

# 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>	Houston 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>	2323 S Shepherd Drive, Houston, Texas 77019
<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>	George Bush Intercontinental Airport – IAH		
<b>Physical Address:</b>	2800 N. Terminal Road, Houston, Texas, 77032		
<b>Mailing Address: (if different from above)</b>	(b) (6), (b) (7)(C)		
<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>	Area 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), George Bush Intercontinental Airport – IAH, was conducted July 18, 2023, by (b) (6), (b) (7)(C) (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 audit, the audit also involved a review of CBP’s PREA policies and procedures, agency, and facility-based documents, as well as telephonic interviews with CBP Headquarters (HQ) Subject Matter Experts (SMEs).

This was the second PREA audit for IAH, with the first being conducted on June 11, 2019. The facility is located within IAH Terminal E. At any time, the detainee population may include adult males and females, family units, and unaccompanied children (UC). Detainees may be held at the holding facility 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 day, dependent on flight schedules. As needed, the local law enforcement agency is the Houston Police Department.

At 0500 hours, the Auditor briefly met with the IAH leadership team to inform them of the required audit processes and suggested schedule. Immediately thereafter, the Auditor was directed to a private office to commence interviews with staff from all shifts: (b) (7)(E) . (b) (6), (b) (7)(C) , Houston Field Office, was the point of contact throughout the audit.

At 0805, all areas of IAH were inspected. This included Global Entry, with its primary inspection hall, along with the secondary hold rooms of Baggage and Agriculture, as well as Immigration. If escorted from the primary inspection hall for further interview/processing, (b) (7)(E) (b) (7)(E) . Within each large waiting room, there are single-person bathrooms separated by gender. Detainees have unimpeded access to these bathrooms, which do contain a solid door for privacy. Throughout the facility, there are also multiple occupancy and single occupancy hold rooms, which are separated by gender. These hold rooms may or may not contain a toilet. When available within a hold room, the toilet is concealed behind a wall of approximately three feet to promote privacy. If requested, detainees can also be escorted to a private bathroom area. Shower facilities are available upon request and, if utilized, are monitored by officers of the same gender while affording detainees privacy. Lastly, search rooms, separated by gender, are in each secondary hold area.

Detainees with children, and UC, are held in a separate area conducive to temporarily holding minors. This area is located adjacent to the main Immigration hold room. The front of the Family Room consists of a windowed door, which always remains unlocked, and a rather large wall window to promote clear visibility into the room. This room is in direct view of the officer workstation. It contains a recliner and multiple chairs for sitting. There are games, along with padded mats on the floor for children to play. As well, there are toys, snacks, drinks, and other child appropriate measures. There are children’s posters on the wall, to include age appropriate PREA posters (child, juvenile, and adult age ranges). It should also be noted that these age appropriate PREA posters are frequently displayed throughout the facility, in both English and Spanish.

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Scope of Audit: Prior to the on-site portion of the audit, the Auditor reviewed the HQ and Local Pre-Audit Questionnaires (PAQs), HQ Responsive Documents and Data Requests, local documents, including IAH specific documents, and HQ Participation documents. During the on-site portion of the audit, 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 SMEs and officer interviews, which were executed in a private setting. The Auditor conducted four SME interviews, nine officer interviews, and two detainee interviews. Additionally, the Auditor spoke with Forensic Nursing staff of the area hospital, Memorial Hermann Northeast Hospital, as well as advocacy staff from Just Detention International. The Auditor also conducted test calls to both the Language Line and the Department of Homeland Security (DHS) Office of Inspector General (OIG) Hotline. During the audit time frame, IAH did not receive any allegations of sexual abuse.

An exit briefing 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. Additionally, 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 exit briefing were:

- (b) (6), (b) (7)(C), Deputy Prevention of Sexual Assault Coordinator (DPSA) HQ
- (b) (6), (b) (7)(C), Assistant Port Director
- (b) (6), (b) (7)(C), Chief CBP Officer
- (b) (6), (b) (7)(C), Enforcement Analyst Specialist
- (b) (6), (b) (7)(C), Program Manager
- (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 George Bush Intercontinental Airport - IAH on-site audit was completed on Tuesday, July 18, 2023, with the findings report being submitted in August 2023.

The audit process included a review of all documentation, interviews with agency staff, facility-based staff, and detainees, as well as on-site observations of facility procedures and holding conditions. This process has found IAH to exceed in one (1) DHS Subpart B Standard and to be in compliance with the remaining 24 DHS Subpart B Standards.

**IAH meets 24 standards:** 115.111, 115.113, 115.114, 115.115, 115.116, 115.117, 115.118, 115.121, 115.122, 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, and 115.186

**IAH 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)	



in the waiting rooms, detainees have unimpeded access to these bathrooms, which do contain a solid door for privacy. Throughout the facility, there are also (b) (7)(E), which are separated by gender. These hold rooms may or may not contain a toilet. When available within a hold room, the toilet is concealed behind a wall of approximately three feet to promote privacy. If requested, detainees may also be escorted to a private bathroom area. Shower facilities are available upon request and, if utilized, are monitored by officers of the same gender while affording detainees privacy. Lastly, search rooms, separated by gender, are available for each waiting area.

If there was an influx of detainees, IAH SMEs indicated that officers would be available through overtime, by assignment of additional officers, or a combination of to augment existing officers. The SMEs also indicated that HQ would be notified and could send additional officers if available.

(b)(c): The facility meets the standard provisions. The standard requires IAH 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, was sent out to all Directors, Office of Field Operations 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. While requiring IAH to review the detainee supervision guidelines at least annually, the Directive further requires that review to 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. IAH conducted a review of the detainee supervision guidelines on November 16, 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 IAH 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 the standard provision. The standard requires IAH 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 portion of the audit, several types of hold rooms were observed, with juveniles being held in a separate area conducive to temporarily holding minors. This area is located adjacent to the main Immigration hold room. The front of the Family Room consists of a windowed door, which always remains unlocked, and a rather large wall window to promote clear visibility into the room. It contains a recliner and multiple chairs for sitting. There are games, along with padded mats on the floor for children to play. As well, there are toys, snacks, drinks, and other child appropriate measures. There are children's posters on the wall, to include age appropriate PREA posters (child, juvenile, and adult age ranges). It should also be noted that these age appropriate PREA posters are frequently displayed throughout the facility, in both English and Spanish. They are also given access to toilet facilities.

To ensure the safety of all juveniles while detained, this waiting room is in direct sight of officer workstations. When asked, officers were clearly aware of the agency's need to maintain a safe and positive environment for juveniles. Specifically, when occupied by juveniles, officers state that juveniles are free to move about the area and to play with toys. Officers stated that the holding area is maintained in the least restrictive possible setting. They also stated the juvenile holding area can only hold juveniles and families with juveniles. Otherwise, no adult detainees are allowed in that area.

(b): The facility meets the standard provision. According to IAH 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 that juveniles and accompanying adults were queried as to the nature of their visit to the United States, as well as the nature of their relationship to one another. In weighing their responses, Officers stated that nonverbal cues were often a factor in their considerations. Officers stated that among other points of verification, the appropriate government agencies within countries of origin are contacted to ensure presented documents are legitimately authorized by the persons possessing them. During the on-site portion of the audit, there were not any juveniles being held at the facility. As such, it was not possible to interview any juvenile detainees.

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

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

**Notes:**

(b)(c): The facility meets the standard provisions. CBP TEDS restricts the use of cross-gender strip searches or cross-gender visual body cavity searches except in exigent circumstances, including consideration of officer safety or when performed by medical practitioners. If an opposite gender staff member must perform a strip search (partial body) or be present at a medical examination, it is mandatory that two staff are present. In speaking with IAH SMEs and officers, these requirements were continuously reiterated. As such, interviews with the SME's and the 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 searches in a professional manner appropriate to the gender of the person being searched. During the audit time frame, IAH has not conducted any strip searches (partial body) or body cavity searches. A review of facility logs indicates that all pat-down searches conducted are within standards and policy requirements.

(d): The facility meets the standard 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, IAH SMEs and officers stated that detainees are generally placed in hold rooms by themselves. If ever it were necessary to place more than one detainee in a hold room, said detainees would only be held with other detainees of the same gender. During the on-site inspection, it was noted that some hold rooms contain a toilet, while others do not. When present, toilets were located behind a half wall to promote privacy. If a hold room did not have a toilet and detainees request to use a private toilet room, they are subsequently escorted to a bathroom area by an officer of the same gender and provided privacy. Such detainee bathroom areas are also separated by gender. If staff of the opposite gender enter those hold rooms, policy requires staff to knock and announce their presence before entering. 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 in order to provide as much privacy as possible while still ensuring an overall safe environment. Detainees interviewed stated that they did not use shower facilities. However, they had been allowed to use the toilet in a gender specific area, with no person of the opposite gender ever entering that area.

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(e): The facility meets the standard 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. During detainee interviews, it was noted that pat-down searches were performed by a person of the same gender as the detainee. Both detainees stated that the searches were performed in a professional manner and neither detainee expressed any undue discomfort as a result of said search.

(f): The facility meets the standard 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 that if conducted, all personal searches, as well as the articulable facts leading to those searches, are electronically documented in the electronic system of record. During detainee interviews, it was noted that pat-down searches were performed by a person of the same gender as the detainee. Both detainees stated that the searches were performed in a professional manner and neither detainee expressed any undue discomfort as a result of said search.

**§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 the standard provisions. CBP Directive No. 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 (regardless of the disability; for example, hearing impaired, visually impaired, or those who have intellectual, psychiatric, or speech disabilities). As well, all persons must be able to benefit from, and 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, visually impaired, or those who have intellectual, psychiatric, or speech disabilities) and to ensure their access to CBP's efforts to prevent, detect, and respond to sexual abuse and/or sexual assault. Additionally, agency policy requires that any written materials related to sexual abuse should be provided in formats that ensure effective communication with detainees who may have a disability. During the on-site portion of the audit, sexual abuse awareness posters were posted in English and Spanish. These posters were commonly displayed in three different age-appropriate designs. Phone numbers and web addresses for providers of accommodation services were readily accessible and observed. When asked, SMEs and officers were aware of and understood how to utilize different resources available to them. SMEs and officers stated that when they became aware of a disability, either through detainee disclosure or through direct observation, they did take immediate action to accommodate that disability in order to help promote the most effective means of communication with detainees who may have disabilities. For example, it was noted that by way of video communications, officers have the ability to provide sign language interpretation services for those in need. During detainee interviews, neither person acknowledged having any disability. While both persons were limited in English proficiency, officers were still able to effectively communicate with them in their native language. As such, both detainees stated they were able to fully understand and appreciate the risk screening process.

(c): The facility meets the standard 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. In speaking with a SMEs and officers, they expressed caution against ever using another detainee to interpret allegations of sexual abuse. A review of documentation reflects that during the audit time frame, IAH has not detained any individuals who were deaf, blind, or cognitively impaired and subsequently required the use of interpretation services.

**§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 directs the Office of Human Resources to develop policy and procedures to ensure that 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 from sexual abuse and/or sexual assault when hiring or promoting individuals within the agency. While

interviewing the HQ HRM/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 portion of the audit, twelve staff files were reviewed to ensure that suitability measures were employed during the hiring and promotion process of staff. The review concluded IAH has followed all agency requirements.

(b): The facility meets the standard provision. The 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 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 individuals are new hires 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 the standard 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 document summarizing the results of a background investigations, as well as the use of questions as 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 were explained. The Auditor selected a total twelve employees consisting of a combination of SMEs and officers assigned to the IAH and submitted the names to HQ OPR through the PSA Coordinator. A review of these background checks revealed that the agency complies with requirements for pre-hire and five-year background checks.

(e): The facility meets the standard provision. The HQ HRM/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 of 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 Offenses and Penalties for violations of criminal law.

(f): The facility meets the standard 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 IAH SMEs stated that the facility has not made any substantial modifications.

(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 the standard 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 IAH 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 IAH would transport any person in need of such a forensic medical exam to the Memorial Hermann Northeast Hospital, which is a Level One Trauma Facility with Sexual Assault Forensic Examiners (SAFE) staff continuously available. In speaking with Memorial Hermann Northeast Hospital SAFE staff, it was noted Memorial Hermann Northeast Hospital SAFE staff do follow a uniform evidence protocol. The SAFE staff also stated the hospital offers rape crisis victim advocates to all persons who undergo a forensic exam. The IAH 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 hospital while held at the IAH.

(e): The facility meets the standard provision. IAH SMEs state that a memorandum of understanding (MOU) exists between the IAH and the Houston Police Department (HPD), which has jurisdiction for conducting investigations of allegations of sexual abuse made by individuals in custody at IAH. Per IAH SMEs, the MOU requests that the HPD conduct all investigations in accordance with Section 115.121(a) or 6 C.F.R., Part 115. It should be noted, however, that per the HQ OPR/Sexual Abuse and Assault Investigations Coordinator (SAAI) SME, during the audit time frame, IAH 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 the standard 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 (CBP Watch) and the Joint Intake Center (JIC). CBP Directive No. 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 that there are multiple layers of agency oversight, as well as policies in place to ensure incidents are immediately reported. The IAH SMEs stated that if an allegation involved potentially criminal behavior, it would be immediately reported to the Houston Police Department 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 (CBP Watch), and the Joint Intake Center (JIC). Local SMEs stated that all allegations of sexual abuse are reported to JIC, OPR, and the PSA Coordinator. As well, said staff noted that additional reports would be made depending on the guidance then received from these command positions. The PSA Coordinator stated that all allegations of detainee sexual abuse are immediately reported. The PSA Coordinator further noted that the IAH has not received any allegations of sexual abuse allegedly occurring within the audit time frame.

**§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. CBP efforts to prevent, detect, and respond to sexual abuse and assault in CBP holding facilities are continually strengthened by agency policies, memorandums, job aids, and

messaging to clarify 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 portion of the audit, employee training records were reviewed to ensure the completion of biennial PREA training requirements. In speaking with officers, all possessed levels of knowledge regarding the agency's zero-tolerance polices consistent with purposeful measures of educational training. A couple of the officers who were interviewed produced a pocket card that contained easily accessible reference materials related to a sexual abuse response.

(b)(c): The facility meets the standard 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. Previously, as noted in officer interviews, employee training on the agency's policy to prevent, detect, and respond to allegations of sexual abuse and sexual harassment was provided via the PALMS system, which was an online learning portal. Now, however, training is provided, and records maintained, via Acadis (another online electronic learning center). In this new learning portal, employees continue to receive subsequent trainings regarding the agency zero-tolerance policy. Employees are also continually trained on the supervision and monitoring of detainees, to include the agency's zero-tolerance policy, by way of Acadis, agency emails, and facility musters. Per agency policy, all training documentation is maintained by the Contracting Officer's Representative for at least five years after course completion for all contractors. As well, training documentation is maintained by the holding facility for at least five years after course completion by all volunteers. However, it should be noted that per IAH SMEs, there are not any contractors or volunteers assigned to work within IAH.

**§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 the 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 zero-tolerance policy posters displayed on the walls throughout the holding areas. These 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 IAH 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. During detainee interviews, both persons stated that officers had asked them if they felt comfortable and safe in the hold room. They were further advised that if they did not feel comfortable, to tell an officer of their concerns. They also stated that they had been made aware of the agency's zero-tolerance policy via the informational posters displayed throughout the hold room. These posters were displayed in their native language.

**§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 the standard 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 holding 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 IAH 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 portion of the audit, the Auditor observed several risk assessment screenings. It was noted that questions would be asked in the detainee's native language and in a private setting to promote confidentiality. This risk assessment would allow 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 his or her physical safety. Interviewed SMEs and officers stated that they would only provide information regarding the detainee to other staff on a need-to-know basis.

(d): The facility meets the standard 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 the detainee or to other detainees. An on-site inspection of the facility demonstrated that the facility had sufficient 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 the standard 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 No. 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 Central: Tuesday, February 19, 2019; CBP Central: Monday, February 12, 2018; Privacy and Diversity Officer Quarterly e-Newsletter, dated January-March, 2018. CBP has established a public website that includes the Agency's policy regarding Zero Tolerance of Sexual Abuse and Assault. The website provides instructions on how to report sexual abuse and/or sexual assault. The agency policy also requires that key information regarding CBP's Zero-Tolerance Policy is visible or continuously and readily available to detainees. During the on-site portion of the audit, informational posters providing a reporting phone number and websites 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 IAH 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. The room containing the phone for such calls was in a private setting. This phone is available for detainees to make a report of 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 number was valid. During the interviews, all officers acknowledged 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. Detainees stated that they had been made aware of the agency's zero-tolerance policy directly by staff, as well as the informational posters displayed throughout the hold room. These posters were displayed in their native language. Detainees were instructed that if they felt unsafe at any time, to speak with an officer.

**§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. 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 directly to the Office of Inspector General (OIG). During the on-site portion of the audit, informational posters, in both English and Spanish, that contained the reporting phone number to OIG were observed throughout the facility. In speaking with the HQ PSA Coordinator, agency transparency for public information was stressed. All officers interviewed stated that they would accept any complaint alleging sexual abuse or sexual harassment regardless of how they became aware of it. As well, local SMEs also stated that third party complaints would be processed and reporting up the agency to the same extent that any other claim of sexual abuse or sexual harassment would be processed.

**§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 the standard provisions. CBP Directive 2130-030 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. Additionally, staff 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. Staff also have an affirmative duty to 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 and seven days a week, to assure all significant incidents are reported immediately to all required leadership. CBP Directive No51735-013B, U.S. Customs and Border Protection Standards of Conduct, December 9, 2020, also informs staff that they have a duty to report any sexual assault and/or sexual abuse, or any form of retaliation against another staff member or detainee. CBP has 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 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. All 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. All officers and SMEs interviewed were aware of their duty to immediately report any information regarding sexual abuse or sexual harassment of a detainee. Both officers and local SMEs were aware that these reports were mandatory. However, they could be made anonymously or even outside of the normal chain of command.

(c): The facility meets the standard 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 necessary 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. In speaking with the HQ SAAI SME, it was noted that IAH had not received any allegations of sexual abuse. Nonetheless, during SME and officer interviews, the concern for confidentiality was stressed, with staff repeatedly indicating that information related to allegations of sexual abuse would only be 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 the standard 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 to whom CBP staff would report alleged victimization of persons under the age of 18 or of 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:**

The facility meets the standard. 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 IAH SMEs and officers, they stated the detainee would be held separately from others to ensure the safety of the individual. As noted by an SME, during the audit time frame, IAH did not find any evidence that any detainees assigned to the facility were at substantial risk of sexual abuse. As such, IAH 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 the standard 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 IAH 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 document having provided the notification. It was also indicated that if IAH was notified by another agency that a sexual abuse and/or assault had occurred at IAH, then staff must begin the investigation and notification process. 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 12-month audit time frame, the facility 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 the standard provisions. CBP Directive 2130-030 provides detailed and concise information on the steps IAH first responders should take upon learning of an allegation of sexual abuse and/or assault. Additionally, CBP provides a training course through Acadis (online training portal) which is required biennially of all IAH staff. The course provides detailed information of the responsibilities of a first responder regarding all steps to be taken by first responders upon learning of a sexual assault. Both the Directive and the training course educate IAH 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 officers. During interviews with IAH SMEs and officers, it was noted that after the victim was isolated, they would need to help preserve DNA evidence. This would be done by asking the victim not to do anything that would destroy the evidence. For example, they should not brush their teeth, wash their bodies, or use the restroom. It should be noted that during the audit time frame, IAH did not receive any allegations that detainees had been sexually abused. As such, there is no relevant documentation for review.

**§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 constitutes CBP's written requirement 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, work to coordinate 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 IAH 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 the standard 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 the incident and the victim's potential need for medical or social services, unless the victim declines services. Interview with the IAH 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:**

The facility meets the standard. CBP Directive 2130 instructs CBP management of 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 shall be prohibited from contact with detainees. In speaking with IAH SMEs, it was continually noted that any staff member alleged to have perpetrated sexual abuse would be 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:**

The facility meets the standard. CBP Directive 2130-030; CBP National Standards on TEDS; Memorandum for Office of Field Operations Standards to Prevent, Detect, and Respond to Sexual Abuse and Assault in CBP Holding Facilities, dated August 12, 2014; Memorandum for All CBP Employees CBP Policy on Zero Tolerance of Sexual Abuse and Assault, dated March 11, 2015, prohibits retaliation against any person, to include detainees, for having claimed or participated in an investigation regarding sexual abuse. In speaking with IAH SMEs and officers, it was noted that retaliation against a detainee for the detainee reporting, complaining about, or participating in an investigation about sexual abuse allegations is strictly forbidden.

**§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 the standard 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. If allegations of sexual abuse and/or assault are substantiated against any employee, not only will that employee be removed from federal service, but that individual will also be prohibited from obtaining any future federal employment. This standard works to ensure agency staff understand the gravity and the criminal nature of engaging in sexual abuse of detainees. In speaking with the HQ LER SME, it was noted that CBP has made the consequences of engaging in such behavior exceptionally clear. Specifically, during the onboarding process, new employees are given the Table of Offenses and Penalties 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 the standard 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 referral to a law enforcement agency. However, it should be noted the facility has not used any contractors or volunteers during the previous 12 months.

**§115.182(a) and (b) – Access to emergency medical services.**

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

**Notes:**

(a)(b): The facility meets the standard provisions. 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 IAH SMEs, all victims would receive the required access to both emergency medical treatment and crisis intervention services.

**§115.186(a) – Sexual abuse incident reviews.**

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

**Notes:**

The facility meets the standard. 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, 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. Per the HQ OFO, sexual abuse incidents reviews are conducted



on all substantiated and unsubstantiated allegations. If changes are needed, recommendations are made and implemented to help prevent future allegations. Any recommendations made by the IRC would be implemented by the Port Director and the Chief. Upon completion, sexual abuse incident review reports are sent to the HQ PSA Coordinator for review. However, as noted by the HQ PSA Coordinator, as well as local SMEs, the IAH has not received any sexual abuse complaints during the audit time frame. As such, there is not any relevant documentation for review-  
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**§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**

September 18, 2023  
**Date**