospital. The PREA Field Coordinator reports all services are provided at no cost to the detainee. This also includes if they chose not to reveal the name of their

abuser.

	§115.186(a) – Sexuai abuse incident reviews.				
	□ Exceeded Standard (substantially exceeds requirement of standard)				
	X 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:				
١	(a): CBP Directive 2130-030 requires at the conclusion of every investigation of sexual abuse and/or sexual assault an				
	incident review is to be conducted. The review is ordinarily to occur within 30 days of the conclusion the investigation				
ı	and a report written. Recommendations are to be included if the allegation or investigation indicates a change in policy				
ı	or practice could better prevent, detect, or respond to sexual abuse. This Directive requires Lordsburg Station to				
	implement the recommendations for improvement, or document the reasons for not doing so, in a written response				
ı					
	and forward both the report and the response to the PSA Coordinator. No sexual abuse incident reviews have been				
ı	conducted for Lordsburg Station in the past 12 months due not having any reports of sexual abuse or sexual				
	harassment. An interview with the USBP HQ SME states all incident reviews are completed within 30 day of the				
	conclusion of every investigation. He advised a multidisciplinary team at HQ gets together when a review needs to be				
ı	completed. He added if there were recommendations, the facility has a chance review the findings and respond. The				
ı	PREA Field Coordinator states his responsibility in the sexual abuse incident reviews is to ensure all recommendations				
Į	are incorporated at Lordsburg Station.				
	§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:				
ı	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.				
	/s/ (b) (6), (b) (7)(C) November 13, 2019				
	Auditor's Signature Date				

PREA Audit: Subpart B Short-Term Holding Facilities Corrective Action Plan Final Determination



	AUD	ITOR			
Name of Auditor: (b) (6)	, (b) (7)(C)		Creative Corrections, LLC		
Email Address: (b) (6	(b)(7)(C)	(b) (7)(C) Telephone Number: (b) (6), (b) (7)(C)			
AGENCY					
Name of Agency: U.S. Customs and Border Protection					
PROGRAM OFFICE					
Name of Program Office:	United States Border Patrol				
	SECTOR OR I	FIELD OFFICE			
Name of Sector or Field Office:	El Paso				
Name of Chief or Director:	(b) (6), (b) (7)(C)				
PREA Field Coordinator:	(b) (6), (b) (7)(C)				
Sector or Field Office Physical Address:	8901 Montana Avenue, El Paso, Texas 79925				
Mailing Address: (if different from above) Same as Above					
SHORT-TERM FACILITY BEING AUDITED					
Information About the Facility					
Name of Facility: Lordsburg Border Patrol Station					
Physical Address: 26 Pipeline Road, Lordsburg, New Mexico 88045					
Mailing Address: (if different from above)	Same as Above				
Telephone Number:	(b) (6), (b) (7)(C)				
Facility Leadership					
Name of Officer in Charge:	(b) (6), (b) (7)(C)	Title:	Patrol Agent in Charge		
Email Address:	(b) (6), (b) (7)(C)	Telephone Nun	nber: (b) (6), (b) (7)(C)		

FINAL DETERMINATION

SUMMARY OF AUDIT FINDINGS:

Directions: Please provide summary of audit findings to include the number of provisions with which the facility has achieved compliance at each level after implementation of corrective actions: Exceeds Standard, Meets Standard, and Does Not Meet Standard.

An on-site audit of the United States Border Patrol (USBP) Lordsburg Station was conducted on February 5, 2019, and the preliminary findings report was submitted on March 16, 2019. Following comments from CBP Headquarters and from the Reviewing Auditor, the report was submitted in Final Draft on November 13, 2019.

At that time, the Auditor reviewed the compliance of 25 Subpart B standards and the Lordsburg Station was found to be in compliance with 16 standards: (115.111; 115.114; 115.117; 115.122; 115.131; 115.132; 115.154; 115.162; 115.164; 115.165; 115.166; 115.167; 115.176; 115.177; 115.182 and 115.186). The Lordsburg Station was found to not be in compliance with eight standards: (115.113; 115.115; 115.116; 115.121; 115.141; 115.151; 115.161; and 115.163). One standard (115.118) was not applicable at the Lordsburg Station.

On December 13, 2019, the Lordsburg Station submitted a preliminary Corrective Action Plan (CAP) followed by an amended CAP on December 18, 2019. Several documents were requested by the Reviewing Auditor and several clarifications were sought and received. On March 16, 2020, the Final CAP was submitted for review by the Lordsburg Station. This CAP was reviewed by the Reviewing Auditor and Program Manager for Creative Corrections. As part of the CAP, the Lordsburg Station submitted a work order for the construction of a bathroom half-partition to ensure detainee privacy when toileting. The Lordsburg Station also submitted several training documents, musters and staff sign-offs as documentation for required staff and supervisory staff re-training. On May 13, 2020, the Reviewing Creative Corrections Certified PREA Auditor, (b) (6), (b) (7)(C) received the final required documentation. All required Corrective Action was completed prior to the 180 day deadline.

PROVISIONS

Directions: After the corrective action period, or sooner if compliance is achieved before the corrective action period expires, the auditor shall complete the Corrective Action Plan Final Determination. The auditor shall insert the provision(s) below that required corrective action and state if the facility's implementation of the provision now "Exceeds Standard," "Meets Standard," or "Does not meet Standard." The auditor shall include the evidence replied upon in making the compliance or non-compliance determination for each provision that was found non-compliant during the audit.

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- ☐ Exceeds Standard (substantially exceeds requirement of standard)
- X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- □ Does not meet Standard

Notes:

On March 20, 2020, the Lordsburg Station submitted a record of the Annual Review of the Detainee Supervision Guidelines as required by Standard Provision (b). A review of the record was found to satisfy all elements of the Standard Provision. The Lordsburg Station is now compliant with Standard 115.113.

§115.115

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
- X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- □ Does not meet Standard

Notes:

On March 18, 2020, the Lordsburg Station submitted both local and national documents outlining agent performance requirements regarding proper personal search techniques, cross-gender searches and announcements, determination of detainee gender identification and proper procedures for the pat search of identifying transgender detainees. These documents referenced both the current CBP National Standards on Transport, Escort, Detention and Search (TEDS) personal search handbook and Flores vs Reno settlement. Also submitted were staff training muster sign-offs and acknowledgements. Finally, the Reviewing Auditor was able to review a work order for the installation of a half-partition which will prevent improper staff viewing when detainees are using toilet facilities. The Lordsburg Station is now compliant with Standard 115.115.

§115.116

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
- X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- □ Does not meet Standard

Notes:

On March 16, 2020, the Lordsburg Station concluded retraining of all station personnel on CBP National Standards on Transport, Escort, Detention and Search (TEDS) requirements with regard to the provision of services to ensure PREA rights and services for all detainees who have disabilities or who are Limited English Proficient (LEP). The Reviewing Auditor reviewed the training materials and requested clarification of the training curriculum utilized for staff. On May, 22, 2020, the Lordsburg Station conducted additional training to staff and provided staff sign-offs to ensure the required training had taken place. The Lordsburg Station provided additional documentation of the training materials utilized. The materials consisted of a CBP job aid titled "CBP Guide to Communicating with Detainees with Disabilities;" CBP Muster Module, "Providing Reasonable Accommodation to Members of the Public Held for Law Enforcement Purposes;" and the Chief

also issued a memorandum on April 18, 2020 regarding the implementation of U.S. Customs and Border Protection Disability Access Plan. The Lordsburg Station is now compliant with Standard 115.116.
§115.121
☐ Exceeds Standard (substantially exceeds requirement of standard)
X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review
period)
☐ Does not meet Standard
Notes:
On March 16, 2020, the Lordsburg Station completed supervisory training regarding the proper procedures and transport of detainee sexual abuse victims for forensic examinations in accordance with agency policies. This training also included the responsibility of station supervisors to ensure that detainees may have sexual abuse advocates present during forensic examinations when such advocates are available. The Reviewing Auditor was able to review submitted documentation of the required supervisory training. The Lordsburg Station is now compliant with Standard 115.121.
§115.141
☐ Exceeds Standard (substantially exceeds requirement of standard)
X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review
period)
☐ Does not meet Standard
Notes:
On February 4, 2020, the Lordsburg Station completed the re-training of all Station staff regarding the requirements of processing staff to follow the agency risk assessment guidelines which include the Agent verbally asking the detainee being processed if they have any concerns for their personal safety at that time. This re-training included the issuance of a memorandum to all staff reminding them of their responsibilities in performing the risk assessment as prescribed by the Agency. The Reviewing Auditor was able to review the documentation of this re-training including the memorandum. The Lordsburg Station is now compliant with Standard 115.141.
§115.151
☐ Exceeds Standard (substantially exceeds requirement of standard)
X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review
period)
☐ Does not meet Standard
Notes:

On February 21, 2020, the Lordsburg Station completed the re-training of all Station staff regarding the right of all detainees to report allegations of sexual abuse privately and confidentially. Such reporting includes the right of the detainee to make a private confidential call to the Office of the Inspector General without revealing the nature of the call at any time. The Reviewing Auditor was able to review the content of the re-training and the staff sign-offs. The Lordsburg Station is now compliant with Standard 115.151.

§115.161				
☐ Exceeds Standard (substantially exceeds requirement of standard)				
X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review				
period)				
□ Does not meet Standard				
Notes:				
On February 4, 2020, the Lordsburg Station completed training of all Station staff by management personnel to remind them of the sexual abuse response chain of command reporting criterion, as well as highlighting the correct reporting procedural responsibilities to state and local agencies when a juvenile or a vulnerable adult is a victim of sexual abuse. The Reviewing Auditor was able to view the content and staff sign-offs of this staff training muster. The Lordsburg Station is now compliant with Standard 115.161.				
§115.163				
☐ Exceeds Standard (substantially exceeds requirement of standard)				
X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review				
period)				
□ Does not meet Standard				
Notes:				
On March 16, 2020, the Lordsburg Station completed refresher training for all supervisory staff which included the responsibility and reporting criterion, to other facilities/administrators in regards to receiving an allegation of sexual abuse having taken place at another facility. This included the Agency's requirement that the notification be made within 24 hours. The Reviewing Auditor was provided the course content and staff sign-offs for this supervisory refresher training. The Lordsburg Station is now compliant with Standard 115.163.				
OVERALL DETERMINATION - AFTER IMPLEMENTATION OF THE CORRECTIVE ACTION PLAN				
☐ Exceeds Standards (Substantially Exceeds Requirements of Standards) ☐ Low Risk				
☑ Meets Standards (Substantial Compliance; Complies in All Material Ways with the Standards for the Relevant Review Period)	□ Not Low Risk			
☐ Does Not Meet Standards (Requires Corrective Action)				
AUDITOR CERTIFICATION:				
I certify that the contents of the report are accurate to the best of my knowledge exists with respect to my ability to conduct an audit of the agency under review. I	and no conflict of interest			
personally identified information (PII) about any detainee or staff member, except administrative personnel are specifically requested in the report template.	have not included any			
	have not included any			