

# 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, TX 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>	U.S. Border Patrol
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## SECTOR OR FIELD OFFICE

<b>Name of Sector or Field Office:</b>	Portal Station
<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>	500 2nd Avenue West, Portal ND 58772
<b>Mailing Address:</b> <i>(if different from above)</i>	

## SHORT-TERM HOLDING FACILITY BEING AUDITED

<b>Information About the Facility</b>			
<b>Name of Facility:</b>	Portal Station		
<b>Physical Address:</b>	500 2nd Avenue West, Portal, ND 58772		
<b>Mailing Address:</b> <i>(if different from above)</i>			
<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>	Patrol Agent in Charge (PAIC)
<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 Customs and Border Protection (CBP) U.S. Border Patrol (USBP) Portal Station (PS) was conducted on June 6, 2023, by (b) (6), (b) (7)(C), a Certified PREA Auditor, contracted through Creative Corrections, LLC., of Beaumont, Texas. PS's detention time varies depending on several factors, for example, apprehension distance from the Portal Station, the need to hold detainees in a long-term holding facility overnight, coordination with Enforcement and Removal Operations (ERO), Grand Forks, North Dakota and/or other stations to assist with transportation.

The purpose of the audit was to determine compliance with Subpart B of the Department of Homeland Security (DHS) PREA Standards. The on-site audit followed the Auditor's electronic review of CBP's PREA policies and procedures and telephonic interviews with CBP Headquarters (HQ) Subject Matter Experts (SMEs). The Auditor thoroughly reviewed relevant policies, procedures, and documents related to PS. Additionally, the Auditor conducted interviews with randomly selected Subject Matter Experts and agents and a random records review for training records and background information. The Auditor examined 16 training records and four background checks. The audit also consisted of reviewing partial body search and visual body cavity search log books (electronic). PS did not perform any partial body or body cavity searches, therefore, there were no logs to review. Additionally, PS has not had any sexual abuse and/or assault allegations reported during the 12-month audit period.

The Point of Contact for PS was (b) (6), (b) (7)(C), Supervisory Border Patrol Agent (SBPA). PS (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) (6), (b) (7)(C) greeted the Auditor upon arrival, at which time the Auditor discussed the agenda with him. Immediately following the entry introductions, the Auditor was provided a private conference room. (b) (7)(E)

(b) (6), (b) (7)(C) (b) (7)(E) interviews were conducted with agents (b) (7)(E)

(b) (7)(E)

At approximately 0830 hours, the Auditor was provided a tour of PS by the (b) (6), (b) (7)(C), which followed the path a detainee would take upon arriving at the facility, processing, and placement in holding. The layout is (b) (7)(E)

(b) (7)(E)

(b) (7)(E)

(b) (7)(E)

There were no detainees at the time of the onsite audit. The Auditor was shown the process of what the intake would entail if a detainee were detained. Detainee processing begins shortly after arrival into the sallyport. (b) (7)(E)

(b) (7)(E)

(b) (7)(E) to the agent intake desk when entering the facility's intake area. Detainees are privately asked questions regarding their own views and concerns of their safety while outside, prior to entry into the holding area. There is a secured public entrance which leads to an administrative area and staff office area. Entry into the secure holding area is gained (b) (7)(E)

There is a room (b) (7)(E) where the (b) (7)(E) are located. The Auditor reviewed all

(b) (7)(E)

PS is a short-term facility, therefore, there are no showering areas for detainees. After processing, the detainee is either transferred; released; or otherwise removed from CBP custody. If a detainee is transferred to a local county jail, this is likely due to pending criminal prosecutions or warrants. However, the local SME stated detainees would at times, be transferred to the Burke County Jail awaiting transport to a long-term detention facility or ERO.

The PS holding facility (b) (7)(E) located adjacent to the Portal Port of Entry (POE) on the Canadian border. The facility consists (b) (7)(E) a duty office, an evidence room, and a property room. The hold rooms were clean, brightly lit, provided seating space, and a working toilet. The hold rooms are in the direct line of sight of (b) (7)(E). Additionally, each hold room has a panic button that a detainee could use to alert a supervisor on duty. The Auditor tested the panic button while onsite which was operational. The hold rooms had displays of posters in English and Spanish. The posters titled "Keep Detention Safe" informs detainees to speak up, report privately, be safe, and get help. The posters provide the methods in which a detainee can report by talking to a CBP official or calling the Department of Homeland Security (DHS) Office of Inspector General (OIG). There were also zero tolerance posters displayed for juveniles. The posters are simplistic, colorful, in plain language, and provides diagrams for children to know what is considered an area on their body which should not be touched. It further explains how to report an incident. These posters displayed in every hold room. The Auditor also observed PREA Audit Notices posted in various areas of the facility in both English and Spanish for staff and detainees.

(b) (7)(E) is a duty office that is equipped with (b) (7)(E) of all hold rooms and the processing area. Each hold room (b) (7)(E) in the Duty Office, Patrol Agent in Charge's Office, and the Mission Support Office, with privacy half wall near the toilet areas. The hold rooms are multi-purpose rooms which can hold juveniles, males, and females who are held separately. The hold rooms are labeled and addresses each category of detainees being held. If a family unit arrives, the facility ensures they are kept together and make sure accommodations are made. PS has equipped each hold room with a panic button labeled in English and Spanish if a detainee needs immediate assistance.

Only BP agents have direct contact with detainees. There are no contractors or volunteers. The local SME stated since they do not have female agents at the facility, if a situation when a female is needed to conduct a search, a female officer from the nearby Office of Field Operations (OFO) - Portal Port of Entry (POE) will walk over and conduct the search.

Scope of the Audit: Prior to the on-site audit, the Auditor was able to review the HQ and Local Pre-Audit Questionnaires (PAQs), the HQ Responsive Documents and Data Requests, local documents, including the PS specific documents, HQ Participation documents, and the Trinity Health Kenmore Hospital and the Trinity Health Hospital websites. The Auditor conducted telephonic interviews with the HQ SMEs and spoke directly with the local SBPA responsible for completing the local PAQ. The Auditor also spoke with and interviewed the nurse in the emergency room at the Trinity Health Kenmore Hospital in Kenmare, North Dakota. The nurse was able to confirm they would provide a Sexual Assault Nurse Examiner (SANE) to any detainee alleging sexual abuse/assault. Victims would be further transferred to Trinity Health in Minot, North Dakota for additional care. The service is provided free of charge to the detainees and operates 24 hours a day for all forensic medical examinations. Detainees can obtain advocacy services during a forensic medical examination. The Auditor utilized a telephone line to access the Office of Inspector General (OIG) to test the outside entity for reporting sexual abuse by detainees. There was no private room to make phone calls, however, the local SME stated the detainees are able to use the phone at the agents processing intake station and are provided the privacy needed.

As part of the on-site audit, the Auditor conducted interviews with (b) (7)(E) agents. One SME and five agents were interviewed. The selection of interviewees was carried out randomly, taking into account the facility's size and staff availability. However, due to the absence of detainees, the Auditor was unable to conduct any interviews with them.

At approximately 1500 hours, an exit briefing for the Prison Rape Elimination Act (PREA) was organized, led by Certified PREA Auditor (b) (6), (b) (7)(C) from Creative Corrections.

The attendees of the briefing included:

- (b) (6), (b) (7)(C) Supervisory Border Patrol Agent (SBPA), PS
- (b) (6), (b) (7)(C), Agency-wide Prevention of Sexual Assault (PSA) Coordinator via TEAMS
- (b) (6), (b) (7)(C), National PREA Coordinator via TEAMS
- (b) (6), (b) (7)(C), National PREA Coordinator via TEAMS
- (b) (6), (b) (7)(C), Special Operations Supervisor (SOS) PS via TEAMS
- (b) (6), (b) (7)(C), Program Manager, Creative Corrections, LLC

During the exit meeting, the Auditor discussed the observations made during the on-site audit. The Auditor provided preliminary findings of the audit and did not have any deficiencies to report, however, the auditor stated that a final determination would be made after a complete review of the interviews, and standard requirements.

**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 Portal Station on-site audit was completed on Tuesday, June 6, 2023, and the findings report was submitted in July 2023.

PS met 25 standards: 115.111; 115.113; 115.114; 115.115; 115.116; 115.117; 115.118; 115.121; 115.122; 115.131; 115.132; 115.141; 115.151; 115.154; 115.162; 115.163; 115.164; 115.165; 115.166; 115.167; 115.176; 115.177; 115.182; 115.186 and 115.141.

<b>SUMMARY OF AUDIT FINDINGS</b>	
Number of standards exceeded: 0	
Number of standards met: 25	
Number of standards not met: 0	
<b>OVERALL DETERMINATION</b>	
<input type="checkbox"/> Exceeds Standards (Substantially Exceeds Requirements of Standards)	<input checked="" type="checkbox"/> Low Risk
<input checked="" type="checkbox"/> Meets Standards (Substantial Compliance; Complies in All Material Ways with the Standards for the Relevant Review Period)	<input type="checkbox"/> Not Low Risk
<input type="checkbox"/> Does Not Meet Standards (Requires Corrective Action)	

## PROVISIONS

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

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

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

#### Notes:

(a): The facility meets the standard provision. CBP Directive 2130-030 – Prevention, Detection and Response to Sexual Abuse and/or Assault in CBP Holding Facilities (dated 1/19/2018 and a review date of 1/19/2021), Commissioners Memorandum dated July 15, 2014, Implementation of the Standards to Prevent, Detect, and Respond to Sexual Abuse and Assault in Holding Facilities /Prison Rape Elimination Act (PREA); the Commissioner's Memorandum dated March 11, 2015; CBP's Policy on Zero-Tolerance of Sexual Abuse and Assault; Acting Commissioner's memorandum dated January 19, 2018, Standards to Prevent, Detect, and Respond to Sexual Abuse and Assault in CBP Holding Facilities; Chief USBP memorandum dated October 8, 2015, Implementation of the CBP National Standards on Transport, Escort, Detention and Search (TEDS); and Chief USBP memorandum dated August 13, 2014, Implementation of the Standards to Prevent, Detect, and Respond to Sexual Abuse and Assault in CBP Holding Facilities clearly outline the duty of all CBP staff members to prevent, detect and respond to all allegations or observations of sexual abuse. 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 Policy of Sexual Abuse and Assault through payroll notice statements and CBP Central. Zero tolerance of sexual abuse and assault posters are positioned in the processing area and the multi-purpose hold rooms in both English and Spanish as well as "Report Sexual Assault" in seven different languages. If the detainee speaks a language other than English or Spanish, agents can use several CBP language resources available to its employees to include an over-the-phone language interpretation service available 24 hours a day seven days a week. In addition to English and Spanish, CBP has PREA posters for adults translated into 12 other languages and for children translated into 15 other languages for posting as needed. CBP's translated PREA posters may be accessed by the agents at CBP's internal website if a specific language is needed based on the current detainee population. Agents can also access their language resources. If the detainee speaks one of these languages, translated material is obtained for them. Regular notifications regarding the mandatory training are disseminated to agents. The mandatory training is accessible through the CBP Acadis online training portal. The Acting HQ Privacy and Diversity Office (PDO)/Prevention Sexual Assault Coordinator (PSA) SME stated there is sufficient time to provide guidance to the facilities on the agency's zero- tolerance policy. The local SME and the agents stated they understand the zero-tolerance policy, the PREA standards and reporting documents. The agency has implemented policies and procedures to ensure the CBP PREA standards are communicated effectively to the public, staff members, and detainees.

### §115.113(a) through (c) – Detainee supervision and monitoring.

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

#### Notes:

(a): The facility meets the standard provision. The standard requires that each facility maintain adequate levels of detainee supervision through appropriate staff levels and (b) (7)(E) to protect detainees against sexual abuse. CBP National Standards on Transport, Escort, Detention, and Search (TEDS) dated October 15, 2015 requires PS agents to diligently supervise hold rooms when detainees are present. During the onsite visit, the Auditor observed that all hold rooms are positioned within the direct line of sight of agents stationed at (b) (7)(E) processing station.

Each hold room has doors with a window and on both the right and left sides of the processing station allowing agents to supervise detainees. The Auditor observed the unoccupied hold rooms from within the rooms as well as from the processing station. This setup enables agents to visually monitor detainees in the hold rooms, while the detainees themselves have a clear view of the agents. The Auditor verified that both the agents in the processing area and the (b) (7)(E) provide supervision of detainees by maintaining visibility through the hold room windows. In each hold room, there is a layout that includes seating arrangements and a partial privacy wall positioned at the rear section for toilet usage.

(b)(c): The facility meets the standard provisions. CBP Directive 2130-030; Chief USBP memorandum dated October 8, 2015, Implementation of the CBP National Standards on TEDS; Chief USBP memorandum dated August 13, 2014, Implementation of the Standards to Prevent, Detect, and Respond to Sexual Abuse and Assault in CBP Holding Facilities; and Chief USBP memorandum dated February 7, 2020, Review of Comprehensive Detainee Supervision Guidelines requires the U.S. Border Patrol to develop and document comprehensive detainee supervision guidelines to determine and meet the detainee supervision needs which has been accomplished through its National Standards on TEDS. The Directive further states, the detainee supervision guidelines, and its application at the PS is to be reviewed at least annually considering the physical layout, composition of detainees, the prevalence of substantiated and unsubstantiated instances of sexual abuse, findings and recommendations of incident reviews, and any other relevant factors. The Directive further requires the results of the annual review are to be forwarded to the HQ PSA Coordinator. The local SME confirmed they re-evaluate supervision strategies on a regular basis, especially when there is an influx of detainees. They report when detainees are being held/processed in the PS at least (b)(7)(E) agents are assigned to processing. If PS has a staffing shortage while caring for detainees, they will request personnel from the OFO Portal Point of Entry (POE) located 75 yards south of the Border Patrol Station or request assistance from the Burke County Sheriff's Office to assist with detainee supervision. Detainees would be transported to a nearby long-term holding facility until staffing numbers allowed for the detainees to be transferred to another Border Patrol Station or Immigration and Customs Enforcement (ICE) Enforcement Removal Operations (ERO). The Auditor reviewed the annual review of detainee supervision guidelines which was conducted on December 20, 2022, by the Acting Patrol Agent in Charge, Acting Deputy Patrol Agent in Charge, and Supervisory Border Patrol Agent, at Portal Border Patrol Station. The assessment included all areas as required by the Standard and TEDS. The facility maintains sufficient supervision of detainees, appropriate staffing levels, and (b) (7)(E), to protect detainees against sexual abuse.

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

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

**Notes:**

(a): The facility meets the standard provision. CBP National Standards on TEDS (October, 2015) and Chief USBP memorandum dated August 13, 2014, Implementation of the Standards to Prevent, Detect, and Respond to Sexual Abuse and Assault in CBP Holding Facilities requires juveniles be treated at all times in their best interest and all guidelines for Special Populations be taken into consideration and place each juvenile in the least restrictive setting appropriate to their age and special needs, provided the setting is consistent with the need to ensure the safety and security of the detainee and that of others. Local SME and agents report all juveniles who are a part of family units or identified as UC are held in the least restrictive setting as possible. According to their statement, juveniles are accommodated together with their families. In cases where there is insufficient space in the hold rooms, they are seated in (b) (7)(E), under the direct supervision of agents. All agents interviewed state when juveniles are brought into the PS, they are placed in a hold room with direct observation and (b) (7)(E). The facility reported they have not detained juveniles during the 12-month audit period. During the on-site audit, there were no detainees being held, therefore, no interviews were conducted and no direct observations were made.

(b): The facility meets the standard provision. CBP TEDS requires, Unaccompanied Children (UC) are to be held separately from adult detainees. The local SME and agents confirm UCs are kept apart from adults and are further

separated by gender. To minimize their proximity to adult detainees, UCs undergo immediate intake processing. Local SME and agent interviews confirm juveniles are immediately separated from accompanying adults unless the relationship has been properly vetted and determined to be appropriate prior to holding. The interviews with the local SME and agents confirmed that a thorough vetting process is in place, which includes agency and State Department database searches, separate interviews with both the minor and the accompanying adult, and examination of accompanying documents. While no juveniles or family units were present during the audit, the interviews with the local SME and agents verified the adherence to the established process, aligning with the standard requirements.

**§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 details the type and conditions under which searches can be performed to ensure the safety of agents, civilians, and detainees. It prohibits cross-gender partial body searches and cross-gender visual body cavity searches, except in exigent circumstances including consideration of officer safety, or when performed by medical practitioners. If performed, the policy requires strip/body cavity searches be recorded in the electronic system of record. CBP TEDS details that agents must not conduct visual body cavity searches of juveniles and are to refer all body cavity searches of juveniles to a medical practitioner. Interviews with the local SME and agents report only medical staff can conduct a strip or visual body cavity search of a juvenile. The local SME and agents report body cavity searches are not allowed at the PS. When asked who would conduct cross-gender searches, the local SME and agents reported the person would have to be the same identified gender as the detainee when operationally feasible. They stated that if a cross-gender was required, they would request assistance from the officers at the Portal POE.

(d): The facility meets the standard provision. CBP TEDS specifies the requirements of enabling detainees to shower (where showers are available), perform bodily functions, and change clothing without being viewed by staff of the opposite gender, except in exigent circumstances or when such viewing is incidental to routine hold room checks. Such viewing may also be appropriate in connection with a medical examination or under medical supervision. The local SME and all agents interviewed report the facility does not have shower facilities due to the short detention time at the facility. Agents state detainees can use the toilet without staff of the opposite gender viewing them. The Auditor reviewed [REDACTED] CBP TEDS requires all agents of the opposite gender to announce their presence when entering an area where detainees are likely to be showering, performing bodily functions, or changing clothing, except in exigent circumstances or when such viewing is incidental to routine hold room checks. Interviews with local SME and agents indicated they knock on the door to announce themselves.

(e): The facility meets the standard provision. CBP TEDS prohibits staff from searching or physically examining a detainee for the sole purpose of determining the detainee's gender. If the detainee's gender is unknown, CBP TEDS states agents will ask the detainee their gender or gender identity. If the detainee declines to state their gender, the gender will be recorded in the appropriate electronic system(s) of record as unknown. A memorandum from USBP Deputy Chief, dated September 17, 2020, and January 17, 2023, titled: Reminder on Searching Transgender, Intersex and Gender Non-Conforming Individuals was sent out for all Chief Patrol Agents and All Directorate Chiefs to pass on to all staff during muster. The memorandums direct border agents to not search or physically examine an individual for the sole purpose of determining an individual's gender. Agents at the facility report they do not search detainees solely for the purpose of determining gender, however they would search the detainee based on the gender they declare.

(f): The facility meets the standard provision. CBP TEDS directs staff to conduct searches in a professional, thorough, and a reasonable manner consistent with the type of search required and that a search must be of the same gender, gender identity, or declared gender when operationally feasible. A memorandum from USBP Deputy Chief, dated September 17, 2020, and January 17, 2023, titled: Reminder on Searching Transgender, Intersex and Gender Non-Conforming Individuals was sent out for all Chief Patrol Agents and All Directorate Chiefs to pass on to all staff during muster. There are no female agents at PS. The agents who were interviewed stated that they do not search opposite

gender detainees, unless in exigent circumstances. The agents effectively described how they would carry out a cross-gender pat-down search in accordance with the training they received and within the established guidelines. The agents further stated they have not encountered a situation where they needed to perform a cross gender search. The agents described how (b) (7)(E) in a pat-down search. The agents also stated if a female detainee is held at PS, and there is a need to search her, she is searched by a Portal POE female officer who is located adjacent to PS. Interviews with the local SME and agents reported all had been trained in how to conduct pat searches, including cross gender searches.

**§115.116(a) through (c) – Accommodating detainees with disabilities and detainees who are limited English proficient.**

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

**Notes:**

(a): The facility meets the standard provision. CBP Directive 2130-030 requires staff in holding facilities to provide reasonable accommodations to detainees who are hearing impaired, blind, or visually impaired, or who have intellectual or mental health disabilities. Directive 2130-033, Nondiscrimination for Individuals with Disabilities in CBP-Conducted Services, Programs, and Activities (Non-Employment), with an effective date of July 8, 2021; which also includes a job aid providing guidance to staff on effective communication with individuals with disabilities. The job aid further defines several types of disabilities and examples on how to address those disabilities; Directive 2130-031, Roles and Responsibilities of U. S. Customs and Border Protection and Personnel Regarding Provision of Language Access, provide information and guidance to all CBP staff. Local SME and agent interviews confirm the various steps they take to provide accommodations to detainees with disabilities which included reading PREA notices to visually impaired, providing written material to the deaf, and speak in basic plain language to those with intellectual or mental health disabilities.

(b): The facility meets the standard provision. CBP Directive 2130-030 requires all holding facilities to provide effective, accurate and impartial in-person or telephonic interpretation services to detainees who are Limited English Proficient (LEP). All PREA posters are posted in both English and Spanish, but also provide direction in commonly spoken languages. The SBPA created a reference guide for agents in the processing center to know what to do when they encounter someone who is LEP. There is also a poster located near the telephones at the processing station that assists detainees in letting agents know which language they speak. CBP provides agents with a mobile application for their CBP-issued phones, enabling them to interpret any language while in the field and during processing. The local SME and agents stated they utilize the language line for interpretation purposes.

(c): The facility meets the standard provision. CBP Directive 2130-030 directs other detainees are not to be utilized as interpreters when a detainee has alleged sexual abuse or has been found to be sexually abused. CBP provides its agents with a mobile application for their CBP-issued phones, enabling them to translate any language in the field. During processing, there is a number to call for them to use a phone-based translator. The agents stated they would not utilize other detainees for interpretation especially in cases of sexual abuse and/or assault.

**§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 mandates that the Office of Human Resources Management (HRM) oversees compliance with the hiring, promotion, and disciplinary requirements outlined in the standard provision. The directive specifically mandates the implementation of policies and procedures to prevent the hiring of contractors with a history of sexual abuse. The HQ Human Resource Management (HRM)/Hiring Center SME affirmed the compliance during the interviews. As part of the hiring process, candidates are required to respond to several important questions. The questions are to assess their background regarding sexual abuse and related criminal activities. The inquiries include whether the individual has ever been involved in sexual abuse within prisons, jails,



holding facilities, community confinement facilities, juvenile facilities, or any other type of institution as defined by 42 U.S.C. 1997. Additionally, candidates are asked if they have been convicted of engaging or attempting to engage in sexual activity through force, explicit or implicit threats, or coercion. Another question addresses convictions related to engaging in sexual activity without consent or with someone incapable of giving consent. Candidates are asked if they have ever faced civil or administrative adjudication for the activities listed above. These questions play an important role in ensuring that individuals with a history of committing sexual abuse or related misconduct are not hired for positions within the agency. Interviews with the HQ Office of Professional Responsibility (OPR) and the Privacy Security Division (PSD) SMEs confirmed that the agency conducts suitability determinations and screen out anyone who has engaged in any of the sexual abused conduct by using the FBI and NCIC checks.

(b): The facility meets the standard provision. According to the interview with the HQ HRM/Hiring Center SME, it was confirmed that new employees and those seeking promotion are required to complete an application and to respond whether they have any prior instances of sexual misconduct. She also stated employees have an ongoing obligation to report any future incidents of such misconduct. The HQ Hiring Center SME further explained to the auditor the existence of a system that consistently tracks and maintains records of potential incidents that must be reported to CBP.

(c)(d): The facility meets the standard provisions. CBP Directive 2130-030 mandates background investigations for job applicants who may have contact with detainees. It also requires updated background investigations for CBP personnel who have detainee contact every five years. Additionally, the Directive stipulates background investigations for contractors who may have detainee contact. In the case of PS, there are no contractors involved in detainee interactions. An interview was conducted with the HQ PSD SME who stated background checks are conducted on all new employees who may have contact with detainees and conduct five-year reinvestigations. She further stated they now have a system providing instantaneous notifications of any possible criminal activities by staff. While on the onsite audit, the Auditor requested a random selection of background checks. Four background records were provided post-audit to the Auditor. The Auditor found PS in compliance with the standard provision.

(e): The facility meets the standard provision. An interview with the HQ Human Resource Management (HRM)/Labor Employee Relations (LER) SME was conducted. The HQ LER SME confirmed it is agency policy to rescind an offer of employment to prospective employee or to terminate the employment of any such employee who makes a material omission or provides false information regarding sexual abuse misconduct. The HQ LER SME further stated staff are informed they have an affirmative obligation to report any sexual misconduct, false information, and any material omissions. The HQ LER SME stated staff are made aware of their obligations through the CBP Standards of Conduct which is provided to staff upon employment and referenced in their yearly required ethics training through the Acadis training portal.

(f): The facility meets the standard provision. CBP Directive 2130-030 allows for the provision of any substantiated allegations of sexual abuse regarding former employees upon receiving a request to do so from an institutional partner for whom such an employee has applied to work, unless prohibited by law. The HQ LER SME stated they would provide information to other institution partners in accordance with Directive 2130-030.

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

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

**Notes:**

(a): The standard provision is not applicable as PS has not had any upgrades at the facility.

(b): The facility meets the standard provision. The interview with the local SME confirmed that PREA supervision and privacy concerns would be taken into consideration if new technology or updates were to occur. The local SME further stated they would analyze in methods to enhance ability to aid in the protection of sexual abuse against detainees.

The local SME stated they had a team who decided the (b) (7)(E) with consideration of PREA concerns.

**§115.121(c) through (e) – Evidence protocols and forensic medical examinations.**

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

**Notes:**

(c): The facility meets the standard provision. CBP TEDS and CBP Directive 2130-030 requires timely, unimpeded access to medical treatment and crisis intervention, including emergency contraception and sexually transmitted infections prophylaxis, be provided to a detainee victim of sexual assault in accordance with professionally accepted standard of care. The Directive also mandates the completion of a forensic medical examination be conducted by a Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE), or if a SAFE/SANE is not available that the examination be conducted by a qualified medical practitioner. Trinity Health Kenmare Hospital in Kenmare, North Dakota, and Trinity Health Hospital in Minot, North Dakota are designated to provide forensic examinations for sexual assault and/or abuse victims. The Auditor conducted telephonic calls with nurses from each hospital to confirm the availability of such services. The nurse at Trinity Health Kenmare Hospital stated, if necessary, the victim would be transferred to Trinity Health in Minot, North Dakota for additional care, if necessary. The local SME verified the utilization of either hospital for detainees who are victims of sexual abuse. Both the local SME and the HQ PSA Coordinator confirmed PS did not receive any allegations of sexual abuse during the 12-month audit period.

(d): The facility meets the standard provision. CBP TEDS requires agents to allow detainee victims access to victim advocacy services, to the extent available and consistent with security needs, while at the hospital for forensic examinations due to sexual abuse/assault. The Auditor determined that community based sexual abuse advocates are available through the Rape and Abuse Crisis Center, that works with survivors of sexual assault and provides comprehensive services to victims. They stated they are committed to transforming the community's response to violence and abuse to ensure healing for those who have been sexually abused. Advocacy services would be provided during any forensic medical examination and follow up services are available in the community for those wishing victim services. Interviews with local SMEs confirmed and verified that all sexual abuse victims would be provided access to victim services at Trinity Health Kenmare Hospital or Trinity Health by the Rape and Abuse Crisis Center. Interview with local SME revealed that North Dakota is a Child Advocacy Center State and all juvenile victims under the age of 18 would be taken to the Northern Plains/Prairie Children Advocacy Center for treatment and advocacy services.

(e): The facility meets the standard provision. The HQ PSA Coordinator confirmed there have been no reports of sexual abuse or sexual assault at PS during the 12-month audit period but if one were to be reported they have a robust system for relaying those reports to the appropriate parties within OPR and PSD to ensure a timely investigation and review. The local SME stated the Burke County Police Department has been advised of and are agreeable to following the PREA requirements. A copy of the notification letter to Burke County Police Department was provided to the Auditor during the pre-audit phase. The Auditor reviewed the documentation and determined the facility is in compliance. The HQ Office of Professional Responsibility (OPR) Sexual Abuse and Assault Investigator (SAAI) SME also confirmed the reporting responsibilities ensure that there is a thorough and complete objective investigation when there is one. The HQ PSA Coordinator confirmed during the interview that there were no allegations at PS during the 12-month audit period.

**§115.122(c) and (d) – Policies to ensure investigation of allegations and appropriate agency oversight.**

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

**Notes:**

(c)(d): The facility meets the standard provision. CBP Directive 2130-030 requires staff with knowledge, suspicion, or information of any incident of sexual abuse and/or assault of a detainee in a holding facility; retaliation against any person, including a detainee, who reports, complains about, or participates in an investigation about an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation to promptly report to the Joint Intake Center (JIC). The local SME and agents stated they will immediately report such incidents up the chain-of-command and the JIC. The on-duty supervisor shall inform local law enforcement as appropriate. The HQ SAAI SME confirmed that there are multiple layers of oversight for all allegations. Each allegation of sexual abuse goes through a review process. DHS OIG has the first right of refusal; it would then go to the JIC. The HQ PSA Coordinator confirmed the appropriate offices are advised of all allegations or incidents of sexual abuse by the JIC. The local SME stated the Burke County Sheriff's Office would be informed because they are legally authorized to carry out criminal investigations. The local SME further stated the any notification made by PS would be recorded. The HQ SAAI SME confirmed all allegations are kept in their case management system.

**§115.131(a) through (c) – Employee, contractor, and volunteer training.**

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

**Notes:**

(a)(b): The facility met the standard provisions. CBP Directive 2130-030 mandates training for various personnel who may have contact with detainees in CBP holding facilities, ensuring compliance with Subpart B of the DHS Standards. CBP has developed training resources to assist staff in communicating with detainees with disabilities and individuals who identify as LGBTQI+. CBP has also established the PREA Resource Center, which provides policies and information on CBP's zero-tolerance stance on sexual abuse and assault. Mandatory training, including the FEMA course "Preventing and Addressing Sexual Abuse and Assault of Individuals in CBP Holding Facilities," is required for all CBP employees, contractors, and volunteers. PS employees have completed the mandatory PREA training, and training records were reviewed on-site. The local SME and agents confirmed that the training was received through the Acadis training portal, with previous training conducted via the PALMS system. PS staff were issued Quick Reference Cards for responding to incidents of sexual abuse, outlining the necessary steps and reporting procedures. It should further be noted agent interviews were conducted [REDACTED] (b) (7)(E) [REDACTED] and based on their responses, the Auditor believes they responded to interview questions without the Quick Reference Cards. The agents were well informed and provided responses to the interview questions without additional guidance. Contractors and volunteers with detainee contact are not utilized by PS. The Auditor observed a reference binder at the processing center, containing PREA policies, contact numbers, guidelines for reporting incidents, language line information, cross-gender search protocols, and any other information the facility deems important to their processing of detainees. The binder serves as a convenient and accessible resource for agents working near the hold rooms.

(c): The facility meets the standard provision. The Auditor conducted an on-site review of the training curriculum and reviewed 16 training records to determine if all active staff at PS were trained within two years of the effective date of the standards or upon their initial hire. The review further confirmed that all agents receive bi-annual refresher training as required. Agent interviews confirm they receive bi-annual PREA training via the Acadis training portal and receive reminders through emails. It should further be noted that all training records are maintained electronically.

**§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 met the standard. PS displays colorful, large print posters of DHS Zero-Tolerance Policy in view of all detainees hold rooms and processing areas. The posters are printed and posted in English and Spanish, but also

contain a box providing zero tolerance of sexual abuse and assault as well as reporting information in all common languages. In addition, CBP addresses zero tolerance which is prominently displayed on its website, <https://www.cbp.gov/about/care-in-custody>. CBP has added numerous methods of providing information to the detainee population of CBP's Zero-tolerance policy. CBP developed age-appropriate colorful posters, informational display system slides, and scripts to provide key information regarding zero-tolerance of sexual abuse and sexual assault and how to report incidents of sexual abuse and/or assault at CBP holding facilities. The English and Spanish posters were prominently displayed in each hold room. The local SME and agents also stated PS also has access to posters in several other languages depending on the type of population received at the facility. Agents stated they ask detainees regarding their physical safety and reported they were aware of different methods to explain the zero-tolerance policy by utilizing their available resources and referring to the binder containing resource information which is located at the processing desk.

**§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)(d): The facility met the standard provisions. CBP TEDS requires that all detainees be assessed for being at-risk of sexual assault before being placed in a hold room or holding facility. The assessment by policy includes whether the detainee has exhibited a mental, physical, or developmental disability; the age of the detainee; their physical build; any prior arrests or incarcerations; whether the detainee self identifies as LGBTI+ or gender non-conforming; any prior sexual victimization and the detainee's own concerns about his/her physical safety. This assessment considers various factors such as mental, physical, or developmental disabilities, age, physical build, prior arrests or incarcerations, self-identification as LGBTI+ or gender non-conforming, history of sexual victimization, and the detainee's own safety concerns. Based on this assessment, the processing agent determines whether the detainee should be placed alone or separated from specific individuals for their own safety or the safety of others. Due to the absence of detainees during the onsite audit, the Auditor was unable to directly observe the assessment process. During the onsite audit, the Auditor did not review any risk assessment screenings due to the absence of current detainee placements in holding status. However, the local SME and agents confirmed during interviews that they inquire about the assessment questions to identify any physical safety concerns expressed by the detainees. Once the required assessment is completed, the agent assigns the detainee to an appropriate hold room based on their assessment and safety considerations.

(e): The facility meets the standard provision. According to CBP TEDS, staff members must ensure that assessments are conducted in a confidential setting to prevent unauthorized parties from obtaining sensitive information. The sharing of such sensitive information is strictly regulated, limited to individuals with a legitimate "need to know." Interviews with the local SME and agents validate this procedure, as all detainee information is securely stored in the (b) (7)(E) and inaccessible to all staff members.

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

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

**Notes:**

(a): The facility meets the standard provision. Both CBP TEDS and CBP Directive 2130-030 requires that detainees must have multiple confidential channels to report incidents of sexual abuse/assault, retaliation, staff neglect, or violations leading to sexual assault. The directive specifically emphasizes the visibility and availability of procedures for reporting alleged sexual abuse and/or assault within holding facilities, as well as their presence on the CBP public website. The Keep Detention Safe posters in the processing area contain telephone contact information for DHS OIG. Additionally, an email sent in February 2018 by CBP Central provided CBP employees with links to review all policies and updates, while a memorandum from the USBP Chief in December 2022 mandated the Preventing and Addressing Sexual Abuse in U.S. Customs and Border Protection Holding Facilities training for all staff members. Interviews with agents and the local SME provided insight into the reporting channels. All interviewees were well-aware of the policy and stated that detainees have multiple confidential reporting channels from the moment they make initial contact with agents.

(b): The facility meets the standard provision. According to CBP Directive 2130-030, the facility must provide detainees with at least one method to report sexual abuse to an external entity not affiliated with the agency. Detainees should have the option to report confidentially and anonymously, either verbally or in writing. Interviews with the local SME and agents confirm that detainees can report abuse verbally or in writing to staff, and third-party reports are accepted. Detainees also have the right to request a private and anonymous telephone call to DHS OIG. They are informed about the possibility of making a private report by calling DHS OIG. To verify the functionality of the anonymous telephone line, the Auditor made a call to the number provided on the Keep Detention Safe poster, which was confirmed by the staff on the receiving end. If a detainee requests to make such a call, the agent will allow them to use the telephone at the processing center desk to dial the DHS OIG hotline number.

(c): The facility meets the standard provision. Local SME and agent interviews revealed staff are aware that if third parties report allegations of sexual abuse and/or assault are promptly reported and documented in writing. The local SME and agent state all sexual abuse and/or sexual assault allegations are promptly reported to supervisors regardless of the method the allegation is being reported.

**§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 informs staff that third parties may report sexual abuse on behalf of detainees. CBP make public reporting procedures for sexual abuse or detainees at: <https://www.cbp.gov/about/care-in-custody>. The website provides a toll-free Joint Intake Center Hotline phone number, email address, and physical address to allow different methods of reporting to the Joint Intake Center. The website also provides, the phone number, email address, and an online reporting site for the DHS OIG. Local SME and agent interviews confirmed that third parties are provided different methods of reporting. The agents also stated if they receive a third-party allegation, they will promptly notify their supervisor.

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

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

**Notes:**

(a)(b): The facility meets the standard provisions. CBP Directive 2130-030 requires all staff to report immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse/assault; retaliation against detainees or staff who made such a report or participated in an investigation of sexual abuse, or any staff neglect or violation of responsibilities contributing to an incident or retaliation. Directive 3340-025F, Reporting Significant Incidents to the U.S. Customs and Border Protection (CBP) WATCH, directs staff that sexual abuse and/or assault be reported to a unified hub which operates 24/7 to assure all significant incidents are reported immediately to all

required leadership. All interviewed agents affirmed these responsibilities. Communications dated August 2022 confirm staff received reminders and "DHS PREA Standard in Focus" to ensure requirements are reviewed on a regular basis. Staff members were questioned about their options for reporting incidents outside the chain-of-command, and they consistently responded they would contact their supervisor and up the chain of command, DHS OIG or the JIC. Additionally, agents stated they had familiarized themselves with the PREA reporting requirements through training sessions, quick reference cards, and email communications.

(c): The facility meets the standard provision. CBP Directive 2130-030 states except as necessary to report the incident, CBP and its staff shall not reveal any information related to the incident except as necessary to aid the detainee, to protect other detainees or staff, or to make security and management. Agent interviews verify that the dissemination of information regarding a sexual assault is limited to "need to know" basis. Interviews with the local SME and agents confirm information would not be shared with other staff except on a need-to-know basis or during an investigation into the matter. Interview with the HQ SAAI SME confirmed that all records are maintained in a confidential manner.

(d): The facility meets the standard provision. CBP Directive 2130-030 requires CBP staff to notify relevant agencies if the alleged victim of a sexual assault is a vulnerable adult or under the age of 18. Interview with the local SME reveals sexual assaults of victims under age 18 and vulnerable adults are to be reported to the Child Protective Services of North Dakota.

**§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 requires any agency employee who believed circumstances exist which place a detainee at imminent risk of sexual assault to take immediate action to protect the detainee. Interviews with local SME and agents confirm that a detainee feeling at risk would immediately be protected by isolation or direct constant supervision (sight and sound) or both. The detainee would be removed from contact with other detainees and would be supervised, as directed by the local SME on duty. Agent interviews confirmed that detainees at risk would be placed by themselves in a hold room where they can be closely monitored.

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

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

**Notes:**

(a): The facility meets the standard provision. CBP Directive 2130-030 requires that should a detainee allege or report having been sexually abused and/or assaulted at another facility prior to arriving at PS, the prior agency or administrator must be notified. The memorandum dated October 2015 from USBP Chief was issued with the title "Implementation of the CBP National Standards on TEDS" for staff review which includes direction on reporting procedures. An Interview with the local SME confirm notifications would be made immediately and be documented. The SME further stated PS has not received any allegations during the 12-month audit period.

(b): The facility meets the standard provision. CBP Directive 2130 and the standard provision, requires notification to be made within 72 hours upon receiving an allegation of sexual assault and/or abuse. This notification process was verified during interview with the local SME, who affirmed that immediate notifications would be made and were aware of the 72-hour period for reporting the allegations; however, they would immediately report the allegation.

(c): The facility meets the standard provision. An interview was conducted with the SBPA who stated notifications would immediately be made and documented by the on-duty facility supervisor.

(d): The facility meets the standard provision. The local SME stated PS follows all agency reporting requirements as specified in CBP Directive 2131-030. The local SME further stated there have not been any reports at PS during the audit period, however, all notifications would be made as if the incident had occurred at the PS.

**§115.164(a) and (b) – Responder duties.**

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

**Notes:**

(a): The facility meets the standard provision. CBP Directive 2130-030 (January 2018) details the responsibilities for the first agent on scene of a reported allegation. The Directive and the PREA training through the Acadis portal provide the necessary steps to be taken if a detainee is sexually assaulted. The Directive has a Review date of January 2021. The first responding agent or their supervisor is to perform all first responder duties delineated in the standard provision. During the interviews with the local SME and agents, they discussed their responsibilities which included: separating the alleged victim and abuser; preserving and securing the crime scene if the abuse occurred within a period that allows for evidence collection; and request the alleged victim and direct the abuser to refrain from taking actions that could destroy evidence. The SME and agents demonstrated their understanding of preventing detainees from eating, drinking, using the toilet, or damaging clothing that might contain physical or forensic evidence. Agents emphasized the significance of maintaining the integrity of any area or room where a sexual assault may have taken place, restricting access to preserve potential evidence.

(b): The facility meets the standard provision. CBP TEDS addresses non-law-enforcement duties and requires the non-law-enforcement staff to request the alleged victim not take any actions that could destroy physical evidence and notify law enforcement staff. PS only allows trained agent interactions with detainees during their entire holding period. An interview with the HQ SAAI SME confirmed that all agents go through in-person specialized training in evidence collection. In addition, every investigation includes oversight to ensure policies were followed.

**§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 (January 2018) states the Directive constitutes CBP's written institutional plan for utilizing a coordinated multidisciplinary team approach to respond to sexual abuse and/or assault. The Directive provides a clear progressive plan for all components of addressing sexual abuse in holding facilities. A Directive has a Review date of January 2021. On August 15, 2022, CBP developed a job aid which details first responder duties defining sexual assaults of a detainee by another detainee, sexual assault of a detainee by an employee, contractor, or volunteer. The job aid also includes first responder duties, notifications for investigations, forensic medical examinations, and incident reporting. The SME and the agents stated they were conscientious and aware of their requirement to promptly provide medical care.,

**§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 requires PS management to consider removal of PS staff from detainee contact if there is an allegation of perpetrated sexual abuse pending the outcome of an investigation if the seriousness or plausibility make removal appropriate. During an interview with the local SME, it was verified that it is agency policy is to remove the staff member from contact with detainees pending the outcome of an investigation into alleged sexual abuse/assault or violations of agency policies. PS also ensures they provide protection to the detainee

while they are in their custody. PS does not employ contractors who have direct contact with detainees. The local SME stated PS has not had any reports of alleged sexual abuse and/or assault. He further stated PS does not have volunteers at the at the facility. The HQ PSA Coordinator confirmed there have not been any reported incidents of sexual abuse and/or assault during the 12-month audit period.

**§115.167 – Agency protection against retaliation.**

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

**Notes:**

The facility meets the standard. CBP TEDS strictly forbids any form of retaliation by CBP staff against individuals, including detainees, who raise allegations or complaints of mistreatment or engage in sexual activity under force, coercion, threat, or fear of force. Directive 51735-013B, titled "Standards of Conduct," effective as of December 9, 2020, explicitly prohibits retaliation as well as sexual abuse or assault of detainees. The implementation of this policy was confirmed through an interview with the local SME. Agent interviews indicated a clear understanding that retaliation is prohibited by the Directive, and all agents have received training to recognize signs of retaliation.

**§115.171 – Criminal and administrative investigations.**

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

**Notes:**

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

**§115.172 – Evidentiary standard for administrative investigations.**

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

**Notes:**

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

**§115.176(a) and (c) through (d) – Disciplinary sanctions for staff.**

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

**Notes:**

(a): The facility meets the standard provision. CBP Directive 2130-030 (January 2018) states CBP personnel may be subject to disciplinary action up to and including removal from their position and Federal Service for substantiated allegation of sexual abuse/assault and/or for violating CBP's sexual abuse policies (Review Date January 2021). CBP Directive 57135-013B, Standards of Conduct gives notice to all CBP personnel they may be subject to disciplinary action for substantiated allegations of sexual abuse and/or assault. The HQ SAAI SME and the HQ LER SME stated that a substantiated complaint of sexual abuse or violating the agency's sexual abuse policy would subject staff to disciplinary action, up to and including removal and future exclusion from Federal Service.

(c): The agency meets the standard provision. Interview with HQ PSA Coordinator revealed there were no reports of sexual abuse during the 12-month audit period at PS. Interview with the HQ SAAI SME confirms all allegations of



sexual abuse would be referred to the local law enforcement agency and notification is coordinated through HQ OPR/SAAI staff.

(d): The agency meets the standard provision. The HQ SAAI SME stated the agency would report disciplinary findings to relevant licensing bodies and designated law enforcement individuals.

**§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 provision. CBP Directive 2130 and the Zero-Tolerance of Sexual Abuse and Assault Policy 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, sexual assault or for violating CBP's sexual abuse policies. The HQ SAAI SME and the HQ USBP SME stated all contractors and volunteers would be removed from all detainee contact pending investigation of an allegation of sexual abuse and/or assault. PS does not currently utilize any volunteers or contractors; however, there is a cleaning service company that cleans the office spaces and common areas of the facility, but contracted staff are not allowed in the hold rooms or processing area if detainees are present. The Auditor interviewed the local SME who stated that although they do not employ contractors or utilize the service of volunteers, PS is aware of the policy and would remove the contractor or volunteer from detainee contact while pending an investigation.

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

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

**Notes:**

(a)(b): The facility meets the standard provisions. According to professional accepted standards of care, alleged sexual assault victims must be given timely, unhindered access to emergency medical care and crisis intervention services, including emergency contraception and STD prophylaxis. This is mandated by CBP Directive 2130-030. Additionally, it mandates that the alleged victim receive emergency medical care without charge, regardless of whether the victim names the alleged abuser or cooperates with any subsequent investigations. In cases of sexual assault and/or abuse at PS, if deemed necessary, the detainee victim will be promptly transported to Trinity Health Kenmare Hospital in Kenmare, North Dakota. The interviewed hospital nurse confirmed their availability to provide a Sexual Assault Nurse Examiner (SANE) for any detainee who reports such incidents. For further care, victims would be transferred to Trinity Health in Minot, North Dakota. It is important to note that a forensic medical examination (FME) would only be conducted with the detainee's consent and when deemed appropriate from a medical and evidentiary standpoint. The decision regarding the evidentiary appropriateness of the examination lies with CBP's Office of Professional Responsibility. Regardless of the victim's cooperation with the sexual assault investigation, these services would be provided at no cost. Interview with the local SME have verified that these services are indeed offered free of charge, irrespective of the detainee's level of cooperation during the investigation.

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

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

**Notes:**

The facility meets the standard. CBP Directive 2130-030 requires after every investigation of sexual abuse and assault, except unfounded, a sexual abuse incident review is to be conducted within 30 days. The review is to determine whether the allegation or investigation indicates a change is need in policy or practice to prevent, detect, or respond to sexual abuse. The recommendations for improvement outline in the review must be implemented or the facility must

document the reasons for not doing so in a written response. Documentation received through the HQ PAQ indicated PS did not have any sexual abuse allegations that required investigation, therefore, no incident reviews had been conducted. The PSA further stated the Incident Review Committee (IRC) consists of three CBP HQ Program Managers and the local PREA Field Coordinator. The HQ PSA further confirmed that if a sexual abuse/assault investigation were to take place, the IRC would convene within 30 days after the investigation's conclusion to prepare a report detailing its findings.

**§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 9, 2023*

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