

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



U.S. Customs and
Border Protection

AUDITOR

Name of Auditor:	(b)(6)(b)(7)(C)	Organization:	Creative Corrections, LLC
Email Address:	(b)(6)(b)(7)(C)	Telephone Number:	(b)(6)(b)(7)(C)

AGENCY

Name of Agency:	U.S. Customs and Border Protection
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PROGRAM OFFICE

Name of Program Office:	Office of Field Operations
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SECTOR OR FIELD OFFICE

Name of Sector or Field Office:	Buffalo, New York
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Name of Chief or Director:	(b)(6)(b)(7)(C)
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PREA Field Coordinator:	(b)(6)(b)(7)(C)
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Sector or Field Office Physical Address:	726 Exchange Street, Suite 400, Buffalo, New York 14210
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Mailing Address: <i>(if different from above)</i>	(b)(6)(b)(7)(C)
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SHORT-TERM HOLDING FACILITY BEING AUDITED

Information About the Facility

Name of Facility:	Rainbow Bridge Port of Entry
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Physical Address:	Niagara Falls, New York 14301
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Mailing Address: <i>(if different from above)</i>	
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Telephone Number:	(b)(6)(b)(7)(C)
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Facility Leadership

Name of Officer in Charge:	(b)(6)(b)(7)(C)	Title:	Acting Port Director
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Email Address:	(b)(6)(b)(7)(C)	Telephone Number:	(b)(6)(b)(7)(C)
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AUDIT FINDINGS

NARRATIVE OF AUDIT PROCESS AND DESCRIPTION OF FACILITY CHARACTERISTICS:

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

A Prison Rape Elimination Act (PREA) on-site audit of the Customs and Border Protection (CBP) Office Of Field Operations (OFO) Rainbow Bridge Port of Entry (RB-POE) was conducted on Thursday, May 9, 2019, from 06:00 hours until 18:00 hours. The audit was conducted by (b)(6)(b)(7)(C), Certified PREA Auditor, contracted through Creative Corrections, LLC of Beaumont, Texas. This was the first PREA audit for the RB-POE. The POE has a short-term processing and holding area detaining male and female adults, Unaccompanied Alien Children (UAC) and family units for a time period specified to be under 24 hours in normal operations; and pending the inadmissible traveler's voluntary/involuntary repatriation to their point of origination or transfer for removal or detention. The goal of OFO staff at RB-POE is to determine the admissibility of all travelers as soon as possible and to return or transfer inadmissible travelers in the shortest and safest amount of time possible. The purpose of the audit was to determine compliance with the Department of Homeland Security (DHS) PREA Standards. The on-site audit followed the auditor's electronic review of CBP's PREA policies and procedures and telephonic interviews with CBP Headquarters (HQ) Subject Matter Experts (SMEs).

The Point of Contact for RB-POE was Port Shift Commander/PREA Field Coordinator (CCBPO/FPC) (b)(6), (b)(7)(C).

An entry-briefing, led by CBP Prevention of Sexual Assault (PSA) Coordinator (b)(6)(b)(7)(C) and the Auditor was conducted at 08:00 on Tuesday, May 7, 2019 at the request of the Port Leadership to combine the entry-briefings for both bridges. Those in attendance at the entry-brief were:

(b)(6)(b)(7)(C), PSA Coordinator, Privacy and Diversity Office (PDO), HQ
(b)(6)(b)(7)(C), National OFO PREA Coordinator, HQ (By Telephonic Conference)
(b)(6)(b)(7)(C), Acting Port Director, Port of Buffalo
(b)(6)(b)(7)(C), Assistant Port Director, Port of Buffalo
(b)(6)(b)(7)(C), Assistant Port Director, Port of Buffalo
(b)(6)(b)(7)(C), Program Manager (PM), Port of Buffalo
(b)(6)(b)(7)(C), Deputy PSA Coordinator, PDO, HQ
(b)(6)(b)(7)(C), Watch Commander/PREA Field Coordinator (WC/PFC), Port of Buffalo

Immediately following the night shift interviews, the Auditor and HQ staff were given a site-review tour of the RB-POE operations/facilities by the PFC; following the path pedestrians, bus and vehicular travelers would follow across Rainbow Bridge, through the primary screening stations for foot, bus and vehicular traffic and to the secondary screening. Rainbow Bridge allows for foot, tour bus and vehicular crossings and separates passenger vehicles from tour buses. There is a separate processing area for the buses. Adjacent to this area is a medium-sized fish tank area, where several persons may be temporarily held. The room is constructed of glass panels and is completely visible to secondary processing officers. Above the bus primary screening area are several offices and a conference room. Across from the tour bus area is a separate building housing the (b)(7)(E). The two buildings can be accessed from the ground floor entrances or there is a bridge structure over the four traffic lanes, which provides access and additional office and staff space. The pedestrian/ vehicular secondary screening area has a large seating area, with a large counter area in the front of the room for travelers who require additional screening or are being held temporarily. Behind the counter are several desks and a corridor containing processing officers and (b)(7)(E), one wet (partitioned bathroom facilities) and one dry (no Bathroom facilities). There is a window for detainees to look out and it was suggested by the Auditor that PREA postings could be placed on the wall across from the (b)(7)(E) for the detainees' information. The Secondary lobby area also has private bathrooms where travelers/detainees can be escorted to by officers.

Holding rooms at Rainbow Bridge do not have (b)(7)(E) has been disabled to maintain privacy. Fifteen minute checks are maintained on all travelers/detainees placed into holding. Families being held would be maintained in the Waiting Area or the locked glass tank. UACs being held would be immediately transferred to the Peace Bridge POE.

The Auditor was able to view all (b)(7)(E) to at the Radio Officer's station to determine that no detainee's privacy is compromised by the (b)(7)(E). The Auditor noted no breach of privacy.

Interviewed officers in the Secondary Screening Area consistently reported a preference to maintain constant supervision over detainees in designated parts of the Secondary Screening Area public lobby, as opposed to the (b) (7)(E), unless a traveler is demonstrating disruptive behaviors. A traveler who becomes disruptive could be placed in the (b) (7)(E) room and fifteen minute visual checks are then mandated by policy. Travelers exhibiting psychiatric issues are escorted to the all glass secure holding tank, where they can remain under constant visual supervision from the service counter. Supervisory personnel would be advised and a determination could be made to have the traveler evaluated at a local hospital.

All staff members with direct contact to detainees are ICE law enforcement Officers. Detainees are escorted in any area where janitorial or maintenance contractors may enter and they are always kept separate. There is no on-site medical staff. Medical emergencies are addressed by Niagara Falls EMS personnel or traveler/detainees are taken to Niagara Falls Memorial Medical Center.

The number of OFO Officers assigned to RB-POE is commensurate with the current traffic coming across the Rainbow Bridge and fluctuates due to time of day and special events. These events normally involve large tour groups arriving by bus and special tourist or sporting events in the Niagara Falls or Buffalo areas. Port leadership has the ability to move and reassign staff as required. At Rainbow Bridge, officers are able to bid for positions, as per union contract, in primary screening, secondary screening and detention officer. Assignments are only changed in exigent circumstances. There are several overlapping shifts beginning at 0700 hours in the morning. While Rainbow Bridge is a 24 hour operation, travelers are rarely held overnight in holding cells.

Processing area and hallway (b) (7)(E) are monitored on a (b) (7)(E), located behind the secondary screening counter. The OFO (b) (7)(E) are monitored solely by OFO law enforcement staff. There is (b) (7)(E) at Rainbow Bridge. The PFC reported that PREA safety and security concerns are discussed by the Port administration and the Field Office Director.

Scope of the Audit: Prior to the on-site audit, the Auditor was able to review the HQ and Local Pre-Audit Questionnaires (PAQs), the HQ and local Responsive Documents and Data Requests, local documents, including RB-POE specific documents, HQ Participation documents, and the medical provider's website. The Auditor was also able to contact five of six HQ SMEs for updates.

Following the site review tour, the Auditor continued staff and SME interviews. The Auditor was provided with a private interview room for staff interviews. The Auditor was able to use a telephone line to privately call OIG to insure the Hotline number was operational. It was operational and answered within 90 seconds. The Auditor was able to view Zero-Tolerance Posters throughout the facility. The Auditor also easily found postings of the pending audit and the Auditor's contact information. To date, the Auditor has received no correspondence from staff, travelers or detainees regarding RB-POE. The Auditor also viewed CBP training documents for working with travelers/detainees who have a disability or identify as LGBTI behind the secondary Processing counter and outside processing interview rooms.

During the on-site audit, the Auditor was able to interview staff from all three shifts. In total, the Auditor interviewed four local Subject Matter Experts (SMEs) and 14 random staff. Seventeen interviewed staff members were male and one was female. The Auditor had been given a target number of 16 staff interviews out of 70 port staff, but was able to interview all secondary staff members currently on duty during the on-site audit. Note: The Auditor was also able to review the local staff training curriculum for emergency pat-down searches and cross-gender searches. The Auditor also reviewed all PREA training and refresher training records for interviewed RB-POE staff. The records were 100% complete. Finally, the Auditor reviewed the PREA training portal, which was developed by the LPC.

There were no available travelers detained during the 12 hour on-site audit for the Auditor to interview. The Auditor did listen to the exchanges between travelers and Secondary Screening Officers at the Secondary Screening area for vehicles and pedestrians.

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.

On Thursday, May 9, 2019, an exit briefing for RB-POE was held at 16:15 for both Lewiston and Rainbow Bridges at the request of the Port leadership due to availability. The exit briefing was opened by PSA Coordinator (b)(6)(b)(7)(C) and conducted by Creative Corrections Cited PREA Auditor (b)(6)(b)(7)(C).

Those in attendance for the briefing were:

(b)(6)(b)(7)(C), PSA Coordinator, Privacy and Diversity Office (PDO), HQ
(b)(6)(b)(7)(C), OFO National PREA Coordinator, HQ (By Telephonic Conference)
(b)(6)(b)(7)(C), Watch Commander, Port of Buffalo
(b)(6)(b)(7)(C), Supervisory Customs and Border Patrol Officer (SCBPO), Port of Buffalo
(b)(6)(b)(7)(C), Deputy PSA, Coordinator, PDO, HQ

The Auditor advised both local and HQ representatives that staff interviews at RB-POE indicate that there remains confusion amongst staff regarding cross-gender searches in exigent circumstances and how to perform any type of pat down search on an identified transgender detainee. There was a lengthy discussion as to why this confusion has occurred and it was suggested by HQ staff that the confusion could be a result of how the Auditor presents the search typologies to the officers during interviews. The Auditor expressed how they took a significant amount of time to break down the types of searches for each interviewee. The Auditor also conducted three more interviews of afternoon shift officers following the closeout meeting. When pressed as to whether they could perform any type of pat-down search of an opposite-gender traveler/detainee, the officers responded that they could, but maintained that they would not because no exigent circumstance would exist.

In reviewing their notes and triangulating all data as required, the Auditor maintains that OFO officers at RB-POE have not been sufficiently trained to understand their responsibilities under PREA to: 1) Apply their training to exigent circumstances which could require them to perform a cross-gender pat-down of any type or 2) Understand the requirements of the PREA regulation in performing pat-downs of any type on a transgender traveler/detainee. Should CBP HQ determine that the current practice of splitting a pat-down to reflect the biological status of the traveler/detainee, the Auditor feels it is incumbent of CBP to satisfy the standard by explaining what operational/safety need requires this practice and to train all OFO/BP staff as to why the practice exists. The Officer/Agent will then be able to explain the practice to the traveler/detainee in fulfillment of the standard.

Further reflection of the Exit-Briefing conversation raises concern that only further training with opportunities for officers to ask face-to-face questions about PREA procedures and to express concerns to supervisory and leadership staff, will facilitate the development of a culture of sexual safety in OFO/BP facilities. Without such a culture amongst staff, there is opportunity for confusion and interpretation.

During the Audit Process, the Auditor reviewed the compliance of 25 Part B standards at RB-POE. The Auditor found RB-POE met 23 standards: 115.111; 115.114; 115.116; 115.117; 115.118; 115.121; 115.122; 115.131; 115.132; 115.141; 115.151; 115.154; 115.161; 115.162; 115.163; 115.164; 115.165; 115.166; 115.167; 115.176; 115.177; 115.182, and 115.186; and did not meet two standards: 115.113 and 115.115.

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

§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:

The facility meets the standard. The agency has taken definitive steps to inform the public, all employees, and detainees of its adherence to the PREA Standards. The CBP Directive 2130-030, Prevention, Detection and Response to Sexual Abuse/Assault in CBP Holding Facilities (1/19/2018), the Commissioners Memorandum on Zero Tolerance for Sexual Abuse and Assault dated 3/11/15, and the Commissioner's Memorandum on UACs in Extended Detention (undated, posted 12/21/18) to all CBP employees clearly outline the duty of all CBP staff members to prevent, detect and respond to all allegations or observations of sexual abuse. Zero tolerance posters were observed throughout the facility. There were also several notices about the pending PREA audit and how to correspond with the PREA Auditor clearly displayed in Spanish and English where they could easily be read by travelers and/or detainees.

§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 through appropriate levels of supervision, operational procedures and **(b) (7)(E)**. CBP Directive 2130-030 requires OFO to develop facility based guidelines to meet the supervision needs of each facility. Interviews with the Assistant Area Port Director (AAPD) and Supervisors verify shift Supervisors have both the responsibility and latitude to move shift staff or request additional staff from adjoining ports of entry as supervision needs require. During the on-site audit, the Auditor never witnessed a level of supervision lower than best practice for holding facilities. **(b) (7)(E)** are being added to the new holding areas and to all areas of the RB-POE facility during the current renovation.

(b) The facility does not meet the standard provision. CBP Directive 2130-030 requires each Field Office implement an annual review process for all facilities. The PFC detailed monthly supervisor meetings where supervisory personnel discuss security concerns, special incidents and circumstances and strategies to meet daily supervision demands. However, while the LPC described the reviews of staffing from shift to shift/day to day, he did not indicate a more in-depth review is completed to meet the requirement of an annual review to determine if overall supervision levels are appropriate for the number of travelers/detainees being processed and/or held in comparison to previous years. Corrective action is required. **Corrective Action:** Provide documentation of a formal annual supervision review for RB-POE.

(c) The facility does not meet the standard provision. Elements detailed in the standard provision are regularly discussed by supervisory personnel, including the layout of the facility, the current size and composition of the traveler/detainee population, and other relevant factors including the length of time the detainees are to be in custody. This practice was confirmed by interviews with the PFC and Supervisors. Supervisors have continuous access to the SC/PFC who is based at RB-POE. Unforeseen changes in schedule and traveler/freight flow do occur and the Shift Commander (SC) and Supervisors will adjust post assignments accordingly. Normally, supervision concerns also result in staff from the previous shift being held over. However, there is no formal annual staffing review process in place for RB-POE. Corrective Action is required. **Corrective Action:** Provide documentation of a formal annual staff review plan for RB-POE which addresses all elements required by the standard provision.

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

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

Notes:

(a) The facility meets the standard provision. CBP National Standards on Transport, Escort, Detention and Search (TEDS) (October 2015) require juveniles be treated at all times in their best interest in the least restrictive environment and all guidelines for special populations be taken into consideration. All UACs received at RB-POE are immediately moved to the top of the list for processing. If admissible, an appropriate relative or responsible adult who has secured parental permission to assume custody is to be contacted to accept the UAC. If the UAC is determined to be inadmissible, arrangements are to be made to return them to their country of origin with the consulate arranging for family or an appropriate guardian to meet them at the airport. The UAC is not to be placed in holding unless they are disruptive and then they are to be placed by themselves. Normally, they are seated across from the secondary screening desk and continuously monitored by assigned Officers. UACs needing to be held for an extended period of time will be moved to the Peace Bridge POE to be held with other UACs. This procedure was confirmed by both SME and random staff interviews. No UACs were at RB-POE during the onsite audit.

(b) The facility meets the standard provision. Interviewed SMEs and random staff described a two-tiered vetting process to ensure that a child traveling with an adult is actually a family member. This process involves a document verification with the child's consulate and focused interviewing to detect signs of a natural familial relationship. All UACs who are determined to have arrived without a confirmed family member are held in the secondary processing area under direct supervision until escorted to a flight, released to an approved relative or released to the Department of Human Services (DHS). This supervision was described by all SME and random staff interviews.

§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. CBP TEDS sets specific restrictions for cross-gender searches, in the absence of truly exigent circumstances. Interviews with Local SMEs and random staff confirm only immediate pat-down searches are performed at RB-POE and are performed by an Officer of the same sex as the subject. Procedures and SME interviews reveal any strip or body cavity search of a juvenile would have to be performed at a medical facility by a medical professional. Pat searches of juveniles are not routinely performed at RB-POE and would only be performed by same gender staff with a witness as a targeted immediate search for a suspected weapon. This practice was verified by the SME interview with the PFC. No travelers were detained at RB-POC during the Auditor's on-site visit and therefore no detainees were interviewed at RB-POE.

(c) The facility meets the standard provision. CBP TEDS requires all strip and body cavity searches be documented. The Auditor was informed by the PFC no strip or body cavity searches were performed at RB-POE in the past 12 months. The Auditor was able to review the local staff training curricula for such searches and training records for all RB-POE staff on strip and body cavity searches.

(d) The facility meets the standard provision. RB-POE has developed internal procedures and practices allowing for privacy during detainee changing and toileting as required in the standard provision and CBP TEDS. SME and random staff interviews verified that staff has been trained in cross-gender announcements. RB-POE is currently not using its (b) (7)(E) due to renovations except in exigent circumstances. Current detainees remain separated in the secondary screening area and have access to a locking one-person bathroom for changing and toileting. Staff report that they knock on the bathroom door before addressing staff using the lavatory. The practice was observed by the Auditor when a female Officer knocked on the lavatory door, prior to addressing a male detainee.

(e) The facility does not meet the standard provision. CBP TEDS prohibits the search or examination of a detainee's person solely to determine their gender. Several interviewed random staff reported they would ask a detainee to self-identify if they had a need to know the detainee's gender. They all report strip searches cannot be performed except in exigent circumstances and with supervisory review, when they have reasonable suspicion contraband is present. However, more than half of interviewed random staff members did not report that they would ask the traveler their identified gender. The facility does not meet the standard provision. Corrective action is required. **Corrective Action:** Provide clarification of how RB-POE officers are to proceed to learn how a traveler/detainee gender identifies and document staff understanding and ability to learn of a detainee's gender identity as required by the standard

provision.

(f) The facility does not meet the standard provision. The agency produced no specific training materials for pat searches of transgender detainees or cross-gender searches of any detainee. This lapse in training has created a situation where Officers perform differently when performing cross-gender searches or searching transgender detainees. Some Officers respond to the detainee's self-identification and they are pat searched by an Officer of the same gender as how they identify. Some Officer's ask the detainee the status of their genitalia and they are searched by an Officer of the same biological gender as they indicate, regardless of their gender identification. **Corrective Action:** Provide documentation of specific consistent training on cross-gender and transgender pat searches including RB-POE staff understanding of the agency expectation and ability to perform the task correctly as trained.

§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. CBP Directive 2130-030 requires staff provide detainees with disabilities (e.g. hearing, sight, intellectual, psychiatric or developmental disabilities), access to CBP efforts to prevent, detect and respond to sexual abuse and assault. Interviewed random staff at RB-POE explained how they would accommodate detainees with such special needs. Secondary Screening Staff have accommodated travelers in wheelchairs and using walkers and have used paper and pen to accommodate the hearing impaired. Agency guidelines for accommodating special needs detainees have been posted behind the both secondary screening counters at RB-POE. All randomly interviewed staff report they would read or explain PREA requirements to any traveler who was detained.

(b) The facility meets the standard provision. CBP Directive 2130-030 requires LEP detainees be provided in-person or accurate, effective and impartial telephonic interpretation services. All PREA posters are posted in both English and Spanish, but also provide direction in commonly spoken languages. Two at RB-POE are fluent in Spanish, one in French and one in Russian. All staff report they have been able to assist LEP detainees via the available U.S. Citizenship and Immigration Service (USCIS) interpretive language telephone line.

(c) The facility meets the standard provision. CBP Directive 2130-030 directs other detainees are not to be utilized as interpreters when a detainee has alleged sexual abuse or has been found to be sexually abused. The Auditor was able to verify local practice at RB-POE is consistent with the Directive through interviews with the PFC and Supervisors. All interviewed Officers reinforce other detainees may not be used in these circumstances and state they would use a neutral staff member if appropriate or the language line as per their directions in muster.

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

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

Notes:

(a) The facility meets the standard provision. CBP Directive 2130-030 requires the Office of Human Resources Management (HRM) ensure compliance with hiring, promotion and discipline requirements as outlined in the standard provision. This Directive requires the Office of Acquisition place policies and procedures in place to ensure CBP does not hire any contractors who have a history of sexual abuse. Interview with the HQ Hiring Center SME and documents downloaded from HRM verify compliance with the standard provision for employees.

(b) The facility meets the standard provision. Interview with the HQ Hiring Center SME verifies new employees and employees seeking promotion must complete an application asking about previous sexual misconduct and the application informs staff of an affirmative duty to disclose any such future misconduct.

(c) The facility meets the standard provision. The Auditor selected the names of 12 random staff members of all ranks from RB-POE. The names were submitted to HRM. A computer check of these employees found the agency to be in compliance with pre-hire and five-year updated investigations.

(d) The facility meets the standard provision. RB-POE currently uses no contractors who have direct contact with detainees. Cleaning, maintenance and construction contractors are physically separated from detainees who are always escorted by Officers.

(e) The facility meets the standard Provision. CBP Directive 2130-030 requires HRM promulgate policies and procedures insuring compliance with the requirements of the standard provision. Interview with the HQ Hiring Center SME confirms it is agency policy to rescind an offer of employment to a prospective employee or to terminate the employment of any employee who provides false information or makes a material omission regarding sexual abuse

misconduct. Staff are informed of this policy through CBP Directive 2130-030.

(f) The facility meets the standard provision. CBP Directive 2130-030 allows for the provision of any substantiated allegations of sexual abuse regarding former employees upon receiving a request to do so from an institutional partner for whom such an employee has applied to work, unless prohibited by law. Interview with the HQ Hiring Center SME verifies this practice by the agency.

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

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

Notes:

(a) The facility meets the standard provision. RB-POE is currently undergoing complete renovation. In planning for the renovation, the Acting APD advised the Auditor all port and OFO renovations/expansions require a review by CBP/OFO to ensure all CBP objectives and directives are met including PREA. The current renovation at RB-POE will update and expand holding areas and shall provide (b) (7)(E) in all holding areas. All new holding areas shall also have partitioned toilet.

(b) The facility meets the standard provision. (b) (7)(E) at RB-POE is currently being renovated and will include (b) (7)(E) of detainee processing and holding rooms. The new (b) (7)(E) of the holding room from secondary screening and the SCBPO and PFC's offices. (b) (7)(E) have been designed to enhance detainee supervision and safety and to monitor staff compliance with PREA.

§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. CBP Directive 2130-030 specifies the treatment services to be provided to a detainee victim of sexual assault. RB-POE utilizes the services of Erie County Medical Center in Niagara Falls, New York, for forensic examinations of sexual abuse victims determined to be evidentiary or medically appropriate at no cost to the detainee and only with the detainee's consent. The examination is to be performed by a Sexual Assault Forensic Examiner (SAFE) or a Sexual Assault Nurse Examiner (SANE). This practice was confirmed via interviews with Local SMEs. The Auditor confirmed these services with the Erie County Medical Center Emergency Department Charge Nurse.

(d) The facility meets the standard provision. The Auditor determined Erie County Medical Center has sexual abuse forensic examination services in-house in the Emergency Department. The Auditor's interview with the hospital's Emergency Department Charge Nurse reveals the hospital does not have on-site victim advocacy services and utilizes the YWCA Program of Niagara County to provide victim advocacy services.

(e) The facility meets the standard provision. SME interview with the LPC verifies the Niagara Falls Police Department has been advised of and are agreeable to following PREA requirements.

§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. CBP Directive 2130-030 requires prompt reporting of all sexual assaults/allegations to the facility administrator or agency office. All interviewed Local SMEs and random staff report they will immediate report such incidents up the chain-of-command and to the Joint Intake Center (JIC). Interviewed SMEs also reported the incident, if in violation of the law, would be reported to local law enforcement. Additional confirmation of the reporting procedures was received during the interviews with the AAPD who stated they are informed of all allegations and ensure all appropriate agency offices and local law enforcement are notified immediately. These requirements are also specified on the staff's PREA Quick Reference Card.

(d) The facility meets the standard provision. Interview with the HQ PSA Coordinator verifies her office is advised of all incidents/allegations of sexual abuse by the JIC.

§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. All RB-POE staff have received the mandatory eight-point PREA training including the agency's zero tolerance policies, detainee's rights to be free of sexual abuse and staff duty to report allegations of sexual abuse. Staff interviews confirm this training is received annually via the DHS online training system. The Auditor reviewed the PREA training curriculum and training records while on-site. Note: Contractor (maintenance, janitorial and external security) staff is not required to receive training as RB-POE insures contract staff and detainees have no direct contact as all detainees are under constant staff supervision in either the (b) (7)(E) areas. There is no medical staff at RB-POE and no volunteers work at CBP holding facilities at this time. The PFC shared a staff portal which they had locally developed. The portal allows RB-POE staff to access HQ, area port, and RB-POE directives, memoranda and training materials directly from their work station computer. The development of this portal demonstrates a high level of commitment to building a culture of sexual safety at RB-POE by the LPC. The RB-POE also holds regular musters and informal shift meetings. Upon further examination, the Auditor learned that most musters are not face-to-face, but in the form of memoranda. Some officers reported being delinquent in actually reading all memoranda after opening it.

(b) The facility meets the standard provision. Reviewed training records verify all staff at RB-POE were trained within two years of the effective date of the standards or upon hire if hired after the initial training. Training records confirm staff received refresher training as required. Staff interviews confirm PALMS training, pat search refresher training, and training on PREA and UAC related local procedures occur during musters.

(c) The facility meets the standard provision. Training records are maintained electronically and are maintained for a minimum of five years as required by the standard. The Auditor reviewed all training and retraining records for the interviewed officers with the LPC and found the records to be current and 100% complete.

§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. RB-POE maintains colorful, large print posters of DHS's zero tolerance policy in all detainee holding areas, in all processing areas, in all staff lounges and office areas, and in all secondary traveler screening areas. The posters are printed and posted in English and Spanish, but also contain a box providing zero tolerance and reporting information in all common languages. There were no detainees at RB-POE to interview to confirm that the officers made the posters known to them. SME and random staff interviews verify staff are relying on all travelers/detainees to read the PREA posters; they do not, and are not required to, point to them, explain them or make any PREA statements as part of routine screening. The agency addresses zero-tolerance prominently on its website at <https://www.cbp.gov/about/care-in-custody>. This posting was reviewed by the Auditor.

§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. CBP TEDS requires all detainees be assessed for being at-risk of sexual assault before being placed in a hold room or holding facility. SME interviews report RB-POE Officers consider the 11 factors detailed in TEDS including previous criminal record, age, physical build, identification as LGBTI, history of sexual

abuse victimization or perpetration, and the detainee's verbalized concerns for their own safety. Random staff interviews verify this practice

(b) The facility meets the standard provision. All detainees at RB-POE are asked about their concerns for their personal safety at RB-POE. Staff are looking for vulnerability, potential abusers and suicidality in all detainees. The sole interviewed detainee reports he was asked about his personal safety and if he felt safe. Interviewed random staff all report they ask detainees about their safety in holding while being processed and are also assessing if the detainee is a potential sexual abuser by looking at past offense histories, etc.

(c) The facility meets the standard provision. CBP TEDS requires the processing Officer consider factors outlined in the standard provision. Randomly interviewed Officers were able to refer to the factors on the PREA Quick Reference Card and indicated that they do consider these factors when processing new detainees; even if they should be physically separated in the monitoring area. Most Officers noted that only one detainee would ever be placed in the holding room and should there be more disruptive detainees, they would most likely be transferred to one of the two other bridges or ICE as soon as possible.

(d) The facility meets the standard provision. Interviewed Local SMEs report upon a detainee being identified as high risk of victimization and no single cell being available, Officers will consult the on-duty supervisor and an Officer will be detailed to provide continuous sight and sound supervision. The majority of Officers confirmed they would report their concerns regarding high risk detainees to the supervisor and either a single cell placement or continuous supervision would be provided.

(e) The facility meets the standard provision. CBP TEDS requires staff to ensure assessments are conducted in privacy where sensitive information cannot be learned by other parties. The dissemination of sensitive information is to be controlled on a "need to know" basis. Random staff interviews verify this practice. This practice could not be verified by detainee interview but the Auditor did view traveler's being asked information in a confidential manner.

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

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

Notes:

(a) The facility meets the standard provision. Both CBP TEDS and CBP Directive 2130-030 provide multiple ways for detainees to report sexual abuse/assault, retaliation and/or staff neglect or violations of policy leading to sexual assault. HQ and Local SME interviews verify detainees may report abuse orally or in writing to staff; third party reports are accepted, and detainees may request to make private anonymous telephone calls to OIG. All interviewed staff easily detailed how they would make such a request occur. Interviews with both SMEs and random staff verify staff understand detainees can report sexual abuse/sexual assault several ways including orally, in writing or by asking to make a private call to the OIG. Both SMEs and random staff indicated that the PREA posters are pointed out to detainees during processing.

(b) The facility meets the standard provision. Local SME and random staff interviews confirm Officers have been trained to advise a detainee how they can report sexual abuse to them or by contacting OIG via the hotline number on the poster. They report that they point the poster out to the detainee during processing. The Auditor was able to reach OIG via the hotline number from the secondary processing area at RB-POE.

(c) The facility meets the standard provision. Random staff interviews confirm they must accept oral, written or third party reports of sexual abuse. Staff also verified all reports, regardless of type, must immediately be forwarded to their supervisor and an incident report must immediately be generated electronically.

§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 provision. CBP Directive 2130-030 directs third parties may report sexual abuse on behalf of detainees. The DHS posters direct third parties on how to make written or telephonic reports to OIG. Random staff interviews confirm this practice as all interviewed Officers were aware of the third-party reporting guarantees on the PREA poster. During the on-site audit, the Auditor was able to place a call to OIG from the office designated for detainee private calls. The public is informed of reporting procedures by inquiry to OFO staff who are trained in these procedures or by accessing the CBP public domain website. That website is:

<https://www.cbp.gov/about/care-in-custody>.

§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. CBP Directive 2130-030 requires all staff to report immediately any knowledge, suspicion or information regarding an incident of sexual abuse/assault; retaliation against detainees or staff who made such a report or participated in an investigation of sexual abuse, or any staff neglect or violation of responsibilities contributing to an incident of sexual abuse/assault. Both interviewed Local SMEs and random staff affirm these responsibilities and most responded with the phrase "duty to report". All interviewed random staff state they could report sexual abuse outside of the chain-of-command by reporting to another supervisor or calling OIG.

(b) The facility meets the standard provision. RB-POE staff have been issued the PREA Quick Reference Cards. Staff report during random staff interviews they must immediately report incidents to their supervisors and supervisors must ensure incidents are reported to local law enforcement, JIC, and the Commissioner's Situation Room.

(c) The facility meets the standard provision. Random staff interviews verify dissemination of information regarding sexual assault is limited to their immediate supervisor, staff necessary to protect the detainee and the crime scene and anyone else with a need to know.

(d) The facility meets the standard provision. Interview with the HQ Sexual Abuse and Assault Investigations (SAAI) SME reveals sexual assaults of victims under age 18 and vulnerable adults are to be reported to the designated State or local services agency by the Port Director or their designee and at the direction of SAAI.

§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/agency meets the standard. CBP TEDS requires when any agency employee has a reasonable belief circumstances may exist which place a detainee at imminent risk of sexual assault, the employee has a duty to take immediate action to protect the detainee. Local interviews with SMEs affirm the detainee must immediately be protected by direct constant supervision (sight and sound) in the monitoring area. One officer must remain with the protected detainee at all times. Random staff interviews confirm they would protect any detainee at imminent risk of sexual abuse/assault by direct supervision as directed by their supervisor. They would not leave the side of the detainee.

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

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

Notes:

(a) The facility meets the standard provision. CBP Directive 2130-030 requires should a detainee have been sexually abused/assaulted at another facility prior to arriving at RB-POE, the agency or administrator of the sending facility must be notified. Interview with the CBPO/PFC verifies the Acting RB-POE Area Port Director or their designee would make this notification. The PFC reported that they would reach out to the AAPD first.

(b) The facility meets the standard provision. The standard provision requires the notification be made within 72 hours of receiving the allegation. The PFC stated the Acting RB-POE Area Port Director or their designee will make the notification immediately.

(c) The facility meets the standard provision. The PFC indicates the notification would be documented in the detainee's record.

(d) The facility meets the standard provision. The PFC reports the advised agency, if outside CBP, would be notified of the PREA requirements. SME interview with the PFC verifies if RB-POE receives an allegation from another facility a detainee was sexual assaulted while at RB-POE, the allegation would be referred to local law enforcement or Office of Professional Responsibility (OPR) for investigation.

§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 agency/ facility meets the standard provision. CBP Directive 2130-030 requires upon learning of a detainee sexual assault, the first responding Officer or their supervisor is to perform all first responder duties delineated in the standard provision. In addition to training all law enforcement personnel on first responder duties, the agency/facility has provided all law enforcement Officers with pocket reference cards of their first responder duties. All interviewed random staff knew their responsibilities to separate the alleged victim and abuser, inform their supervisor, address medical emergencies, preserve evidence at the crime scene and on the alleged victim and alleged abuser and notify the JIC of the incident immediately. All SME interviews verified first responder duties have been discussed during musters and when the pocket reference cards were distributed.

(b) The standard provision is not applicable. Only law enforcement Officers interact directly with detainees during their entire hold at RB-POE.

§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) The facility meets the standard provision. CBP Directive 2130-030 is the agency's coordinated institutional plan for prevention, detection and response to sexual abuse. The Directive provides a clear progressive plan for the prevention, detection and response components of addressing sexual abuse in holding.

(b)(c) The facility meets the standard provision. CBP Directive 2130-030 requires RB-POE to notify another DHS facility if the victim of sexual abuse/assault is transferred. The RB-POE Assistant Area Port Director or designated supervisor makes the notification. This notification includes the detainee's need for medical or social services. RB-POE must also make the same notifications to a non-DHS facility, if the law allows for this notification. This notification is made by the RB-POE Acting APD or their designated supervisor and was confirmed by interviews with the Acting APD and the PFC.

§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. SME interview with the PFC SME verified that any employee contractor or volunteer accused of sexual abuse/sexual assault would be removed from duties pending the results of the OPR/ Sexual Abuse and Assault Investigations (SAAI) investigation. RB-POE by practice, does not allow direct contact between contractors and detainees and has no volunteers. Interview with the HQ Labor and Employee Relations (LER) SME reports Officers do not supervise contractors, but control detainee exposure. Should contractor/detainee contact somehow occur and there is an allegation of sexual abuse/assault; by first responder procedure, the contractor would be removed from detainee contact and the Area Port Director would seek the removal of the contractor from the 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. 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. The training on and implementation of this policy was verified by interviews with the HQ SAAI SME and the Local SMEs. Random staff interviews resulted in a consistent response; any form of retaliation by either a detainee or a staff member cannot be tolerated and would be reported either up the chain-of-command or to OIG, if circumstances required such a report.

§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 agency/facility meets the standard provision. There were no substantiated allegations of sexual abuse at RB-POE during the last 12 months. Interview with the HQ LER verified disciplinary action is pursued in all cases of substantiated sexual assault or violating sexual abuse policies and removal is always the presumptive action. CBP Directive 2130-030 states CBP personnel may be subject 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.

(c) The agency meets the standard provision. Interview with the HQ LER SME reveals there were no reports of substantiated sexual abuse/violation of sexual abuse policies for staff at RB-POE. Interview with the HQ SAAI SME confirms all substantiated cases of sexual abuse are referred to appropriate law enforcement agencies by the Area Port Director and notification is coordinated by HQ SAAI SME. The RB-POE PFC reports this notification would be directed by HQ SAAI through the Area Port Director's Office.

(d) The agency meets the standard provision. Interview with the HQ SAAI SME verifies removals for substantiated sexual abuse/violations of sexual abuse policies would be reported to relevant licensing bodies, to the extent known. This report would be made by SAAI.

§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. CBP Directive 2130-030 requires any contractor or volunteer suspected of perpetrating sexual abuse and/or assault is to be removed from all duties requiring detainee contact pending the outcome of the investigation. Interviews with Local SMEs reveal all suspected perpetrators of sexual abuse are to immediately be removed from contact with detainees. CBP facilities do not utilize volunteers and RB-POE has excluded contractors from direct contact with detainees by local procedure and practice. Interview with the HQ OPR/SAAI SME verifies any substantiated allegation of sexual abuse would result in notification of the allegation to appropriate law enforcement agencies by the Area Port Director or their designee and to the Office of Acquisition to have the contractor barred from federal service. OPR/SAAI would also notify any appropriate licensing bodies of any substantiated allegations of sexual abuse.

(b) The facility meets the standard provision. Local SME interview with the RB-POE PFC verifies any contractor suspected of perpetrating sexual abuse would be removed from all duties where detainee contact could occur pending the outcome of the investigation. This removal would be made by the Area Port Director (APD) or the AAPD.

§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 provision. Detainee victims of sexual abuse at RB-POE would be immediately transported to Erie County Medical Center. This facility offers the comprehensive medical services as outlined in the standard provision. The services would be provided to the victim at no charge and even if the victim refuses to cooperate with the sexual abuse/assault investigation. Local SME interview with the RB-POE PFC verifies these services and requirements. They also verified these services would be provided without cost to the detainee and regardless of the victim recanting their allegation or not cooperating with the subsequent investigation.

§115.186(a) – Sexual abuse incident reviews.

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

Notes:

The agency meets the standard. The HQ PAQ indicates there have been no investigations of sexual abuse allegations at this facility in the past 12 months. Interview with the HQ PSA Coordinator reveals their office regularly receives sexual abuse incident reviews within 30 days after the conclusion of a sexual abuse investigation at a facility. The Incident Review Committee (IRC) is comprised of three CBP HQ Program Managers. The RB-POE Acting APD indicates the RB-POE Acting APD would implement any recommendations made by the IRC.

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

Notes:

Data collection is performed by Headquarters staff and was not audited locally.

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

October 3, 2019
Date

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



U.S. Customs and Border Protection

AUDITOR

Name of Auditor:	(b)(6)(b)(7)(C)	Organization:	Creative Corrections, LLC
Email Address:	(b)(6)(b)(7)(C)	Telephone Number:	(b)(6)(b)(7)(C)

AGENCY

Name of Agency:	U.S. Customs and Border Protection
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PROGRAM OFFICE

Name of Program Office:	Office of Field Operations
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SECTOR OR FIELD OFFICE

Name of Sector or Field Office:	Buffalo, New York
Name of Chief or Director:	(b)(6)(b)(7)(C)
PREA Field Coordinator:	(b)(6)(b)(7)(C)
Sector or Field Office Physical Address:	726 Exchange Street, Buffalo, NY 14210
Mailing Address: (if different from above)	Same as Above

SHORT-TERM FACILITY BEING AUDITED

Information About the Facility	
Name of Facility:	Rainbow Bridge Port of Entry
Physical Address:	1 Rainbow Boulevard, Niagara Falls, NY 14301
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:	Port Director
Email Address:	(b)(6)(b)(7)(C)	Telephone Number:	(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 Office of Field Operations (OFO), Rainbow Bridge Port of Entry (POE), was conducted on May 9, 2019, and the preliminary findings report was submitted on June 11, 2019. Following comments from CBP Headquarters and from the reviewing Auditor, the report was submitted in Final Draft on October 3, 2019.

At the time of the audit, the Auditor reviewed the compliance of 25 Subpart B standards and the Rainbow Bridge POE was found to be in compliance with 23 standards: (115.111; 115.114; 115.116; 115.117; 115.118; 115.121; 115.122; 115.131; 115.132; 115.141; 115.151; 115.154; 115.161; 115.162; 115.163; 115.164; 115.165; 115.166; 115.167; 115.176; 115.177; 115.182 and 115.186). The Rainbow Bridge POE was found to not be in compliance with two standards: (115.113 and 115.115).

On April 16, 2020, the Rainbow Bridge POE submitted a preliminary Corrective Action Plan (CAP) through Headquarters. Several documents were requested by the Reviewing Auditor and several clarifications were sought and received by May 28, 2020. The CAP was reviewed by the Auditor and Program Manager for Creative Corrections. The Auditor was provided a copy of the Annual Review of Detainee Supervision Guidelines document which satisfied all requirements of Standard Provisions 115.113 (b, c). The Rainbow Bridge POE also submitted documentation of staff musters and sign-offs satisfying the staff re-training requirements of Standard Provisions 115.115 (d, f) requiring Corrective Action. On June 4, 2020, the Rainbow Bridge POE CAP was approved by Creative Corrections Certified PREA Auditor, (b)(6)(b)(7)(C).

Although there was regular communication between Creative Corrections and CBP Headquarters, the CAP was not completed within the required 180 day time period.

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.

§115.113

- Exceeds 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

Notes:

On April 16, 2020, the Rainbow Bridge POE submitted an Annual Review of Detainee Supervision Guidelines document as required by Standard Provision (b). A review of the report revealed that several elements required by the Standard had not been satisfied and the report was returned for revision. On May 28, 2020, an amended Annual Review of Detainee Supervision Guidelines document was submitted to the reviewing Auditor and was found to satisfy all elements of the Standard Provision. The Rainbow Bridge POE is now compliant with Standard 115.113.

§115.115

- Exceeds 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

Notes:

On May 15, 2020, the Rainbow Bridge POE submitted both local and national documents outlining officer performance requirements regarding proper personal search techniques including juvenile visual cavity searches, determination of detainee gender identification and proper procedures for the pat search of transgender detainees. Also submitted were staff training muster sign-offs and acknowledgements. The Rainbow Bridge POE is now compliant with Standard 115.115.

OVERALL DETERMINATION - AFTER IMPLEMENTATION OF THE CORRECTIVE ACTION PLAN	
<input type="checkbox"/> Exceeds Standards (Substantially Exceeds Requirements of Standards) <input checked="" type="checkbox"/> Meets Standards (Substantial Compliance; Complies in All Material Ways with the Standards for the Relevant Review Period) <input type="checkbox"/> Does Not Meet Standards (Requires Corrective Action)	<input checked="" type="checkbox"/> Low Risk <input type="checkbox"/> Not Low Risk

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

June 10, 2020 _____
Date