

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



U.S. Customs and  
Border Protection

## AUDITOR INFORMATION

<b>Name:</b>	(b) (6), (b) (7)(C)	<b>Company Name:</b>	Creative Corrections, LLC
<b>Mailing Address:</b>	(b) (6), (b) (7)(C)	<b>City, State, Zip:</b>	Beaumont, Texas 77706
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## AGENCY INFORMATION

<b>Name of Agency:</b>	U.S. Customs and Border Protection
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## PROGRAM OFFICE

<b>Name of Program Office:</b>	Office of Field Operations
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## SECTOR OR FIELD OFFICE

<b>Name of Sector or Field Office:</b>	El Paso Field Office
<b>Name of Chief or Director:</b>	(b) (6), (b) (7)(C)
<b>PREA Field Coordinator:</b>	(b) (6), (b) (7)(C)
<b>Physical Address:</b>	9400 Viscount, Suite 104, El Paso, Texas 79925
<b>Mailing Address: (if different from above)</b>	

## SHORT-TERM HOLDING FACILITY BEING AUDITED

<b>Information About the Facility</b>			
<b>Name of Facility:</b>	Area Port of Ysleta		
<b>Physical Address:</b>	797 S. Zaragoza Road, El Paso, Texas, 79907		
<b>Mailing Address: (if different from above)</b>			
<b>Telephone Number:</b>	(b) (6), (b) (7)(C)		
<b>Facility Leadership</b>			
<b>Name of Officer in Charge:</b>	(b) (6), (b) (7)(C)	<b>Title:</b>	Assistant Port Director
<b>Email Address:</b>	(b) (6), (b) (7)(C)	<b>Telephone Number:</b>	(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 U.S. Customs and Border Protection (CBP), Office of Field Operations (OFO), (YSL) Port of Ysleta was conducted March 2, 2023, by (b) (6), (b) (7)(C), a Certified PREA Auditor, contracted through Creative Corrections, LLC., of Beaumont, Texas. This audit was conducted to determine facility compliance with the Department of Homeland Security (DHS) PREA Standards. As such, along with the on-site portion of the inspection, the audit included a review of the CBP's PREA policies and procedures, YSL and HQ documents, as well as telephonic interviews with CBP Headquarters (HQ) Subject Matter Experts (SMEs).

This was the second PREA audit for YSL, with the first being conducted on February 14, 2019. At any time, the detainee population may include adult males and females, family units, and unaccompanied children (UC). Detainees may be held at YSL for a maximum of 72 hours prior to release or being transferred to another facility. However, it should be noted that detainees held at this facility are generally processed out within a few hours. As needed, the local law enforcement agencies are the El Paso Police Department and the El Paso Sheriff Office.

At 0500 hours, an informal introduction with the YSL leadership team was made with the Auditor. During this time, the audit format and schedule was discussed. Immediately thereafter, the Auditor was directed to a private office for commencement of interviews with staff from all shifts: (b) (7)(E). Supervisory CBP Officer/PREA Field Coordinator Venegas, El Paso Field Office, acted as the point of contact throughout the audit.

At 0800, all areas of YSL were inspected. This included the Passport Control Secondary (PCS) area, with its primary and secondary hold rooms, as well as the hold rooms within the Passenger Vehicle Processing (PVP) area. If escorted from the pedestrian walkway for further interview/processing, detainees are generally held in one of the (b) (7)(E) PCS hold rooms. If escorted from the vehicle lanes for further inspection/processing, detainees are generally held in one of the (b) (7)(E) PVC hold rooms. UCs are generally placed in a room area within the PCS area. This area is a large interview room, where the door always remains open. It contains a large open window front and is in direct view of the officers' workstation. It contains toys, snacks, drinks, and other child appropriate measures. It should also be noted that age appropriate PREA posters (child, juvenile, and adult age ranges) are clearly visible within this area, as well as throughout the facility. These posters are printed in both English and Spanish. Through the facility, there are both multi-person and single person hold rooms. The multi-person hold rooms may or may not contain a toilet. When available within a hold room, toilets are concealed behind a wall of approximately three feet to promote privacy. If needed, detainees can also be escorted to a private bathroom area.

Scope of Audit: Prior to the on-site inspection, the Auditor reviewed the HQ and Local Pre-Audit Questionnaires (PAQs), HQ Responsive Documents and Data Requests, local documents, including YSL specific documents, and HQ Participation documents. During the on-site inspection, Notice of Audit postings were displayed throughout the facility, as well as on facility entry doors, for ease in accessibility by officers, detainees, and the public. The Auditor was provided with a facility roster to select YSL SMEs and officers for interviews, which were conducted in a private setting. The Auditor conducted three SME interviews, one contractor interview, and seven officer interviews. Additionally, the Auditor interviewed two detainees, both from Mexico, and spoke with the Lead Sexual Assault Nursing Exam (SANE) nurse of the area hospital. The Auditor also conducted a test call to Department of Homeland Security (DHS) Office of Inspector General (OIG) Hotline. During the 12-month audit time frame, YSL did not receive any allegations of sexual abuse. The agency conducted an incident review for an unsubstantiated allegation occurring at YSL. The incident review was conducted within 30 days of investigative closure. The investigation concluded on September 1, 2023, with the required subsequent Incident Review occurring on September 30, 2023.

An exit briefing for YSL was held at approximately 1600 hours. The exit briefing was conducted by Certified PREA Auditor (b) (6), (b) (7)(C). The purpose of this meeting was to discuss on-site observations. As well, the Auditor reiterated how the triangulation process between agency/facility documents, agency/facility interviews, and on-site observations accumulates into the final determination of facility compliance.

Those in attendance for the briefing were:

- (b) (6), (b) (7)(C), Prevention of Sexual Assault Coordinator (PSA) HQ
- (b) (6), (b) (7)(C), Deputy Prevention of Sexual Assault Coordinator (DPSA) HQ
- (b) (6), (b) (7)(C), ADFO
- (b) (6), (b) (7)(C), (A)(BSC)
- (b) (6), (b) (7)(C), Program Manager, OFO), PREA Coordinator HQ
- (b) (6), (b) (7)(C), Supervisory CBPO, El Paso Field Office (EPFO)
- (b) (6), (b) (7)(C), Port Director, Port of Ysleta
- (b) (6), (b) (7)(C), Assistant Port Director, Port of Ysleta
- (b) (6), (b) (7)(C), Assistant Port Director, Port of Ysleta
- (b) (6), (b) (7)(C), Supervisory Customs and Border Protection Officer (SCBPO), Port of Ysleta
- (b) (6), (b) (7)(C), PREA Auditor, Creative Corrections, LLC

**SUMMARY OF OVERALL FINDINGS:**

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

The Port of Ysleta on-site audit was completed on Thursday, March 2, 2023, with the findings report being submitted in April 2023.

The audit process included a review of all documentation, interviews with both agency and facility-based staff, as well as on-site observations of facility procedures and holding conditions. This process has found YSL in compliance with all 25 DHS Subpart B Standards.

YSL meets 24 standards: 115.111, 115.113, 115.114, 115.115, 115.116, 115.117, 115.118, 115.121, 115.12, 115.131, 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, 115.186,

YSL exceeds 1 standard: 115.132

SUMMARY OF AUDIT FINDINGS	
Number of standards exceeded: 1	
Number of standards met: 24	
Number of standards not met: 0	
OVERALL DETERMINATION	
<input type="checkbox"/> Exceeds Standards (Substantially Exceeds Requirements of Standards)	<input checked="" type="checkbox"/> Low Risk
<input checked="" type="checkbox"/> Meets Standards (Substantial Compliance; Complies in All Material Ways with the Standards for the Relevant Review Period)	<input type="checkbox"/> Not Low Risk
<input type="checkbox"/> Does Not Meet Standards (Requires Corrective Action)	

**PROVISIONS**

**Directions:** In the notes, the auditor shall include the evidence relied upon in making the compliance or non-compliance determination for each provision of the standard, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Corrective Action Plan Final Determination, accompanied by information on specific corrective actions taken by the facility. Failure to comply with any part of a standard provision shall result in a finding of “Does not meet Standard” for that entire provision unless that part is specifically designated as Not Applicable. For any provision identified as Not Applicable, provide an explanation for the reasoning. If additional space for notes is needed, please utilize space provided on the last page.

**§115.111(a) – Zero tolerance of sexual abuse; Prevention of Sexual Assault Coordinator.**

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

**Notes:**

(a): The facility meets the standard. The agency is required to have a written policy mandating zero tolerance toward all forms of sexual abuse and outlining the agency’s approach to preventing, detecting, and responding to such conduct. On March 12, 2014, the Commissioner informed all staff through email communication the adoption of the final rule of the PREA standards and the agency’s commitment of it in protecting the safety of individuals in CBP custody. The memorandum further stated CBP is committed to a zero-tolerance of sexual abuse and or sexual assault in all CBP holding facilities. The agency developed CBP Directive 2130-030, Prevention, Detection and Response to Sexual Abuse and/or Assault in CBP Holding Facilities (dated January 19, 2018, with a review date of January 19, 2021) to establish procedures for zero tolerance within CBP holding facilities. Throughout the facility, the agency’s stance against sexual abuse is stressed by way of frequently displayed zero tolerance posters. These posters are in both English and Spanish, as well as instructionally designed for age-appropriate groups. Furthermore, the agency designated an upper-level, agency-wide PSA Coordinator, and a Deputy PSA Coordinator, who have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA Standards for DHS holding facilities. The PSA Coordinator was interviewed. The PSA Coordinator stated both positions are fulltime, which allows them sufficient time and authority to command the responsibility. Additionally, during Sexual Assault Awareness and Prevention Month observed in April, the Privacy and Diversity Office messaged information to all employees regarding CBP’s zero tolerance of sexual abuse and assault policy through payroll notice statements and CBP Central.

**§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 provision. The standard requires YSL to maintain sufficient supervision of detainees, through appropriate staffing levels, as well as (b) (7)(E), to protect detainees against sexual abuse. As noted within agency policy, the safety of CBP employees, detainees, and the public is paramount during all aspects of CBP operations. CBP National Standards on Transport, Escort, Detention, and Search (TEDS), dated October 2015 requires YSL officers to closely supervise hold rooms when in use. During the on-site inspection of YSL, the Auditor inspected the (b) (7)(E) of the facility and the layout of the holding areas. There are (b) (7)(E) (b) (7)(E) in Passport Control Secondary, which all contain large windows and are in a direct line of sight of sight to the supervisors and officers in the area. There are enough hold rooms to separate males, females, family units, and unaccompanied children (UC). There are (b) (7)(E) in the Passenger Vehicle Processing. It was noted that YSL does have sufficient (b) (7)(E) to assist facility staff in the supervision and monitoring of detainees. (b) (7)(E). (b) (7)(E) (b) (7)(E) are continuously monitored by YSL officers. Interviews with YSL SMEs noted that in the event of an influx of detainees or (b) (7)(E), that administration could respond in several ways. (b) (7)(E) (b) (7)(E) to ensure the needs of the detainees were met. (b) (7)(E) (b) (7)(E) (b) (7)(E) (b) (7)(E) (b) (7)(E) (b) (7)(E) (b) (7)(E) (b) (7)(E) (b) (7)(E)

(b)(c): The facility meets these provisions. The standard requires YSL to develop and document comprehensive detainee supervision guidelines and review the supervision guidelines at least annually. CBP Directive 2130-030 and a memorandum dated August 12, 2014, from the Acting Assistant Commissioner, OFO, was sent out to all Directors, OFO supplementing the Agency's Standard to Prevent, Detect, and Respond to Sexual Assault in CBP holding facilities. The supplement includes management requirements of developing and documenting comprehensive detainee supervision guidelines which has been accomplished through TEDS. The Directive further requires YSL to review the detainee supervision guidelines at least annually and consider its applicability based on the physical layout, the composition of the detainee population, the prevalence of substantiated and unsubstantiated incidents of sexual abuse, the findings and recommendations of sexual abuse incident review reports, and any other relevant factors, including but not limited to the length of time detainees spend in agency custody. YSL conducted a review of the detainee supervision guidelines on December 2, 2022. The Auditor reviewed the assessment conducted by management at the facility. The report was comprehensive and provided detailed information. A determination was made by YSL that the facility maintains sufficient supervision of detainees.

**§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 this provision. The standard requires YSL to ensure juveniles are detained in the least restrictive setting appropriate to the juvenile's age and special needs, while still maintaining the welfare of the juvenile and the overall detainee population. CBP TEDS and a memorandum from the Acting Assistant Commissioner of Field Operations issued on August 12, 2014 to the Directors of Field Operations, Director of Preclearance Operations, and the Office of Field Operations referencing the Standards to Prevent, Detect, and Respond to Sexual Abuse and Assault in CBP/OFO Hold Room Facilities stating that juveniles are to be held in the least restrictive setting appropriate to the juveniles age and special needs, provided that the setting is consistent with the need to protect the juvenile's well-being and that of others as well as with any other laws, regulations, or legal requirements. During the on-site inspection, several types of hold rooms were observed, including hold rooms specific for juveniles to be separated by gender. Juveniles are held in the (b)(7)(E) rooms directly in the line of sight of the officer workstations. The doors to these room are always open. They contain toys, snacks, drinks, and other child appropriate measures. While held in these rooms, the juveniles are provided unlimited access to drinks and snacks. They are also provided access to toilet facilities. Interviewed officers were acutely aware of the agency's need to maintain a safe and positive environment for juveniles. Specifically, when occupied by juveniles, officers state that juveniles within the holding area must be maintained in the least restrictive means as possible. The juvenile holding area can only hold juveniles; no adult detainees are allowed in that area. (b)(7)(E) officers are assigned to monitor the area. In this, the same gender staff are assigned to monitor the holding area as the gender of juveniles within it. While in the juvenile holding area, children are free to move about the area to watch television or play with toys.

(b): The facility meets this provision. According to YSL SME interviews, UCs are held separately from adults. However, unaccompanied juveniles may remain with a non-parental adult family member if their relationship has been vetted to the extent feasible and remaining with the non-parental adult family member is appropriate given the totality of the circumstances. Officer interviews thoroughly explained the vetting process. Officers stated the appropriate government agencies within countries of origin are contacted to ensure presented documents are legitimately authorized by the persons possessing them.

**§115.115(b) through (f) – Limits to cross-gender viewing and searches.**

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



**Notes:**

(b)(c): The facility meets these provisions. CBP TEDS restricts the use of cross-gender partial body searches or cross-gender visual body cavity searches except in exigent circumstances including consideration of officer safety or when performed by medical practitioners. If an opposite gender staff member must perform a partial body search or be present at a medical examination, it is mandatory that two staff are present. In speaking with YSL SMEs and officers, these requirements were continuously iterated. As such, interviews with the SME's and officers confirm their knowledge of policy, as well as the extensive documentation required should an exigent circumstance result in a cross-gender search. Additionally, they articulated the need to conduct all pat-down searches in a professional manner appropriate to the gender of the person being searched. Detainee interviews also confirmed the pat-down searches were conducted in a respectful manner. During the audit time frame, YSL has conducted partial body searches at the POE and body cavity searches at a medical facility. A review of facility logs indicates that all searches have been conducted within standards and according to policy requirements.

(d): The facility meets this provision. CBP TEDS has outlined requirements to allow detainees to shower, perform bodily functions, and change clothing without being viewed by staff of the opposite gender, except in exigent circumstances or when such viewing is incidental to routine hold room checks. When taken into custody, detainees are placed in hold rooms with other detainees of the same gender. If staff of the opposite gender enter those hold rooms, policy requires staff to knock and announce their presence before entering. During the on-site inspection, it was noted that some hold rooms contain a toilet, while others do not. The toilets were located behind a half wall to assure privacy. The SMEs and officers stated during their interview that even when entering hold rooms containing detainees of the same gender as themselves, they would still knock and announce their presence prior to entering with as much privacy as possible while still ensuring an overall safe environment. They also stated if a hold room did not have a toilet, a detainee can request the use of a private toilet room, the detainee is subsequently escorted to a bathroom area by an officer of the same gender and provided privacy. Detainee bathroom areas are also separated by gender. Detainee interviews confirmed that said persons had been placed in a hold room according to gender and were permitted the use of private toilet areas. (b) (7)(E) trained on any areas within the facility where detainees would be expected to be in a state of undress or toileting.

(e): The facility meets this provision. CBP Directive 2130-030 prohibits staff from searching or examining detainees for the sole purpose of determining the person's gender. During SME and officer interviews, all officers were aware that searching detainees to determine their gender was not within policy guidelines. They further asserted that if the gender of an individual was unknown, they would simply ask the individual how that person identified and would address them accordingly.

(f): The facility meets this provision. CBP TEDS clearly outlines the requirements of all pat-down searches. SME and officers interviewed stated they have been trained on proper search procedures and that whenever operationally feasible, pat-down searches are conducted by the same gender, gender identity, or declared gender as the detainee being searched. If a pat-down search of a transgender person was necessary, they also noted that the search would be performed in a manner appropriate for the declared gender of the detainee being searched. The SMEs stated all personal searches, as well as the articulated facts leading to those searches, are electronically documented in Unified Secondary (USEC).

**§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)(b): The facility meets these provisions. CBP Directive 2130-033, Nondiscrimination for Individuals with Disabilities in CBP-Conducted Services, Programs, and Activities (Non-Employment), dated July 8, 2021, clearly states it is CBP's policy not to discriminate against members of the public because of disability (hearing impaired, blind or low vision, or those who have intellectual, psychiatric, or speech disabilities), and to have access to CBP's efforts to prevent, detect, and respond to sexual abuse and/or sexual assault. CBP Directive 2130-030 further directs staff to provide reasonable modifications to detainees who have disabilities (hearing impaired, blind, or low vision, or those who have intellectual, psychiatric, or speech disabilities), to have access to CBP's efforts to prevent, detect, and respond to sexual abuse and/or sexual assault. During the on-site inspection, phone numbers and web addresses for providers of

accommodation services was readily accessible and observed. Additionally, agency policy requires that any written materials related to sexual abuse should be provided in formats that ensure effective communication with detainee who may have a disability. During the on-site inspection, it was observed sexual abuse awareness posters were posted in English and Spanish. When asked, officers were aware of and understood how to utilize different resources available to them. Additionally, it was noted that through the use of video communications, officers also have to ability to provide sign language interpretation services for those in need of such.

(c): The facility meets this provision. CBP TEDS requires that when investigating allegations of sexual abuse, interpretation services may not be provided by another detainee, unless the reporting detainee expresses a preference for another detainee to provide interpretation services, and the supervisor determines that such services are appropriate and consistent with the operational office's policies and procedures. A review of documentation reflects that during the audit time frame, YSL has not detained any individuals who were deaf, blind, or cognitively impaired. In speaking with a SMEs and officers, they expressed caution against ever using another detainee to interpret allegations of sexual abuse. During detainee interviews, both persons stated that the officers spoke with them in a language that they could understand the information being provided to them, as well as the information being requested of them.

**§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 this provision. CBP Directive 2130-030 directs the Office of Human Resources to develop policy and procedures to ensure CBP does not hire or promote individuals who have had previous substantiated cases of sexual abuse and/or sexual assault. A memorandum by the Executive Director, with an issue date of February 29, 2016, issued Standard Operating Procedures to ensure the agency offers protection to all detainees of sexual abuse and/or sexual assault when hiring or promoting individuals within the agency. While interviewing the HQ Hiring Center SME, the importance of staff suitability for employment was clearly expressed. In that, it was noted that applicants are required to answer suitability questions during the application process. Based on their responses, applicants may be screened out for employment and deemed ineligible for further consideration. During the on-site inspection, eleven staff files were reviewed to ensure that suitability measures were employed during the hiring and promotion process of staff. The review concluded YSL has followed all agency requirements.

(b): The facility meets this provision. CBP has developed operational guidance through the issuance of the Human Resources Management (HRM) Standard Operating Procedures (SOP) to provide direction in the hiring and promotion of employees who have direct contact with detainees. CBP HRM developed Mission Specific Questions and a DHS PREA Questionnaire which includes asking applicants who may have direct contact with detainees directly about previous misconduct as identified in provision (a) of this standard. While interviewing the HQ Hiring Center SME, it was noted that all staff must complete a PREA Questionnaire Form, whether the individual is a new hire or applying for promotions, which subsequently determines their suitability assessment. As a function of employment, staff must also acknowledge a continuing affirmative duty to disclose any such misconduct.

(c)(d): The facility meets these provisions. CBP Directive 2130-030 requires that background investigations are conducted for all applicants for employment, along with contractor applicants who may have contact with detainees. Additionally, policy requires that subsequent background investigations are conducted every five years for all CBP personnel who may have contact with detainees. The Auditor reviewed a blank document that summarized the results of a background investigation, as well as determined whether the employee was asked the questions described in provision (a). In speaking with the HQ Office of Professional Responsibility (OPR), Personnel Security Division (PSD) SME, the requirements surrounding continuing background investigations was explained. The Auditor selected eight (8) officers, three (3) SMEs, and one (1) contractor and submitted the names to HQ OPR through the PSA Coordinator. A review of the background checks revealed the agency complies with requirements for pre-hire and five-year background checks.

(e): The facility meets this provision. The HQ Labor Employee Relations (LER) SME stated CBP mandates that all persons have a continuing affirmative duty to report any acts of sexual abuse as required under the PREA standards.

Likewise, it was explained that material omission or the provision of materially false information regarding such misconduct is grounds for termination or withdrawal for an offer of employment. The HQ LER stated all employees are made aware of this requirement through the issuance of the Standards of Conduct, as well as the Table of Penalties for violations of criminal law.

(f): The facility meets this provision. CBP Directive 2130-030 stipulates that unless prohibited by law, the agency will provide information on substantiated allegations of sexual abuse involving former employees upon receiving a request from an institutional employer for whom such employee has applied to work. Specifically, in speaking with the HQ LER SME, it was noted that if a former employee has applied for employment at another agency, and that person has signed a release of records, then the agency will provide the requesting agency with this information.

**§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 provision is not applicable as the YSL SMEs stated the facility has not made any substantial modification since the previous audit time frame.

(b): The facility meets this provision. During the on-site inspection, the SMEs stated that any upgrades to technologies would be made with consideration toward the prevention, detection, and response to sexual abuse and/or sexual assault.

**§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)(d): The facility meets these provisions. CBP Directive 2130-030 and CBP TEDS requires timely, unimpeded medical treatment and crisis intervention, including emergency contraception and sexually transmitted infections prophylaxis be provided to a victim of sexual assault without financial cost to the detainee. Interviews with the YSL SMEs confirm both forensic medical services, as well as victim advocacy services, would be provided to the alleged victim without cost. The SMEs further stated YSL would transport any person in such of a forensic medical exam to the University Medical Center (UMC), which is a Level One Trauma Facility containing a Crime Victims Unit and has Sexual Assault Forensic Examiner/Sexual Assault Nurse Examiner (SAFE/SANE) staff continuously available. In speaking with University of Texas Medical Center (UMC) Lead SANE Nurse, it was noted that UMC SANE staff do follow a uniform evidence protocol. The UMC SANE nurse also stated UMC offers rape crisis victim advocates to all persons who undergo a forensic exam. The SMEs stated that if operationally feasible, accommodations would be made for any detainee victim with a continuing need to receive victim advocacy services from the UMC while held at YSL.

(e): The facility meets this provision. YSL has requested through memorandums dated May 14, 2019, that the El Paso Police Department and the El Paso Sheriff's Department, who have jurisdiction for conducting investigations of allegations of sexual abuse made by individuals in custody at YSL, do so in accordance with Section 115.121(a) or 6 C.F.R., Part 115. These memorandums were again issued on February 10, 2023. It should be noted, however, that per the HQ OPR/SAAI SME, during the audit time frame, YSL did not receive any allegations of sexual abuse that would necessitate a sexual assault forensic exam.



**§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 this provision. CBP Directive 2130-030 requires all allegations of sexual abuse and/or assault to be documented on a Significant Incident Report and promptly reported to the Commissioner’s Situation Room and the Joint Intake Center (JIC). CBP Directive 3340-025F, Reporting Significant Incident to the U.S. Customs and Border Protection WATCH, (dated November 2, 2021, with a review date of November 2, 2024) directs staff to report sexual abuse and/or sexual assault through a united hub which operates 24 hours a day, seven days a week, to ensure significant incidents are immediately reported to leadership. The HQ SAAI SME stated there are multiple layers of agency oversight, as well as policies in place to ensure incidents are immediately reported. The YSL SMEs stated that should an allegation involve potentially criminal behavior it would be immediately reported to the El Paso Police Department or El Paso Sheriff’s Office for investigative purposes.

(d): The facility meets this provision. CBP Directive 2130-030 requires all allegations of sexual abuse and/or assault be promptly reported to the PSA Coordinator, the Commissioner’s Situation Room, and the Joint Intake Center (JIC). The PSA Coordinator stated that all allegations of detainee sexual abuse are immediately reported. The PSA Coordinator further noted that during the audit time frame, YSL has received one allegation of sexual abuse allegedly occurring in 2020. This investigation concluded on September 1, 2022, with the required subsequent Incident Review occurring on September 30, 2022.

**§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 this provision. CBP efforts to prevent, detect, and respond to sexual abuse and assault in CBP holding facilities is continually strengthened by agency policies, memorandums, job aids, and messaging clarifying the responsibility of employees. As such, they agency provides the following information to all staff: Preventing and Addressing Sexual Abuse in CBP Holding Facilities Training; Prevent, Detect, Respond awareness posters; Memorandum for Privacy and Diversity Office Mandatory Preventing and Addressing Sexual Abuse in CBP Holding Facilities Training, dated November 23, 2022; CBP Central: Tuesday, February 19, 2019; CBP Central: Monday, December 5, 2022; Privacy and Diversity Office Payroll Messages, dated CY 2022; Sexual Assault Awareness and Prevention Month (April) Communication Package dated April 19, 2022; Contractor SAAPR/PREA Refresher Information, dated January 13, 2022; Contractor SAAPR/PREA Refresher Information, dated January 13, 2022; Memorandum for Issuance of U.S. Passports with X Gender Markers, dated March 16, 2022; CBP Central: Monday, December 5, 2022; CBP Directive 2130-030; CBP TEDS; and FEMA Emergency Management Institute Training IS-990 for volunteers. Additionally, the Agency has developed a PREA Resource Center which provides information to all CBP employees who have contact with the detainee population. The Auditor reviewed the training material which specifically covers: (1) the agency’s zero-tolerance policies for all forms of sexual abuse; (2) the right of detainees and employees to be free from sexual abuse, and from retaliation for reporting sexual abuse; (3) definitions and examples of prohibited and illegal sexual behavior; (4) recognition of situations where sexual abuse may occur; (5) recognition of physical, behavioral, and emotional signs of sexual abuse, and methods of preventing such occurrences; (6) procedures for reporting knowledge or suspicion of sexual abuse; (7) how to communicate effectively and professionally with detainees, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming detainees; and (8) the requirement to limit reporting of sexual abuse to personnel with a need-to-know in order to make decision concerning the victim’s welfare and for law enforcement or investigative purposes. During the on-site inspection, employee training records were reviewed to ensure the completion biennial PREA training requirements. In speaking with officers, all possessed levels of knowledge regarding the agency’s zero-tolerance policies consistent with purposeful measures of educational training. Some of the officers who were interviewed produced a pocket card that contained easily accessible reference materials related to a sexual abuse response. Detainee interviews noted that both persons were aware of the agency’s sexual abuse policy through the frequent use of zero tolerance posters.

(b)(c): The facility meets these provisions. CBP Directive 2130-030 requires all current officers, contractors, and volunteers who may have contact with detainees have been trained on the DHS PREA Standards and receive subsequent refresher training as appropriate dependent on their roles within the agency. This training is provided, and records maintained, via Acadis (online electronic learning center). All training documentation is maintained by the Contracting Officer's Representative for at least five years after course completion for all contractors. Training documentation is maintained by the holding facility for at least five years after course completion by all volunteers. In speaking with the contracted employee, it was noted that this person had received relevant training and was consciously aware of the agency's zero-tolerance policy regarding sexual abuse. Additionally, employees are continually trained on the supervision and monitoring of detainees by way of Acadis, agency emails, and facility musters.

**§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 exceeds this standard. CBP has established a significant number of informative methods to notify detainees of the agency's zero-tolerance policy. During the onsite inspection, the Auditor noted large DHS policy zero-tolerance policy posters displayed on the walls throughout the holding areas. The posters provide information on how to report sexual abuse and/or sexual assault. Additionally, CBP addresses zero-tolerance on its public website, <https://www.cbp.gov/about/care-in-custody>. The Auditor observed a substantial number of age appropriate Zero Tolerance Awareness Posters publicly displayed on the walls throughout the facility. While it was noted that these posters were currently available only in English and Spanish, interviews with YSL SMEs and officers reflected that if detainees spoke a different language, awareness notices could be printed in any of the seventeen languages as noted below, and if necessary, could also be translated by way of the language line to any language needed. CBP has designed age-appropriate posters that provide information and depict cartoon pictures to make juveniles aware of the agency's zero tolerance for sexual abuse. The posters were colorfully designed for detainees of tender age (13 and below), juveniles (14 and above), and adults. Additionally, adjacent nearly almost all sexual abuse awareness posters were language identity posters. These posters contained identifying statements for approximately twenty-six different languages, to include distinct dialects of specific languages, which include Arabic, Farsi, French, Gujarati, Haitian, Hindi, Japanese, Pashto, Portuguese, Punjabi, Romanian, Simplified Chinese, Tagalog, Urdu, and Vietnamese. CBP has also developed educational videos depicting a boy and a girl to encourage compliance with CBP's zero-tolerance policy of sexual abuse and sexual assault. The videos also encourage immediate reporting of actions that can be constituted as sexual abuse and/or sexual assault.

**§115.134 – Specialized training: Investigations.**

- Exceeded Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- 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)(b)(c)(e): The facility meets these provisions. CBP has developed policies to ensure that all detainees taken into custody are provided an assessment for risk of victimization and abusiveness before being placed in any room. These policies and procedures include Memorandum for CBP Policy on Zero Tolerance of Sexual Abuse and Assault, dated March 11, 2015; CBP Directive No 2130-030; CBP TEDS; and Memorandum from the Assistant Commissioner of OFO, with an attachment of CBP Standards to Prevent, Detect, and Respond to Sexual Abuse and Assault in CBP Holding

Facilities, dated August 12, 2014. While interviewing the YSL SMEs and officers, it was noted that whenever operationally feasible, same gender risk assessment interviews are conducted, with a right to privacy being emphasized. During the on-site inspection, the Auditor observed a risk assessment screening. Questions were asked in the detainee's native language and in a private setting to promote confidentiality. This risk assessment allows officers to consider, to the extent that the information is available, (1) any mental, physical, or developmental disabilities; (2) the age of the detainee; (3) the physical build and appearance of the detainee; (4) whether the detainee has previously been incarcerated or detained; (5) the nature of the detainee's criminal history; (6) whether the detainee has any convictions for sex offenses against an adult or child; (7) whether the detainee has self-identified as gay, lesbian, bisexual, transgender, intersex, or gender nonconforming; (8) whether the detainee has self-identified as having previously experienced sexual victimization; (9) and the detainee's own concerns about her physical safety. Interviewed SMEs and officers stated they would only provide information regarding the detainee on a need-to-know basis.

(d): The facility meets this provision. CBP Directive 2130-030 requires officers take reasonable steps to determine whether a detainee may be at a high risk of being sexually abused or of being sexually abusive before placing any detainees together in a holding facility. During SME and officer interviews, it was noted that should a detainee be found at a high risk of sexual victimization or abusiveness, that individual would be placed in a singular hold room to mitigate any identified danger to a detainee or to other detainees. An on-site inspection of the facility demonstrated that the facility had numerous unoccupied hold rooms to accommodate such housing needs.

**§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)(b)(c): The facility meets these provisions. CBP has developed policies to ensure all detainees taken into custody are provided an opportunity to report any allegations of sexual abuse. These policies and directives include: DHS PREA Standards in Focus, 115.132 and 115.151, dated July 11, 2022; CBP Directive 2130-030; Commissioner's Memorandum with attached CBP Policy on Zero Tolerance of Sexual Abuse and Assault, dated March 11, 2015; Memorandum for Privacy and Diversity Office Prevention, Detection, and Response to Sexual Abuse and Assault in CBP Holding Facilities Directive, dated February 2, 2018; Memorandum from the Assistant Commissioner for OFO with attached Standards to Prevent, Detect, and Respond to Sexual Abuse and Assault in CBP Holding Facilities, dated August 12, 2014. CBP has also provided information to CBP staff through messaging via CBP Central CBPnet and through the Privacy and Diversity Officer Quarterly e-Newsletter. CBP has established a public website that includes the Agency's policy regarding zero tolerance of sexual abuse and assault. The website also provides instructions on how to report sexual abuse and/or sexual assault. Agency policy also requires that key information regarding the CBP's Zero-Tolerance Policy is visible or continuously and readily available to detainees. During the on-site inspection, informational posters providing a reporting phone number were observed throughout the facility, in both English and Spanish. The reporting phone number was a direct line to the DHS OIG. In speaking with the YSL SMEs and officers, it was noted that if a detainee wished to utilize the reporting hotline, that person would be escorted to a phone room in order to make calls to report sexual abuse for themselves or on behalf of another person. A test call was made to the reporting hotline to confirm the phone both worked and that the number was valid. During the interviews, all SMEs and officers acknowledge their responsibility to accept any verbal or written report of sexual abuse made to them by a detainee, or by another person on behalf of a detainee. They also acknowledged their willingness to allow a detainee alleging sexual abuse to remain anonymous upon request. Upon receipt of an allegation of sexual abuse, officers confirmed that they would immediately notify their supervisor of the complaint and subsequently document the incident as required by policy.

**§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:**

(a): The facility meets this provision. CBP Directive 2130-030 directs staff that third parties can report sexual abuse and/or sexual assault on behalf of the detainee. Reports can also be made on behalf of the abused detainee by another detainee. Additionally, the agency has established a website (<https://www.cbp.gov/about/care-in-custody>) to allow for third parties to report sexual assault and/or sexual assault to the DHS OIG. During the on-site inspection, informational posters, in both English and Spanish, that contained the DHS OIG's reporting phone number were observed throughout the facility. The HQ PSA Coordinator was interviewed who indicated agency transparency for public information was of the upmost importance. Interviews with YSL SMEs and officers acknowledged their willingness to accept any complaint regarding sexual abuse regardless of how it was received, to include being received by way of a third-party.

**§115.161(a) through (d) – Staff reporting duties.**

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

**Notes:**

(a)(b): The facility meets these provisions. CBP Directive 2130-030, CBP Directive 41735-013B, U.S. Customs and Border Protection Standards of Conduct, dated December 9, 2020, and CBP Policy on Zero Tolerance of Sexual Abuse and Assault mandates all staff to immediately report any knowledge, suspicion, or information of sexual abuse that occurred within the facility. During interviews, officers acknowledged they have an affirmative duty to report all knowledge, suspicion, or information regarding retaliation against detainees or staff for having reported an incident of sexual abuse. They also stated that they must also report any negligence or violation of responsibilities that may have contributed to an incident of sexual abuse or retaliation. CBP Directive 3340-025F further directs staff to report significant incidents to the WATCH, a unified hub that operates 24 hours a day, seven days a week, to assure all significant incidents are reported immediately to all required leadership. CBP has also provided training in Preventing and Addressing Sexual Abuse in CBP Holding Facilities, which addresses the responsibility of reporting sexual abuse and/or sexual assault, to include retaliation. On August 25, 2022, CBP also included in the newsletter, DHS PREA Standards in Focus, the staff reporting duties. A review of employee training records, as well as training curriculum records, reflects that all staff have received initial PREA training, as well as subsequent training where appropriate, which includes acknowledgment of their affirmative duty responsibilities. When interviewed, all officers confirmed their obligation to immediately report any information they might have regarding allegations of sexual abuse. The officers knew of at least one way in which to make a formal report, with most knowing numerous ways, to include reporting mechanisms outside their chain of command.

(c): The facility meets this provision. CBP Directive 2130-030 requires that except as necessary to report the incident, staff shall not reveal any information related to an incident of sexual abuse except as needed to aid the detainee, to protect other detainees or staff, or to make security and management decisions as required under Subpart B of the DHS Standards. The HQ Sexual Abuse and Assault Investigations (SAAI) SME stated YSL had not received any allegations of sexual abuse within the audit time frame. During YSL SME and officer interviews, the concern for confidentiality was stressed, with staff repeatedly indicating that information related to allegations of sexual abuse would only being shared as a function of their official capacities on a need-to-know basis. While on-site, it was further observed that risk screening areas provided detainees some measure of privacy while talking to facility staff.

(d): The facility meets this provision. CBP Directive 2130-030 requires that staff report sexual abuse and/or assault allegations involving alleged victims under the age of 18, or those considered as vulnerable adults under State and local vulnerable persons statutes, to the designated State or local services agency under applicable mandatory reporting laws. In speaking with the SMEs, the local authority that CBP staff would report alleged victimization of persons under the age of 18 or vulnerable adults is the Texas Department of Health and Human Services, Department of Family and Protective Services.

**§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:**

(a): The facility meets this provision. CBP TEDS instructs officers if they have a reasonable belief that a detainee is at a substantial risk of imminent sexual abuse, immediate action must be taken to protect the detainee. In speaking with YSL SMEs and officers, it was noted that at risk detainees would be immediately separated from the general population and placed in a secured environment to ensure their safety. The YSL SME stated that during the last 12 months, the facility has not found any evidence of detainees being found at substantial risk of sexual abuse. As such, YSL did not have any documentation for review. Likewise, no protective actions were required.

**§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)(b)(c)(d): The facility meets these provisions. CBP Directive 2130-030 requires that upon receipt of an allegation that a detainee was sexually abused while confined at another facility, facility staff are to notify the appropriate office of the agency or the administrator of the facility where the alleged sexual assault occurred. Interviews with the YSL SMEs confirmed this notification must be made by the Port Director or designee as soon as possible, but certainly within 72 hours of receipt, and the supervisor must subsequently document having provided that notification. It was also indicated that if YSL was notified by another agency that a sexual abuse and/or assault had occurred at YSL, then YSL staff must begin the investigation and notification process to agency headquarters. A Memorandum from the Acting Assistant Commissioner, OFO, dated August 12, 2014, with the attached Standards to Prevent, Detect, and Respond to Sexual Abuse and Assault in CBP Holding Facilities, was issued to remind the leadership of the documentation and notification process. During the audit time frame, YSL did not receive any allegations that detainees had been sexually abused while confined to another facility.

**§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)(b): The facility meets these provisions. CBP Directive 2130-030 provides detailed and concise information on the steps YSL first responders should take upon learning of an allegation of sexual abuse and/or assault. Additionally, CBP provides a training course through Acadis which is required biennially of all YSL staff. The course provides detailed information of the responsibilities of a first responder and all the steps that should be taken by first responders upon learning of a sexual assault. Both the Directive and the training course educate YSL first responders to immediately separate the victim and abuser, preserve and protect the crime scene until evidence collection is possible, request the victim not take any actions that could destroy physical evidence, and ensure the abuser does not take any actions to destroy evidence. First responders who are not law enforcement are instructed to request the victim not take actions that could destroy evidence and immediately notify YSL officers. In helping to preserve DNA evidence, the persons involved in sexual abuse allegations should not perform actions such as brushing their teeth, washing their bodies, or using the restroom. An interview with the medical contractor who routinely has contact with detainees confirmed that she would immediately inform officers of the allegations, isolate the victim for protection, and assure the crime scene is preserved. During the last 12 months, YSL did not receive any reports of sexual abuse.

**§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 this provision. CBP Directive 2130-030 constitutes CBP’s written procedures for using a coordinated institutional plan and utilizing a multidisciplinary team approach to respond to sexual abuse and/or sexual assault. The Directive coordinates actions amongst first responders, medical and mental health practitioners, investigators, and facility leadership in response to incidents of sexual abuse. This Directive, along with CBP TEDS, works to coordinate the agency, agency components, and facility efforts so that victims of sexual abuse receive adequate support services to protect the health, welfare, security, and safety of any individual in CBP custody. CBP PDO also published an announcement to all staff through CBP Central on February 12, 2018, notifying staff of the Directive constituting CBP’s coordinated institutional plan. The announcement also provided a link for staff to easily access the Directive. In speaking with YSL SMEs and the HQ SAAI SME, it was consistently expressed that the efforts of all persons within the agency are carefully coordinated to achieve the best possible administrative outcome for any person alleging sexual abuse.

(b)(c): The facility meets these provisions. Directive 2130-030 instructs staff that when sexual abuse victims are transferred either between DHS holding facilities or from a DHS facility to a non-DHS facility, the sending facility should, as permitted by law, inform the receiving facility of any sexual abuse incidents and the victim’s potential need for medical or social services, unless the victim declines services. Interviews with SMEs confirmed notifications are made in accordance with the Directive.

**§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:**

(a): The facility meets this provision. CBP Directive 2130 instructs CBP management a requirement to consider whether any CBP employee alleged to have perpetrated sexual abuse 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. Contractors and volunteers suspected of perpetrating sexual abuse are prohibited from contact with detainees. The standard allows the agency to protect detainees from imminent contact with sexual abusers. The YSL SMEs stated during the interviews that any staff member alleged to have perpetrated sexual abuse and/or assault are removed from duties requiring detainee contact pending the outcome of an investigation when the seriousness and plausibility of the allegation make removal appropriate.

**§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:**

(a): The facility meets this provision. CBP Standards of Conduct and TEDS, prohibits retaliation against any person, to include detainees, for having claimed or participated in an investigation regarding sexual abuse. Interviews with YSL SMEs and officers clearly made the Auditor aware they were very familiar with the Standards of Conduct and that any form of retaliation is forbidden against anyone, including detainees, who report, complain, or participate in an investigation.



**§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)(c)(d): The facility meets these provisions. CBP Directive 2130 and Directive 51735-013B, Standards of Conduct, 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 violating CBP's sexual abuse policies. The Standards of Conduct provide notice to the employees that disciplinary action will occur, including up to removal for substantiated allegations of sexual abuse and/or assault. This standard works to ensure agency staff understand the gravity and the criminal nature of engaging in the sexual abuse of detainees. In speaking with the HQ LER SME, stated that CBP has made the consequences of engaging in such behavior exceptionally clear to all staff. She stated that during the onboarding process, new employees are provided not only Standards of Conduct, but also the Table of Penalties for Criminal Offenses, to fully appreciate the consequences of violating agency policy. It was further noted that for staff found to have engaged, or attempted to engage, in sexual abuse of a detainee, the presumptive disciplinary sanction was removal from their position and from Federal service. Additionally, the agency would report such disciplinary findings to any relevant licensing bodies and designated law enforcement officials.

**§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): The facility meets these provisions. CBP Directive 2130-030 and CBP Policy on Zero Tolerance of Sexual Abuse and Assault states that CBP contractors and volunteers may be subject to disciplinary or adverse action up to and including removal from their position or volunteer capacity for substantiated allegations of sexual abuse and/or assault and/or violating CBP's sexual abuse policies. Interviews with the HQ SAAI SME, as well as the HQ OFO SME, indicate that pending an investigation of allegations related to sexual abuse of a detainee, all contractors and volunteers will be removed from all duties requiring detainee contact. Following the conclusion of the investigation, reasonable efforts will be made to report any contractor or volunteer found guilty of sexually abusing detainees to relevant licensing bodies and referred to a law enforcement agency. A contractor training file was reviewed and found they had been trained in the agency's zero-tolerance policy for the sexual abuse of detainees.

**§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 these provisions. CBP Directive 2130-030 requires that when an alleged incident of sexual abuse occurs, detainees should be given timely, unimpeded access to emergency medical treatment and crisis intervention services, including emergency contraception and sexually transmitted infections prophylaxis. The Directive further states that emergency medical treatment services shall be provided to the victim without cost and regardless of whether the victim names the alleged abuser or cooperates with any investigation arising out of the incident. As noted by the YSL SMEs, all victims would receive timely and unimpeded access to emergency medical treatment, as well as crisis intervention services. As noted by the UMC SANE nurse, if medically necessary, emergency contraception and sexually transmitted infections prophylaxis would be provided by the local hospital.

**§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:**

(a): The facility meets this provision. Directive 2130-030 requires that a sexual abuse incident review will be conducted by OFO or USBP at the conclusion of every investigation of sexual abuse and/or assault. In speaking with the HQ PSA Coordinator, the incident would be reviewed by the Incident Review Committee (IRC), which is comprised of three HQ Program Managers. It was further stated that the purpose of a sexual abuse incident review is to understand and address factors that may have contributed to the allegations. As such, any recommendations made by the IRC would be implemented by the Port Director and the Chief. The PSA Coordinator stated there was one incident review conducted based on an allegation raised at YSL, however, the investigating finding was unsubstantiated.

**§115.187 – Data collection.**

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

**Notes:**

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

**ADDITIONAL NOTES**

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

None

**AUDITOR CERTIFICATION:**

I certify that the contents of the report are accurate to the best of my knowledge and no conflict of interest exists with respect to my ability to conduct an audit of the agency under review. I have not included any personally identified information (PII) about any detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.

**(b) (6), (b) (7)(C)** \_\_\_\_\_  
**Auditor's Signature**

\_\_\_\_\_  
**Date**