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



AUDITOR INFORMATION									
Name:	(b) (6), (b) (7)(C)	Company Name:	Creative Corrections, LLC						
Mailing Address:	(b) (6), (b) (7)(C)	City, State, Zip:	Beaumont, Texas 77706						
Email Address:	(b) (6), (b) (7)(C)	Telephone Number:	(b) (6), (b) (7)(C)						
	AGENCY INFOR	MATION							
Name of Agency:	U.S. Customs and Border Protection								
	PROGRAM OF	FICE							
Name of Program Office:	Office of Field Operations								
	SECTOR OR FIELD	D OFFICE							
Name of Sector or Field Office:	New York Field Office, JFK POE Airport								
Name of Chief or Director:	(b) (6), (b) (7)(C)								
PREA Field Coordinator:	(b) (6), (b) (7)(C)								
Physical Address:	Jamaica, New York 11430								
Mailing Address: (if different from above)									
	SHORT-TERM HOLDING FACI	LITY BEING AUDITE	D						
Information About the Facility									
Name of Facility:	John F. Kennedy International Airport								
Physical Address:	JFK International Airport, Bldg. #77, Jamaica, NY 11430								
Mailing Address: (if different from above)									
Telephone Number:	(b) (6), (b) (7)(C)								
Facility Leadership									
Name of Officer in Charge:	(b) (6), (b) (7)(C)	Title:	Port Director						
Email Address:	(b) (6), (b) (7)(C)	Telephone Number:	(b) (6), (b) (7)(C)						

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), Office of Field Operations (OFO), John F. Kennedy (JFK) Port of Entry (POE) was conducted May 01, 2023, by (b) (6), (b) (7)(C), Certified PREA Auditor, contracted through Creative Corrections, LLC., of Beaumont, Texas. The auditor conducted this audit to determine facility compliance with the Department of Homeland Security (DHS) PREA Standards. Along with the on-site portion of the audit, the audit involved a review of the 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 JFK. The first audit was conducted on April 23, 2019. At any time, the detainee population may include adult males and females, family units, and unaccompanied children (UC). JFK can hold detainees up to a maximum of 72 hours prior to release by returning the detainees to their country of origin or transferred to another facility. However, it should be noted that detainees held at this facility are processed out within a few hours. As needed, the local law enforcement agencies are the New York Port Authority Police Department (PAPD) and New York City Police Department (NYPD).

At 0830, the auditor inspected Terminal 4 and Terminal 8 of the JFK POE. This included the primary and secondary holding areas and hold rooms. If a detainee is escorted from the primary inspection for further inspection and/or processing, they are placed in the secondary holding area. This area is an open space, in direct view of officers. Children and/or families traveling with juveniles are held in the family room, which contains bedding, television access, toys, snacks, drinks, and other child-appropriate measures. In this area, there are age-appropriate PREA posters (child, juvenile, and adult age ranges) clearly visible within the secondary inspection area. These posters are printed in both English and Spanish. Throughout the facility, there are both large group and single hold rooms. (b) (7)(E)

did not contain a toilet. When available within a hold room, toilets are concealed behind a wall of approximately three to five feet (size varied throughout various terminals) to provide privacy. If needed, detainees are escorted by staff to a private bathroom area. Shower facilities are not available at JFK POE. A review of the facilities

(b) (7)(E)

rooms revealed that CBP officers and staff cannot view individuals utilizing the toilets. Each hold room has a toilet with a partition which allows privacy to all detainees.

On May 3, 2023, Terminals 1, 5, and 7 were inspected for compliance with the DHS PREA Standards. As with Terminals 4 and 8, the inspection involved the primary and secondary holding areas and hold rooms. Detainees are generally placed in a seating area within the secondary holding area. This area is an open space, in direct view of officers. Children and/or families traveling with juveniles are held in the family room, which contains bedding, television access, toys, snacks, drinks, and other child appropriate measures. The auditor observed age appropriate PREA posters (child, juvenile, and adult age ranges) which are clearly visible within these areas and throughout the terminals. A review of JFK's (b) (7)(E) rooms revealed that CBP officers and staff cannot view individuals utilizing the toilets behind the walls.

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 JFK specific documents, and HQ Participation documents. During the on-site portion of the audit, the auditor observed that JFK posted a notice of the PREA audit with the auditor's contact information. The posters were displayed throughout the CBP holding areas, as well as inside the administrative areas, for accessibility by officers and staff. The auditor was provided with a facility roster to select local SMEs and officer interviews, which were conducted in a private setting. The auditor conducted four SME interviews, 13 Officer interviews, and two detainee interviews. Additionally, the

auditor spoke with an administrator at Jamaica Hospital Medical Center, the local area hospital that services JFK detainees, if applicable. The auditor also utilized the Language Line and tested the Department of Homeland Security (DHS) Office of Inspector General (OIG) Hotline. During the previous 12-month audit review timeframe, JFK did not receive any allegations of sexual abuse.

An exit briefing was held at approximately 1530. The exit briefing was conducted by Certified PREA Auditor Those in attendance were as follows:

(b) (6), (b) (7)(C), Assistant Port Director (APD), JFK International Airport
(b) (6), (b) (7)(C), HQ Privacy Diversity Office (PDO) (Acting) PREA Sexual Abuse (PSA) Coordinator
(b) (6), (b) (7)(C), Branch Chief, Passenger Operations Division, JFK International Airport
(b) (6), (b) (7)(C), PREA Program Manager, OFO
(b) (6), (b) (7)(C), Program Manager, Creative Corrections, LLC

During the exit briefing, the auditor discussed observations made during the on-site review and a summary of

During the exit briefing, the auditor discussed observations made during the on-site review and a summary of the interviews conducted at JFK. The auditor further explained a final determination would be made after triangulating the pre-audit, on-site audit, site inspection, post audit, and interviews conducted prior to the audit and during the audit.

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 John F. Kennedy Port of Entry on-site audit was completed on Tuesday, February 28, 2023, with the findings report being submitted in June 2023.

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

JFK meets 25 standards: 115.111, 115.113, 115.114, 115.115, 115.116, 115.117, 115.118, 115.121, 115.122, 115.131, 115.32, 115.141, 115.151, 115.154, 115.161, 115.162, 115.163, 115.164, 115.165, 115.166, 115.167, 115.176, 115.177, 115.182, 115.186, and 115.187

SUMMARY OF AUDIT FINDINGS	
Number of standards exceeded: 0	
Number of standards met: 25	
Number of standards not met: 0	
OVERALL DETERMINATION	
☐ Exceeds Standards (Substantially Exceeds Requirements of Standards)	⊠ Low Risk
☑ Meets Standards (Substantial Compliance; Complies in All Material Ways with the Standards for the Relevant Review Period)	☐ Not Low Risk
☐ Does Not Meet Standards (Requires Corrective Action)	

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)

Notes:

Based on a review and analysis of the available evidence, the auditor finds that the facility meets this standard requiring zero tolerance for sexual abuse and its subsequent provisions.

(a): The agency is required to have a written policy mandating zero tolerance toward all forms of sexual abuse and outlining the agency's approach to preventing, detecting, and responding to such conduct. On March 12, 2014, the Commissioner informed all staff through email communicating the adoption of the final rule of the PREA Standards and the Agency's commitment to protect the safety of individuals in CBP holding facilities. The memorandum further stated CBP is committed to providing an atmosphere of zero tolerance of sexual abuse and/or sexual assault in every CBP holding facility. In response to the Agency's commitment, CBP developed Directive 2130-030, Prevention, Detection, and Response to Sexual Abuse and/or Sexual Assault in CBP Holding Facilities, dated January 19, 2018, with a review date of January 19, 2021, establishing procedures for zero tolerance within CBP holding facilities. The agency designated an upper-level, agency wide PSA Coordinator and a Deputy PSA Coordinator who have sufficient time and authority to develop, implement, and oversee Agency efforts to comply with the PREA Standards for CBP Holding Facilities. In an interview with the PSA Coordinator, he indicated that his position is within the upper hierarchy of the agency and has sufficient time and authority to assure the Agency complies with the PREA standards. Interviews with Local SMEs indicated that the zero-tolerance policy on sexual abuse is communicated through daily musters, emails, and through web-based courses that are provided annually. SMEs stated the facility implemented the agency's zerotolerance policy by displaying posters for both staff and detainees. The SME also stated the facility follows up with daily musters, training, and emails. The auditor conducted interviews with 13 officers which indicated they were knowledgeable with the Agency's zero-tolerance policy. Officers stated their responsibility is to help prevent, detect and respond to sexual abuse by ensuring the zero-tolerance policy is followed, by assessing detainees risk for risk of being abused and or abusiveness, and responding to allegations of abuse.

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

☐ Does not meet Standard (requires corrective action)

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

Notes:

Based on a review and analysis of the available evidence, the auditor finds that the facility meets this standard requiring detainee supervision and monitoring. The standard requires JFK to maintain sufficient supervision of detainees, through appropriate staffing levels, as well as (b) (7)(E), to protect detainees against sexual abuse and its subsequent provisions.

(a): CBP National Standards on Transport, Escort, Detention, and Search (TEDS), dated October 2015 require JFK officers to closely supervise hold rooms when in use. During the on-site inspection, the auditor reviewed the (b) (7)(E) of the facility in Terminals 1, 4, 5, 7, and 8, as well as the layout of the family rooms and holding areas. Each of the primary areas have several officers who observe and monitor travelers as they enter the primary check point. Interviews with the SMEs verified the staffing plan always provides for ample officer coverage and supervision of detainees. The plan provides for full coverage for all terminals when needed, such as during flight arrivals/departures.

(b)(c): 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. The Directive further requires JFK to review the detainee supervision guidelines at least annually and consider its

applicability based on the physical layout, the composition of the detainee population, the prevalence of substantiated and unsubstantiated incidents of sexual abuse, the findings and recommendations of sexual abuse incident review reports, and any other relevant factors, including but not limited to the length of time detainees spend in agency custody. JFK conducted a review of the detainee supervision guidelines on December 16, 2022. The auditor reviewed the assessment conducted by management at the facility. The report is comprehensive and provides detailed information. Based on the review of the provided documentation, a determination was made the facility maintains sufficient supervision of detainees.

§115	.114(a) and	(b)) - Juvenile and famil	y detainees.
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	Exceeded Standard (substantially exceeds requirement of standard)
\boxtimes	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does not meet Standard (requires corrective action)
	Not Applicable (provide explanation in notes):

Notes:

Based on a review and analysis of the available evidence, the auditor finds that the facility meets this standard requiring juvenile and family detainees to be separated from the general population and its subsequent provisions.

- (a): The standard requires JFK 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. In addition to the CBP TEDS and memorandum, JFK POE's Standard Operating Procedure, "Secure Detention and Transfer Juvenile", directs the facilities actions regarding accompanied and unaccompanied juveniles. The SOP states, in part, if an unaccompanied minor is found to be inadmissible, the minor may only be released upon service of a Notice to Appear (NTA), to a biological parent or an individual who has legal custody granted by a court in the United States. During the on-site portion of the audit, several hold rooms were observed, with each terminal having between two and four holding areas, to include a family room for juveniles and families with bedding, toys, books, games, and television access. It was explained by staff that juveniles are provided unlimited access to drinks and snacks. They are also provided access to toilet facilities under supervision by officers who are assigned to monitor the juveniles and escort. To ensure the safety of all juveniles while detained, this holding area is in direct sight of the officer workstations or has an assigned officer to maintain direct supervision at all times while a juvenile is present. When asked, officers were very aware of the agency's policy to maintain a safe and positive environment for juveniles. Additionally, when occupied by juveniles, officers stated that juveniles within the family rooms must be maintained in the least restrictive means as possible. They also stated the family room can only hold juveniles and families, no adult detainees are allowed in that area when juveniles are present, and officers are assigned to monitor the area who are the same gender as the gender of juveniles within it. The facility reported that, while a juvenile is in the family rooms, they are free to move about the area to watch television or play with toys.
- (b): Interviews with officers and SMEs indicated that UC are held separately from adults. However, unaccompanied juveniles may remain with a non-parental adult family member if their relationship has been vetted through contact with parents or other means. Officer interviews thoroughly explained the vetting process. Officers stated the appropriate government agencies within countries of origin are contacted to ensure presented documents are legitimately authorized by the persons possessing them.

§115.115(b) through (f) — Limits to cross-gender viewing and searches.
☐ Exceeded Standard (substantially exceeds requirement of standard)
Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does not meet Standard (requires corrective action)
Notes:
Based on a review and analysis of the available evidence, the auditor finds that the facility meets this standard, requiring limits to cross-gender viewing and searches, and its subsequent provisions.
(b)(c): CBP TEDS restricts the use of cross-gender strip searches or cross-gender partial body searches or cross-gender body cavity searches except in exigent circumstances, including consideration of officer safety or when performed by medical practitioners. If an opposite gender staff member must perform a partial body search or be present at a medical examination, it is mandatory that two staff are present. Interviews with JFK SMEs and officers indicated that requirements were iterated through musters and emails. Additionally, interviews with SME's and the officers confirmed their knowledge of policy, as well as the extensive documentation required should an exigent circumstance result in a cross-gender search. Interviews with staff indicated that staff were cognizant of the need to conduct all searches in a professional manner appropriate to the gender of the person being searched. During the previous 12-month audit review timeframe, JFK has conducted partial body strip searches and body cavity searches at a medical facility. A review of JFK's search reports indicates that all searches have been conducted within standards and policy requirements.
(d): CBP TEDS requires CBP facilities 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 room checks. When taken into custody, detainees are placed in hold rooms with other detainees of the same gender. If staff of the opposite gender enter those hold rooms, policy requires said staff to knock and announce their presence before entering. Upon inspection and review of the facility, JFK POE does not have showering facilities for detainees. Interviews with SME's and officers indicated that staff were aware of the requirement. Interviews confirmed that, even when entering hold rooms containing detainees of the same gender as themselves, the officers would still knock and announce their presence prior to entering. During the on-site inspection, it was noted that most hold rooms contain a toilet, while others do not. Interviewed CBP officers stated that regardless of whether a hold room contained a toilet, if a detainee requested to utilize a private toilet room, the detainee was subsequently escorted to a bathroom area by an officer of the same gender. All facilities were reviewed and observed. The auditor confirmed that there were (b) (7)(E) located in toilet areas. When occupied by detainees, these areas are secured by staff of the same gender as the detainee. A review of (b) (7)(E) any areas within the facility where detainees would be expected in a state of undress or toileting. The auditor interviewed two detainees who indicated that they were able to use the bathroom without being viewed by staff of the opposite gender and that staff of the opposite gender does announce their presence when attempting to enter the bathroom.
(e): CBP Directive 2130-030 prohibits staff from searching or examining detainees for the sole purpose of determining the person's gender. SME and officer interviews indicated that all were aware that searching detainees to determine their gender was prohibited. Staff also stated that if the gender of an individual was unknown, they would simply ask the individual how that person identified or checked provided documentation and would address them accordingly. Interviews were conducted with two female detainees who did not self-identify as transgender.
(f): CBP TEDS outlines the requirements of all pat-down searches. SME and Officer interviews indicated that officers have been trained on proper search procedures. The interviews provided that the search would be 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 noted that the search would be performed in a manner appropriate for the declared gender of the detainee being searched. The SMEs stated that all partial body and visual body searches (if authorized), are electronically documented in (b) (7)(E)

to review whether immediate and partial body searches were conducted in the previous 12 months. A review of the documentation indicated that each search was conducted for cause, was properly documented with a witness to each

search, and only one yielding a positive result of contraband.

 ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ✓ Does not meet Standard (requires corrective action) lotes: Based on the review and analysis of all available evidence, the auditor finds meets this standard, requiring accommodation to detainees with disabilities and detainees who are limited English proficient and searches, and its subsequent provisions.
Based on the review and analysis of all available evidence, the auditor finds meets this standard, requiring accommodation to detainees with disabilities and detainees who are limited English proficient and searches, and its
Based on the review and analysis of all available evidence, the auditor finds meets this standard, requiring accommodation to detainees with disabilities and detainees who are limited English proficient and searches, and its
accommodation to detainees with disabilities and detainees who are limited English proficient and searches, and its
(a)(b): CBP Directive No. 2130-033, Non-discrimination for Individuals with Disabilities in CBP-Conducted Services, Programs, and Activities (Non-Employment), dated July 8, 2021, clearly states it is CBP's policy not to discriminate against members of the public because of disability (hearing impaired, blind or low vision, or those who have intellectual, psychiatric, speech disabilities or Limited English Proficient) and for all persons to have access to CBP's efforts to prevent, detect, and respond to sexual abuse and/or sexual assault. All persons are afforded an equal opportunity to participate in, or benefit from, CBP-conducted services, programs, and activities. CBP Directive 2130-030 further directs staff to provide reasonable modifications to detainees who have disabilities (hearing impaired, blind, or low vision, or those who have intellectual, psychiatric, or speech disabilities) for said persons to have access to CBP's efforts to prevent, detect, and respond to sexual abuse and/or sexual assault. During the on-site inspection, the auditor verified phone numbers and web addresses for providers of accommodation services were readily accessible and observed. Agency policy requires that any written materials related to sexual abuse should be provided in formats that ensure effective communication with detainees with disabilities. During the on-site portion of the audit, the auditor verified that all sexual abuse awareness posters were provided in English and Spanish and were placed where noticeable to all detainees. Interviews with officers provided that they were aware of the zero-tolerance policy, posters, and other resources available that they could use to assist them in relaying JFK's zero-tolerance policies. Officers stated they were aware of sign language interpretation services, language interpretation lines, and the list of CBP staff who speak multiple languages. Staff acknowledged that they would not utilize detainees to translate and allegation of sexual abuse. The Auditor interviewed two detai
(c): CBP TEDS requires that when investigating allegations of sexual abuse, interpretation services may not be provided by another detainee, unless the reporting detainee expresses a preference for another detainee to provide interpretation services, and the supervisor determines that such services are appropriate and consistent with the operational office's policies and procedures. A review of documentation reflects that during the previous 12-month audit review timeframe, JFK has not detained any individuals who were deaf, blind, or cognitively impaired. Interviews with SMEs and officers provided that staff would not utilize another detainee to interpret allegations of sexual abuse.
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)
lotes:

requires proper hiring and promotional decisions.

(a): 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 of sexual abuse and/or sexual assault when hiring or promoting individuals within the agency. While interviewing the HQ Human Resource Management (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.

- (b): CBP has developed operational guidance through the issuance of the HRM Standard Operating Procedures to provide direction in the hiring and promotion of employees who have direct contact with detainees. CBP HQ/HRM developed Mission Specific Questions and a DHS PREA Questionnaire which includes asking applicants who may have contact with detainees directly about previous misconduct as identified in provision (a) of this standard. Interviews with the HQ Hiring Center SME indicated that all staff must complete a PREA Questionnaire Form, whether the individual is a new hire or applying for promotions. Per CBP policy and rules of employment, staff must acknowledge their duty to disclose any such misconduct.
- (c)(d): 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 the CBP report of investigation form which provides the results of a background investigation. The Report of Investigation form provides on page 3 whether the employee is asked questions as described in standard provision (a). Interviews with the HQ Office of Professional Responsibility (OPR) Personnel Security Division (PSD) SME, provided that the agency conducts in-house vetting checks, database checks, and checks through various law enforcement databases to assist in verifying suitability of applicants, contractors, and volunteers. An interview with the HQ HRM/Labor Employee Relations (LER) SME indicated the agency informs employees they have a continuing affirmative duty to disclose any misconduct constituting sexual abuse through yearly virtual trainings, policies, daily musters, electronically through email, and standards of conduct. The HQ LER SME stated employees are advised that violations of the standards of conduct or policies can result in consequences. A review of the background checks revealed the agency is following pre-hire and five-year background checks. The facility provided documented background checks for review which provides that the agency has conducted the checks in accordance with the CBP directive.
- (e): The HQ LER SME provided that CBP policy mandates that all persons have a continuing affirmative duty to report any acts of sexual abuse as required under the PREA standards. The HQ LER SME also explained that material omission or the provision of materially false information regarding such misconduct is grounds for termination or withdrawal for an offer of employment. The HQ LER SME stated employees are made aware of this requirement through the issuance of the Standards of Conduct and the Table of Contents to the Penal Code.
- (f): 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. The HQ LER SME stated if a former employee has applied for employment at another agency, a background investigator or agency can request employee background information at IAFileroom@cbp.dhs.gov.

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□ E	xceeded Standard (substantially exceeds requirement of standard)
⊠ M	leets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	oes not meet Standard (requires corrective action)
□ N	ot Applicable (provide explanation in notes):
lotes:	
	e review and analysis of all available evidence, the auditor finds the facility meets this standard, which asideration for detainee sexual safety when acquiring new or conducting upgrades to facilities and s.
that JFK Int	cility is currently going through upgrades to several terminals. An interview with the Chief (SME) indicated ernational Airport follows the airport technical design standards and includes ensuring the ability to protect gainst sexual abuse.
(b): During	an interview, the Chief stated that $(b)(7)(E)$ since the last audit to ensure the facility and it is holding areas for safety purposes. A review of

(b) (7)(E) placement concluded the the facility. (b) (7)(E) at each location of
§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:
Based on the review and analysis of all available evidence, the auditor finds the facility meets this standard, which requires evidence protocols and forensic medical examinations for victims of sexual abuse or sexual assault.
(c): 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 JFK SMEs confirm both forensic medical services, as well as victim advocacy services, would be provided to the alleged victim without cost. The SMEs stated that they would work with the PAPD to provide medical attention and forensic exams. Detainees are taken to Jamaica Hospital Medical Center by local EMT via coordination by the PAPD. The SME stated that the EMT would determine where the appropriate place to take the detainee.
(d): Interviews with SMEs confirmed that victim advocacy services are provide to victims of sexual abuse and/or assault at the local hospital. Phone interviews with a Hospital Administrator at Jamaica Hospital Medical Center confirmed that the hospital would provide a detainee with a SAFE/SANE examination commensurate with what is provided to the community. The Hospital Administrator also stated there are multiple advocacy centers in the area that they could use and provide to a victim at their request. When asked by the auditor, the Hospital Administrator did not provide a specific advocacy center that would be used. Additionally, the SMEs confirmed that detainee victims of sexual abuse and/or assault are permitted to use victim advocacy services and officers are aware they must allow victim advocates to speak with the alleged victim of sexual abuse and/or assault.
(e): SMEs provided the agency would request that federal, state, and/or local law enforcement agencies conducting sexual abuse investigations at the facility follow the requirements by the DHS PREA Standards. The JFK POE provided a letter from JFK to PAPD requesting the investigating agency follow the DHS PREA Standard requirements.

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

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

Notes:

Based on the review and analysis of all available evidence, the auditor finds the facility meets this standard, which requires the facility have policies to ensure investigation of all allegations and appropriate agency oversight.

(c): CBP Directive 2130-030 requires all allegations of sexual abuse and/or assault to be documented on a Significant Incident Report and promptly reported to the Commissioner's Situation Room and the Joint Intake Center (JIC). CBP Directive 3340-025F, Reporting Significant Incident to the U.S. Customs and Border Protection WATCH, (dated November 2, 2021, with a review date of November 2, 2024) directs staff to report sexual abuse and/or sexual assault through a united hub which operates 24 hours a day and seven days a week to ensure significant incidents are immediately reported to the leadership. The JFK POEs, "Sexual Abuse and Sexual Assault SOP", directs CBP staff in the facility's response to sexual abuse and sexual assault. Interviews with SMEs confirmed that all sexual abuse allegations are promptly referred to the Joint Intake Center and promptly referred to the appropriate law enforcement agency if potentially criminal. The SMEs stated that reports to the Joint Intake Center are made by the Deputy Chief or the Watch Commander. The facility did not have any allegations or reports of sexual abuse or assault to report within the last 12-month audit review timeframe.

(d): CBP Directive 2130-030 requires all allegations of sexual abuse and/or assault be promptly reported to the PSA Coordinator, the Commissioner's Situation Room, and the JIC. The PSA Coordinator stated that if there were any allegations of sexual abuse and/or assault, the previous PSA Coordinator would have received the allegations, due to

this being a new assignment. The PSA Coordinator stated he was informed there were no allegations during the previous 12-month audit review timeframe. Interviews with local SMEs provided that the Deputy Chief or Watch Commander would initiate referrals to the PSA Coordinator. The facility reported that they did not have any allegations or reports of sexual abuse or assault to report during the previous 12-month audit review timeframe. An interview with the HQ Office of Professional Responsibility (OPR) Sexual Abuse and Sexual Assault Investigations Coordinator (SAAI) SME indicated that all allegations of sexual assault provided by the victim, by a non-government official (NGO), or by another agency would be reported to the JIC. If investigated by OPR, Field Agents would immediately and directly begin the investigative process. The HQ SAAI SME stated the investigative protocol was developed in conjunction with CBP, ICE, HSI, and DHS.

§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:
Based on the review and analysis of all available evidence, the auditor finds the facility meets this standard, which requires that facility provides employees, contractors, and volunteers with training on the agency's zero-tolerance policies.
(a): Directive 2130 required all uniformed officers, special agents, fact finders, contractors, and volunteers who may have contact with a detainee in CBP Holding Facilities receive the training in Subpart B of the DHS Standards. The auditor reviewed the training slides of CBP's mandatory training requirement. The training material 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. The training for employees is provided through the Acadis training site. During the on-site portion of the audit, the auditor reviewed twenty employee training records to ensure the completion of annual PREA training requirements. The auditor found these training records to comply with the Directive and the Standards. All staff, contractors, and volunteers are mandated to receive this training annually. Additional information is published through Privacy and Diversity Office Payroll Messages, Sexual Awareness Prevention Month Communication Package dated April 19, 2022, (b) (7) (E) messaging for employees reminding them of CBP's zero-tolerance of sexual abuse and/or sexual assault, and memorandum and email reminders of the mandatory training. Additionally, training for volunteers has been developed thro
dependent on their roles within the agency. The auditor reviewed staff training records and concluded all training
requirements were met. JFK does not have volunteers or hire contractors.
§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:

Based on the review and analysis of all available evidence, the auditor finds the facility meets this standard, which requires notification to detainees of the agency's zero-tolerance policy.

CBP has established several information methods to notify detainees of the agency's zero-tolerance policy. During the onsite inspection, the auditor noted large zero-tolerance policy posters displayed on the walls throughout the holding area. The posters provide information on how to report sexual abuse and/or sexual assault. Additionally, CBP addresses the zero-tolerance policy 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. These posters were available in English and Spanish with a language identifying poster, "I speak", containing language identifying statements for approximately twenty-six different languages, to include distinct dialects of specific languages: namely, Arabic, Farsi, French, Gujarati, Haitian, Hindi, Japanese, Pashto, Portuguese, Punjabi, Romanian, Simplified Chinese, Tagalog, Urdu, and Vietnamese. In Interviews with SMEs and officers, interviewees were able to communicate that if detainees spoke a different language, there was a list of staff that spoke the most common languages spoken, in addition to an available language line for all languages. The auditor interviewed a detainee utilizing the language line for Mandarin. The auditor interviewed two detainees, of which, one interview with a detainee indicated that the detainee did receive and noticed the sexual abuse or assault information but did not understand the information due to her not speaking English or Spanish. The detainee indicated that no one told her about sexual abuse prevention, but also indicated she was able to communicate with staff. CBP designed ageappropriate posters which provides information and depicts cartoon pictures to make juveniles aware of the agency's zero-tolerance of sexual abuse. The posters are colorfully designed for detainees of tender age (13 and below), and juveniles (14 and above), and adults. CBP has also developed educational videos depicting a boy and a girl to encourage compliance with CBP's zero-tolerance of sexual abuse and sexual assault. The videos also encourage immediate reporting of actions that can be construed as sexual abuse and/or sexual assault.

§115.134 ·	- Specialized training: Investigations.
	Exceeded Standard (substantially exceeds requirement of standard)
	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does not meet Standard (requires corrective action)
\boxtimes	Not Applicable (provide explanation in notes):
Notes:	
N/A – Ref	fer 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)
\boxtimes	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:	

Based on the review and analysis, the auditor finds the facility is fully compliant with the standard, which requires the facility conduct an assessment for risk of victimization and abusiveness.

(a)(b)(c)(e): CBP has developed policies to ensure all detainees taken into custody are assessed for risk of victimization and abusiveness before being placed in any hold room. These policy and procedures include Memorandum for CBP Policy on Zero Tolerance of Sexual Abuse and Assault, dated March 11, 2015; CBP Directive 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. Interviews with SMEs and officers indicated that before detainees are held together, staff at the facility assesses whether a detainee may be at a high risk of being sexually abused or of being sexually abusive toward other detainees, staff asks each detainee about his or her own concerns about his or her physical safety, and staff make reasonable efforts to consider relevant information to assess risk per the standard. This risk assessment allows Officers to consider, to the extent that the information is available, (1) any mental, physical, or developmental disabilities; (2) the age of the detainee; (3) the physical build and appearance of the detainee; (4) whether the detainee has previously been incarcerated or detained; (5) the nature of the detainee's criminal history; (6) whether the detainee has any convictions for sex offenses against an adult or child; (7) whether the detainee has self-identified as gay, lesbian,

bisexual, transgender, intersex, or gender nonconforming; (8) whether the detainee has self-identified as having previously experienced sexual victimization; (9) and the detainee's own concerns about history her physical safety. Interviews confirmed that the information provided would only be shared with others on a need-to-know basis. SMEs and staff also confirmed that detainees determined to be at high risk of being sexually abused would be separated from other detainees by use of the family room, if available or not in use, to provide them with heightened security or protection. 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. Interviews with detainees indicated that both were around other individuals who were detained (each other), they were privately asked personal questions including their name, where they were from, and any potential criminal or detention history, and if they had any concerns for their safety.

§115.151(a)	through (c) -	Detainee	reporting.
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	Exceeded Standard (substantially exceeds requirement of standard)
\boxtimes	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does not meet Standard (requires corrective action)

Notes:

Based on the review and analysis of all available evidence, the auditor finds that the facility is fully compliant with this standard, which require providing methods for detainee reporting.

(a)(b)(c): The CBP has policies to ensure all detainees taken into custody are provided an opportunity to report any allegations of sexual abuse. These policies and directives include: DHS PREA Standards in Focus, 115.132 and 115.151, dated July 11, 2022; CBP Directive 2130-030; Commissioner's Memorandum with attached CBP Policy on Zero Tolerance of Sexual Abuse and Assault, dated March 11, 2015; Memorandum for Privacy and Diversity Office Prevention, Detection, and Response to Sexual Abuse and Assault in CBP Holding Facilities Directive, dated February 2, 2018; Memorandum from the Assistant Commissioner for OFO with attached Standards to Prevent, Detect, and Respond to Sexual Abuse and Assault in CBP Holding Facilities, dated August 12, 2014; CBP 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 the CBP's Zero-Tolerance Policy is visible or continuously and readily available to detainees. During the on-site portion of the audit, the auditor observed informational posters throughout the facility which provides a reporting phone number, in both English and Spanish. The reporting phone number is direct line to the DHS OIG. Interviews SMEs and officers indicated that if a detainee wished to utilize the reporting hotline, the detainee would be provided a phone in a room that allows confidentiality. In Terminal 8, staff indicated that detainees would be allowed to utilize the phone at the staff desk and allowed to move the phone to the corner of the desk at a distance where their call was private. The phones that are 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. Interviews with SMEs and officers confirmed 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. In the interviews, staff confirmed their responsibility to allow a detainee alleging sexual abuse to remain anonymous upon request. Interviews with staff overwhelmingly indicated that if staff are informed of an allegation of sexual abuse, officers would immediately notify their supervisor of the complaint and subsequently document the incident as required by policy. The auditor interviewed two detainees who indicated that they had seen the information regarding sexual assault information. One detained did not speak English or Spanish and stated through an interpreter that she did not understand the information, did not know to whom to report, whether she could report sexual abuse privately or anonymously, or if a family member or someone not at the facility could report on their behalf. The detainee was provided with the information and explained to her that a language line is available and staff would assist her if she needed translation.

§115.154 – Third-party reporting.

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

Notes:

Based on the review and analysis of all available evidence, the auditor finds that the facility is fully compliant with this standard requiring the facility to allow for third-party reporting.

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. Interviews with 13 officers indicated that staff would ensure the safety of the detainee by separating the detainee from the general population and/or perpetrator and notifying the supervisor.

§115.161(a) through (d) - Staff reporting duties.

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

Notes:

Based on the review and analysis of all available evidence, the auditor finds that the facility is fully complaint with this standard requiring staff reporting.

- (a)(b): 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 directs staff to report significant incidents to the (b) (7)(E) 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 51735-013B, 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. Interviews with staff confirmed their knowledge of their duty to immediately report any information they might have regarding allegations of sexual abuse. All Officers interviewed were able to verbalize at least one way in which to make a formal report. Since Officers were in possession of their PREA information cards, officers were able to include reporting mechanisms outside their chain of command, although most did not need to look at their card to answer the questions.
- (c): 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. Interviews with SMEs and Officers confirmed that staff were aware of the need for confidentially. Staff all acknowledged that information related to allegations of sexual abuse would only being shared as a function of their official capacities on a need-to-know basis.
- (d): 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 statues, to the designated State or local services agency under applicable mandatory reporting laws. Interviews with four SMEs provided that the local authority to whom CBP staff would report alleged victimization of persons under the age of 18 or of vulnerable adults is the Port Authority Police Department, who in turn would report the incident to the appropriate authority for juveniles.

§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:
Based on the review and analysis of all available evidence, the auditor finds the facility meets this standard, which requires the agency to provide protection to victims of sexual abuse and assault.
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. Interviews with SMEs and SMEs and Officers indicated that detainees would be held separately from the general population by placing the detainee in the family room and assigning an officer near the family room to ensure the safety of the detainee. The facility reported that they did not have any detainees who were identified as being at substantial risk of imminent sexual abuse.
§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:
Based on the review and analysis of all available evidence, the auditor finds the facility meets this standard, which requires the facility to report to other confinement facilities when detainees report allegations of sexual abuse and assault that occurred in another facility.
(a)(b)(c)(d): 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. 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 previous 12-month audit review timeframe. JFK did not receive any allegations that detainees had been sexually abused while confined to another facility. Interviews with SMEs provided that staff would immediately notify the facility that is indicated in the allegation that a detainee alleges they were abused along with notifying the CBP chain of command. During officer interviews, they stated that if they received an allegation from another facility of sexual abuse that occurred in this facility, they would treat the allegation as if they were notified by the detainee on site and follow the same steps to include notifying the JIC, CBP Information Center (CIC), and PSA Coordinator.
§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:
Based on the review and analysis of all the available evidence, the auditor finds the facility fully compliant with this standard requiring that staff follow first responder duties

(a)(b): CBP Directive 2130-030 provides detailed and concise information on the steps JFK 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 annually of all CBP 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 JFK 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. Interviews with four SMEs and 13 officers indicated they all understood and articulated their first responder duties. Officers stated that they would separate the detainees immediately, preserve the scene, prevent the victim and perpetrator form destroying any evidence by brushing their teeth, smoking, changing

the incident and their actions. The facility reported that during the previous 12-month audit review timeframe, they did not receive any allegations that detainees had been sexually abused. As such, there is no relevant documentation for review.
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§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:
Based on the review and analysis of all available evidence, the auditor finds the facility meets this standard, which requires the facility have a coordinated response plan.
(a): CBP Directive 2130-030 constitutes CBP's written 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. Interviews with four SMEs and 13 Officers confirmed that facility follows and utilizes CBP Directive 2130-030 to respond to sexual abuse and/or sexual assault. SMEs stated CBP Directive 2130-030 is JFK's coordinated institutional plan and followed if there was an incident of sexual abuse and/or sexual assault. (b)(c): 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. The facility indicated that they did not have any allegations of sexual abuse during the audit timeframe, therefore, did not have need to utilize the coordinated response plan. Accordingly, there was no documentation for the auditor to review.
§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:
Based on the review and analysis of all available evidence, the auditor finds the facility meets this standard, which requires the facility provides protection to detainees from contact with alleged abusers.
CBP Directive 2130-030 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. Interviews with SMEs and officers indicated that any staff member alleged to have perpetrated sexual abuse would be removed from duties requiring detainee contact pending the outcome of the investigation when the seriousness and the plausibility of the allegation make removal appropriate. JFK staff stated that the alleged perpetrator would be immediately removed and separated from detainees while under investigation. The facility has not had any reported incidents of sexual abuse or assault, therefore, there were no reports to review.
§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)

 $\hfill \square$ Does not meet Standard (requires corrective action)

Notes:

Based on the review and analysis of all available evidence, the auditor finds the facility meets this standard, which requires the agency provide protection to victims, staff, and witness who cooperate with investigations, against retaliation.

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. Interviews with SMEs and Memorandum for All CBP Employees CBP Policy on Zero Tolerance for having claimed or participated in an investigation regarding sexual abuse. Interviews with 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 August 12, 2014; Memorandum for All CBP Employees CBP Policy on Zero Tolerance for having claimed or participated in an investigation of allegations of participates in an investigation into an allegation of sexual abuse.

§115.17	71 -	- 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)
	\boxtimes	Not Applicable (provide explanation in notes):
Notes:		
N/A -	Ref	er to the CBP Sexual Abuse Investigations Audit Report.
§115.17	72 -	- 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)
	\boxtimes	Not Applicable (provide explanation in notes):
Notes:		
N/A -	Ref	er to the CBP Sexual Abuse Investigations Audit Report.
§115.17	76(a	a) and (c) through (d) — Disciplinary sanctions for staff.
		Exceeded Standard (substantially exceeds requirement of standard)
	\boxtimes	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does not meet Standard (requires corrective action)
		Not Applicable (provide explanation in notes):
Notes:		

Based on the review and analysis of all available evidence, the auditor finds the facility compliant with this standard, which requires the facility provide disciplinary sanctions for staff who commits sexual abuse or assault of detainees.

(a)(c)(d): CBP Directive 2130-030 and Directive 51735-013B, Standards of Conduct, personnel may be subjected to disciplinary or adverse action up to and including removable from their position and Federal service for substantiated allegations of sexual abuse and/or assault and/or violating CBP's sexual abuse policies. The Standards of Conduct provide notice to the employees that disciplinary action will occur, including up to removal, for substantiated allegations of sexual abuse and/or assault. This standard works to ensure agency staff understand the gravity and the criminal nature of engaging in sexual abuse of detainees. Interviews with JFK SMEs provided that the facility's role in disciplinary or adverse action against staff and contractors who violate the sexual abuse policy/procedures are to report and follow up with OPR regarding the investigation and disciplinary issued. An interview with the HQ LER SME provided that OPR provides investigations to the Employee Relations Branch, which is then reviewed by the Disciplinary Review Board, where the determination is made on what action is appropriate if inappropriate conduct is found. After the determination, the employee may respond. The Disciplinary Review Board then decides if disciplinary action is warranted and makes a final determination. This process is provided to staff during the onboarding process, new employees are given the Table of Penalties for Criminal Offenses to educated them on the consequences of violating

agency policy. 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, interviews with the HQ SAAI SME indicated that the agency would report such disciplinary findings to any relevant licensing bodies and designated law enforcement officials for violations of the sexual abuse and assault policies.

§115.177(a) and (b) – Corrective action for contra	ctors and volunteers.
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	Exceeded Standard (substantially exceeds requirement of standard)
\boxtimes	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does not meet Standard (requires corrective action)

Notes:

Based on the review and analysis of all the available evidence, the auditor finds the facility fully compliant with this standard, which requires corrective action for contractors and volunteers who commit sexual abuse and/or assault of a detainee.

(a)(b): 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, provided that the agency's process for prohibiting contractors and volunteers suspected of perpetrating sexual abuse or violating the PREA Standards from contact with detainees is included in the Memorandum of Understanding (MOU) with the contractors and volunteers. The MOU discusses the standards. If reported, the facility will begin the investigation process and the individual will not continue to have contact with detainees and will be relieved of duties until the process is completed in accordance with the CBP zero-tolerance policy. 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. The auditor also interviewed local SMEs who provided that immediate notification will be made to the chain of command via the telephone and through email, who will ensure the appropriate steps are taken. All interviews indicated that any contractor or volunteer suspected of perpetrating sexual abuse or violating the DHS PREA Standards would be separated from detainees, immediately. JFK POE reported that the facility has not had any contractors or volunteers in the previous 12 months. It should also be noted the maintenance of the terminals is conducted by employees hired by the JFK International Airport and do not come in contact with the detainees.

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

	Exceeded Standard (substantially exceeds requirement of standard)
\times	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:

Based on the review and analysis of all available evidence, the auditor finds the facility meets this standard, which requires victims of sexual abuse and assault have access to emergency medical services.

(a)(b): 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. Interviews with process in JFK SMEs indicated that emergency medical treatment and crisis intervention services are provided to alleged detainee victims of sexual abuse in a timely and unimpeded manner and includes access to crisis intervention services, access to emergency contraception and sexual transmitted infections prophylaxis, access to treatment and services in accordance with professionally accepted standards of care, is free to detainee victims, and is provided whether or not the victim names the abuser or cooperates with the investigation. This is done through immediate notification to the PAPD who initiates contact with Emergency Medical Technicians (EMT), who ensure that all medical procedures are followed.

§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:
Based on the review and analysis of all available evidence, the auditor finds the facility meets this standard, which requires the facility conduct sexual abuse incident reviews at the conclusion of investigations.
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. An interview with the HQ PSA provided that sexual abuse incident reviews are to be conducted at the conclusion of every investigation into allegations of sexual abuse, within 30 days of receiving the investigation results, documented in a written report for all substantiated and/or unsubstantiated allegation, documented whether changes in policy or practice could assisted in prevention or response to sexual abuse, documented whether recommendations for improvement was implemented or the reasons for not doing so, and is forwarded to the PSA Coordinator. The PSA stated that local law enforcement is involved with the sexual abuse incident review on a case-by-case basis. If the allegation happened locally, the local authorities would be involved. Simultaneously, OPR would be notified. Incident reviews are done within 30 days, then are sent to the PSA Coordinator, all in accordance with CBP policy of zero-tolerance for sexual abuse and sexual assault, to include the standards to prevent, detect, and respond to sexual abuse and sexual assault. An interview with OFO provided that sexual abuse incident reviews would involve local law enforcement on a case-by-case basis. If the incident is being investigated locally, local authorities will be involved. Simultaneously, OPR will be notified. Incident reviews are done within 30 days, then sent to the PSA; all in accordance with CBP policy of zero-tolerance for sexual abuse and sexual assault. Interviews with the JFK SMEs indicated that the facility has not received any recommendations to implement from a sexual abuse incident review. It should be noted that the facility reported it has not had any allegations or reports of sexual abuse or sexual
assault, therefore, there is no documentation for review.
§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.
ADDITIONAL NOTES
None.
AUDITOR CERTIFICATION: I certify that the contents of the report are accurate to the best of my knowledge and no conflict of interest exists with respect to my ability to conduct an audit of the agency under review. I have not included any personally identified information (PII) about any detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.
(b) (6), (b) (7)(C)
Auditor's Signature Date
Addition 3 Signature Date