

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



U.S. Customs and
Border Protection

AUDITOR

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

AGENCY

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

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

Name of Sector or Field Office:	Chicago, Illinois
Name of Chief or Director:	(b)(6)(b)(7)(C)
PREA Field Coordinator:	(b)(6)(b)(7)(C)
Sector or Field Office Physical Address:	610 South Canal Street, Room 300, Chicago, Illinois 60607
Mailing Address: <i>(if different from above)</i>	610 South Canal Street, Chicago, Illinois 60607

SHORT-TERM HOLDING FACILITY BEING AUDITED

Information About the Facility			
Name of Facility:	Midway International Airport, Main Terminal, Lower Level		
Physical Address:	5757 South Cicero Avenue, Chicago IL 60638		
Mailing Address: <i>(if different from above)</i>			
Telephone Number:	(b)(6)(b)(7)(C)		
Facility Leadership			
Name of Officer in Charge:	(b)(6)(b)(7)(C)	Title:	Area 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.

A Prison Rape Elimination Act (PREA) on-site audit of the Customs and Border Protection (CBP) Office Of Field Operations (OFO) Midway International Airport Port of Entry (MW POE) Holding Facility was conducted on Thursday, March 21, 2019, from 07:00 hours until 17:15 hours. The audit was conducted by (b)(6)(b)(7)(C), Certified PREA Auditor, contracted through Creative Corrections, LLC of Beaumont, Texas. This was the first PREA audit for the MW POE Secondary Holding Area. The Holding Area is a short-term processing and holding area detaining male and female adults, Unaccompanied Alien Children (UAC) and family units for a time period specified to be under 19 hours in normal operations; and pending the inadmissible traveler's flight back to their point of origination or transfer for removal or detention. The goal of OFO staff at MW POE is to determine the admissibility of all travelers as soon as possible and to return or transfer inadmissible travelers in the shortest and safest amount of time possible. The purpose of the audit was to determine compliance with the Department of Homeland Security (DHS) PREA Standards. The on-site audit followed the auditor's electronic review of CBP's PREA policies and procedures and telephonic interviews with CBP Headquarters (HQ) Subject Matter Experts (SMEs).

The Point of Contact for MW POE was Chief Customs and Border Protection Officer (CCBPO)/PREA Field Coordinator (PFC) (b)(6)(b)(7)(C).

An entry-briefing, led by CBP Prevention of Sexual Assault (PSA) Coordinator (b)(6)(b)(7)(C) and the Auditor was conducted at 07:30 on the day of the on-site review. Those in attendance at the entry-brief were:

(b)(6)(b)(7)(C), PSA Coordinator, Privacy and Diversity Office (PDO), HQ
(b)(6)(b)(7)(C), National OFO PREA Coordinator, OFO, HQ
(b)(6)(b)(7)(C), CCBPO/PFC, MW POE
(b)(6)(b)(7)(C), Supervisory Customs and Border Protection Officer (SCBPO), MW POE
(b)(6)(b)(7)(C), Language Access Coordinator, Privacy and Diversity Office (PDO), HQ

Immediately following the entry-briefing, all parties were given a tour of the MW POE operations area by the CCBPO and SCBPO, following the path a detainee would follow from their arrival gate; through secured airport corridors monitored and controlled by airport security; to the OFO passenger reception area for primary screening, into secondary screening, and into processing and holding. MW POE contains only (b)(7)(E) a partitioned toilet, currently under renovation.

The OFO facility at MW POE is located on the ground floor of the Main Terminal Building and is currently operational while under renovation and improvement. Passengers are directed from arriving flights through a corridor into the primary screening area. There are approximately 15 Global Entry and OFO self-service kiosks, 6 screening booths and a podium to receive the self-service passengers during large flights. Immediately behind the primary screening area is a corridor leading to the baggage screening and collection area. This configuration will change as renovation proceeds.

The secondary screening counter, monitoring/waiting area, processing offices and (b)(7)(E) are directly adjacent to the baggage screening area. Admissible travelers pass down a corridor to the right of this area and leave the terminal. Inadmissible or yet to be determined travelers are escorted to the secondary screening counter. The (b)(7)(E) had a (b)(7)(E) and is the center of the current renovation phase. Officers in the secondary screening area prefer to maintain constant supervision over detainees in one designated part of the secondary screening area as opposed to the remote (b)(7)(E) with no current (b)(7)(E). This area has adequate seating and an adjacent lavatory. A traveler who becomes disruptive could be placed in the (b)(7)(E) and fifteen minute visual checks are then mandated by policy. There is a partitioned toilet in this holding room.

All staff with direct contact to detainees are law enforcement Officers. Detainees are escorted in any area where janitorial or maintenance contractors may enter and they are always kept separate. There is no on-site CBP medical staff. Medical emergencies are addressed by Chicago EMS personnel or traveler/detainees are taken to local hospitals. The number of OFO Officers assigned to MW POE is commensurate with the size of the airport and the number of incoming international flights. On the day of the on-site audit, there were primary and secondary screening Officers

and supervisory staff performing all primary screening/secondary screening/processing/baggage-agriculture screenings/and holding tasks. There are several overlapping shifts beginning at 0700 hours and end at 0200 hours the next morning. Detainees remaining at MW POE at 2200 hours are transported to Chicago O'Hare POE for holding overnight.

Processing area/holding room (b) (7)(E) in the supervisors' offices, but are currently not operational due to ongoing renovation. Following the renovations, the secondary screening Officer station will also be able to view (b) (7)(E). The OFO (b) (7)(E) solely by OFO law enforcement staff.

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 MW POE specific documents, HQ Participation documents, and medical provider websites. The Auditor was also able to interview six HQ SMEs.

Following the entry briefing, the Auditor was given a complete tour of the the entire facility. The Auditor had complete access to the facility and observed primary screening, secondary screening, processing, and monitoring areas. The Auditor was able to monitor the primary screening of four different individual flights by shadowing the booth Officers who were performing their duties. The Auditor was provided with a (b) (7)(E) for staff and detainee interviews with a speaker telephone to access interpretive services. The Auditor was able to use a telephone line to privately call OIG.

During the on-site audit, the Auditor was able to interview staff from both shifts. In total, the Auditor interviewed two local Subject Matter Experts (SMEs) and five random staff. Five interviewed staff members were male and two were female. The Auditor had been given a target number of five staff interviews. Note: The two local day-shift SMEs interviewed were the CCBPO/PFC and the SCBPO. The night shift SCBPO was not interviewed because the facility was operating with several staff working overtime due to emergent staff leave and the SCBPO wanted to assist them. The Auditor was also able to review the local staff training curriculum for pat searches and cross-gender searches and the MW POE staff training portal.

The Auditor interviewed the only detainee during the on-site audit. The detainee was not accompanied by dependent children and there were no UACs held during the on-site audit. The lone detainee was a male from Mexico who was Limited English proficient (LEP). Language Services Associates was utilized for interpretive services. The detainee was also a Type 1 diabetic and the Auditor observed he was able to test his blood sugar and self-administer insulin with staff supervision. The detainee was determined to be inadmissible. The sole detainee did not identify as Lesbian, Gay, Bi-Sexual, Transgender, Intersex (LGBTI) and did not report being sexually abused when asked.

SUMMARY OF OVERALL FINDINGS:

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

On Thursday, March 21, 2019, an exit briefing for MW POE was held at 16:30. The exit briefing was opened by PSA Coordinator (b)(6)(b)(7)(C) and conducted by Creative Corrections Cetified PREA Auditor (b)(6)(b)(7)(C). Those in attendance for the briefing were:

(b)(6)(b)(7)(C), PSA Coordinator, PDO, HQ
(b)(6)(b)(7)(C), National OFO PREA Coordinator, OFO, HQ
(b)(6)(b)(7)(C), CCBPO/PFC, MW POE
(b)(6)(b)(7)(C), SCBPO, MW POE

During the audit process, the Auditor reviewed the compliance of 25 Subpart B standards at MW POE. The Auditor found MW POE exceeded one standard: 115.131; met 21 standards: 115.111; 115.114; 115.116; 115.117; 115.118; 115.121; 115.122; 115.132; 115.141; 115.151; 115.154; 115.161; 115.162; 115.163; 115.164; 115.165; 115.166; 115.167; 115.176; 115.177; 115.182, and 115.186; and did not meet two standards: 115.113 and 115.115.

SUMMARY OF AUDIT FINDINGS

Number of standards exceeded:	1
Number of standards met:	22
Number of standards not met:	2

OVERALL DETERMINATION

<input type="checkbox"/> Exceeds Standards (Substantially Exceeds Requirements of Standards)	<input type="checkbox"/> Low Risk
<input type="checkbox"/> Meets Standards (Substantial Compliance; Complies in All Material Ways with the Standards for the Relevant Review Period)	<input checked="" type="checkbox"/> Not Low Risk
<input checked="" 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:

The facility meets the standard. The agency has taken definitive steps to inform the public, all employees, and detainees of its adherence to the PREA Standards. CBP Directive 2130-030, Prevention, Detection and Response to Sexual Abuse/Assault in CBP Holding Facilities (1/19/2018), the Commissioner's Memorandum on CBP Policy on Zero Tolerance of Sexual Abuse and Assault, dated 3/11/15; and the Commissioner's Memorandum on UACs in Extended Detention (undated, posted 12/21/18) to all CBP employees clearly outline the duty of all CBP staff members to prevent, detect and respond to all allegations or observations of sexual abuse. Zero tolerance posters were observed throughout the facility.

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

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

Notes:

(a) The facility meets the standard provision through appropriate levels of supervision, operational procedures and (b) (7)(E). CBP Directive 2130-030 requires OFO to develop facility based guidelines to meet the supervision needs of each facility. Interviews with the Assistant Area Port Director (AAPD) and Supervisors verify shift Supervisors have both the responsibility and latitude to move shift staff or request additional staff from adjoining ports of entry as supervision needs require. During the on-site audit, the Auditor never witnessed a level of supervision lower than best practice for holding facilities. (b) (7)(E) are being added to all areas of the MW POE OFO facility, but are not currently operational due to the current facility renovation.

(b) The facility does not meet the standard provision. CBP Directive 2130-030 requires each Field Office implement an annual review process for all facilities. The AAPD detailed monthly supervisor meetings where supervisory personnel discuss security concerns, special incidents and circumstances and strategies to meet daily supervision demands. These daily reviews including the layout of the facility, the current size and composition of the traveler/detainee population, and other relevant factors including the length of time detainees are in custody. This practice was confirmed by interviews with the PFC and Supervisor. Supervisors have continuous access to the CCBPO/PFC who is based at MW POE. Unforeseen changes in schedule and passenger flow do occur and the CCBPO/PFC and Supervisors adjust post assignments accordingly. Normally, supervision concerns result in staff from the previous shift being held over. While the AAPD described the reviews of staffing from shift to shift/day to day, he did not indicate a more in-depth review is completed to meet the requirement of an annual review to determine if overall supervision levels are appropriate for the number of travelers/detainees being processed and/or held in comparison to previous years. Corrective action is required. **Corrective Action:** Provide documentation of a formal annual supervision review for MW POE.

(c) The facility does not meet the standard provision. While elements detailed in the standard provision are regularly discussed by supervisory personnel regarding day-to-day operations, there is no formal annual supervision review where all the elements are reviewed for MW POE. Corrective Action is required. **Corrective Action:** Provide documentation of a formal annual supervision review for MW POE which addresses all elements required by the standard provision.

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

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

☐ Not Applicable (provide explanation in notes):

Notes:

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

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

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

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

Notes:

(b) The facility does not meet the standard provision. CBP TEDS sets specific restrictions for cross-gender viewing and searches, in the absence of truly exigent circumstances. Interviews with Local SMEs and random staff confirm only pat searches are performed at MW POE and are performed by an Officer of the same sex as the subject. Procedures and SME interviews reveal any strip or body cavity search of a juvenile would have to be performed at a medical facility by a medical professional. The sole interviewed detainee reported he was pat searched and the search was performed by an Officer of the same gender.

(c) The facility meets the standard provision. CBP TEDS requires all strip and body cavity searches be documented. The Auditor was informed by the PFC no strip or body cavity searches were performed at MW POE in the past 12 months.

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

(e) The facility does not meet the standard provision. CBP TEDS prohibits the search or examination of a detainee's person solely to determine their gender. Several interviewed random staff reported they would ask a detainee to self-identify if they had a need to know the detainee's gender. All staff report strip searches cannot be performed except in exigent circumstances and with supervisory review when they have reasonable suspicion contraband is present. However, more than half of interviewed random staff members reported a transgender detainee would be pat searched according to biological status, and as necessary male biological areas would be searched by male Officers and female biological areas would be searched by a female Officer. The facility does not meet the standard provision. Corrective action is required. **Corrective Action:** Provide consistent agency guidelines for the pat-down search of a transgender detainee based on self-identification of gender.

(f) The facility does not meet the standard provision. The Auditor was able to review the local staff training curricula for such searches and training records for all MW POE staff on pat, strip and body cavity searches. However, the agency produced no specific training materials for pat searches, searches of transgender detainees, or cross-gender searches of any detainee; specifically how to properly search the breast and groin areas. This lapse in training has created a situation where Officers perform differently when performing pat searches, cross-gender searches, or searching transgender detainees. In regard to transgender searches, more than half of interviewed random staff

members report a transgender detainee would be pat searched according to biological status, and as necessary male biological areas would be searched by male Officers and female biological areas would be searched by a female Officer. Some Officers respond to the detainee's self-identification and they are pat searched by an Officer of the same gender as how they identify. Some Officers ask the detainee the status of their genitalia and they are searched by an Officer of the same biological gender as they indicate, regardless of their gender identification. **Corrective Action:** Provide documentation of specific consistent training on pat searches to include the breast and groin, cross-gender searches, and transgender pat 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 provide detainees with disabilities (e.g. hearing, sight, intellectual, psychiatric or developmental disabilities), access to CBP efforts to prevent, detect and respond to sexual abuse and assault. Interviewed random staff at MW POE explained how they would accommodate detainees with such special needs. There was only one detainee the day of the on-site audit and he presented with a pervasive medical need (Type 1 Diabetes). Secondary staff went out of their way to ensure the detainee ate, tested their blood and self-administered insulin in a timely manner. Staff in primary screening accommodated travelers in wheelchairs. All randomly interviewed staff report they would read or explain PREA requirements to any traveler who was detained. The lone detainee reported the processing Officer pointed out the PREA poster but he chose not to read it because the Officer had explained his PREA rights and he was the only detainee at that time.

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

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

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

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

Notes:

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

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

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

(d) The facility meets the standard provision. MW POE currently uses no contractors who have direct contact with detainees. Contractors are physically separated from detainees who are always escorted by Officers.

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

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

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

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

Notes:

(a) The facility meets the standard provision. MW POE is currently undergoing significant renovation. In planning for the renovation, the AAPD advised the Auditor all port and OFO renovations/expansions require a review by CBP/OFO to ensure all CBP objectives and directives are met including PREA. The current renovation at MW POE will update and relocate baggage scanning capabilities and will provide a more streamlined and renovated secondary screening, monitoring, processing and holding room. Renovation of the holding room has just been completed with the exception of (b) (7)(E).

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

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

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

Notes:

(c) The facility meets the standard provision. CBP Directive 2130-030 specifies the treatment services to be provided to a detainee victim of sexual assault. MW POE utilizes the services of Presence Resurrection Hospital, Chicago, for forensic examinations of sexual abuse victims determined to be evidentiary or medically appropriate at no cost to the detainee and only with the detainee's consent. This practice was confirmed by the CCBPO. The examination is to be performed by a Sexual Assault Forensic Examiner (SAFE) or a Sexual Assault Nurse Examiner (SANE). This practice was confirmed via interviews with Local SMEs. The Auditor confirmed the services with Presence Resurrection Hospital Emergency Department.

(d) The facility meets the standard provision. The Auditor determined Presence Resurrection Hospital has sexual abuse forensic examination services in-house in the Emergency Department. The Auditor's interview with the hospital's Emergency Department supervisor reveals the hospital does not have on-site victim advocacy services and utilizes an outside independent agency to provide victim advocacy services. SME interviews with the CCBPO and SCBPO confirm that there is no objection to advocates being present with the detainee during a forensic examination.

(e) The facility meets the standard provision. SME interview with the AAPD verifies the Chicago Police Department, Airport Division has been advised of and are agreeable to following PREA requirements.

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

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

Notes:

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

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

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

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

Notes:

(a) The facility exceeds the standard provision. All MW POE staff have received the mandatory eight-point PREA training including the agency's zero tolerance policies, detainee's rights to be free of sexual abuse and staff duty to report allegations of sexual abuse. Staff interviews confirm this training is received annually via the DHS online training system (PALMS). The Auditor reviewed the PREA training curriculum and training records while on-site. Note: Contract staff (maintenance, janitorial and external security) is not required to receive training as MW POE insures contract staff and detainees have no direct contact as all detainees are under constant staff supervision in either the holding or monitoring areas. There is no CBP medical staff at MW POE and no volunteers work at CBP holding facilities at this time. The CCBPO/PFC shared a staff portal locally developed. The portal allows MW POE staff to access HQ, area port, and MW POE directives, memoranda and training materials directly from their work station computers. The CCBPO/PFC has also uploaded resource materials related to sexual abuse, special populations, and responding to sexual abuse from the PREA Resource Center and allied sexual abuse prevention and advocacy organizations. The development of this portal demonstrates a high level of commitment to building a culture of sexual safety at MW POE. The MW POE also holds regular musters and informal shift meetings. The Auditor recognized the high level of teamwork, coordination and communication between the MW POE staff. For these reasons, the facility exceeds the standard.

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

(c) The facility meets the standard provision. Training records are maintained electronically and are maintained for a minimum of five years as required by the standard. Local SME interview with the Training Supervisor verifies compliance.

§115.132 – Notification to detainees of the agency's zero-tolerance policy.

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

Notes:

The facility meets the standard. MW POE maintains colorful, large print posters of DHS's zero tolerance policy in all detainee holding areas, in all processing areas, in all staff lounges and office areas, and in all secondary traveler screening areas. The posters are printed and posted in English and Spanish, but also contain a box providing zero tolerance and reporting information in all common languages. Interview with the lone detainee reveals the Officer pointed out the poster to him. SME and random staff interviews verify staff are relying on all travelers/detainees to read the PREA posters; they do not, and are not required to, point to them, explain them or make any PREA statements as part of routine screening. The agency addresses zero-tolerance prominently on its website at <https://www.cbp.dhs.gov/about/care-in-custody>. This posting was reviewed by the Auditor.

§115.134 – Specialized training: Investigations.

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

Notes:

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

§115.141(a) through (e) – Assessment for risk of victimization and abusiveness.

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

Notes:

(a) The facility meets the standard provision. CBP TEDS and CBP Directive 2130-030 require all detainees be assessed for being at high risk of sexual abuse before being placed in a hold room or holding facility. If a detainee is found to be at high risk, staff are to take steps to mitigate the danger. SME interviews report MW POE Officers consider the factors detailed in TEDS including previous criminal record, age, physical build, identification as LGBTI, history of sexual abuse victimization or perpetration, and the detainee's verbalized concerns for their own safety. Random staff interviews verify this practice

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

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

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

(e) The facility meets the standard provision. CBP TEDS requires staff ensure assessments are conducted in private where sensitive information cannot be learned by other parties. The dissemination of sensitive information is to be controlled on a "need to know" basis. Random staff interviews verify this practice. This practice was also supported by the detainee reporting he was asked questions in private.

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

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

Notes:

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

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

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

§115.154 – Third-party reporting.

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

Notes:

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

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

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

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

Notes:

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

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

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

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

§115.162 – Agency protection duties.

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

Notes:

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

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

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

Notes:

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

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

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

record.

(d) The facility meets the standard provision. The PFC reports the advised agency, if outside CBP, would be notified of the PREA requirements. SME interview with the CBPO/PFC verifies if MW POE receives an allegation from another facility a detainee was sexual assaulted while at MW POE, the allegation would be referred to for investigation.

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

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

Notes:

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

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

§115.165(a) through (c) – Coordinated response.

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

Notes:

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

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

§115.166 – Protection of detainees from contact with alleged abusers.

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

Notes:

The facility meets the standard. SME interview with the CBPO/PFC SME verifies any employee contractor or volunteer accused of sexual abuse/sexual assault would be removed from duties pending the results of the SAAI investigation. MW POE by practice does not allow direct contact between contractors and detainees and has no volunteers. Interview with the HQ Labor and Employee Relations (LER) SME reports Officers do not supervise contractors, but control detainee exposure. Should contractor/detainee contact somehow occur and there is an allegation of sexual abuse/assault; by first responder procedure, the contractor would be removed from detainee contact and the APD would seek the removal of the contractor from the facility.

§115.167 – Agency protection against retaliation.

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

Notes:

The facility meets the standard. CBP TEDS prohibits CBP staff from retaliating against any person, including a detainee, who alleges or complains about mistreatment, participates in an investigation into an allegation of staff misconduct, including sexual abuse, or for participating in sexual activity as a result of force coercion, threats, or fear

of force. The training on and implementation of this policy was verified by interviews with the HQ SAAI SME and the Local SMEs. Random staff interviews resulted in a consistent response; any form of retaliation by either a detainee or a staff member cannot be tolerated and would be reported either up the chain-of-command or to OIG, if circumstances required such a report.

§115.171 – Criminal and administrative investigations.

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

Notes:

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

§115.172 – Evidentiary standard for administrative investigations.

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

Notes:

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

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

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

Notes:

(a) The agency/facility meets the standard provision. There were no substantiated allegations of sexual abuse at MW POE during the last 12 months. Interviews with HQ LER SME verifies disciplinary action is pursued in all cases of substantiated sexual assault or violating sexual abuse policies and removal is always the presumptive action. CBP Directive 2130-030 states CBP personnel may be subject to disciplinary or adverse action up to and including removal from their position and Federal service for substantiated allegations of sexual abuse and/or assault and/or for violating CBP's sexual abuse policies.

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

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

§115.177(a) and (b) – Corrective action for contractors and volunteers.

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

Notes:

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

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

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

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

Notes:

(a)(b) The facility meets the standard provision. Detainee victims of sexual abuse at MW POE would be immediately transported to Presence Resurrection Hospital. This facility offers the comprehensive medical services as outlined in the standard provision. The services would be provided to the victim at no charge and even if the victim refuses to cooperate with the sexual abuse/assault investigation. Local SME interview with the MW POE PFC verifies these services and requirements. He also verified these services would be provided without cost to the detainee and regardless of the victim recanting their allegation or not cooperating with the subsequent investigation.

§115.186(a) – Sexual abuse incident reviews.

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

Notes:

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

§115.187 – Data collection.

- ☐ Exceeded Standard (substantially exceeds requirement of standard)
☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☒ Not Applicable (provide explanation in notes):

Notes:

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

ADDITIONAL NOTES

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

MW POE is a small, yet frequently busy facility. On the day of the on-site audit, there was a contingent of staff (including both supervisory staff) who perform primary and secondary passenger screenings, detainee monitoring and processing and holding. There are periods where the Officers are awaiting airplane arrivals. The Auditor observed staff discussing the day's experiences and how they would handle similar or different scenarios. Because the numbers at MW POE are smaller, the Auditor observed a high degree of screening and vigilance. The CCBPO and the SCBPO are very involved in assisting Officers as flights arrive and passengers are screened.

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

August 20, 2019
Date

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



U.S. Customs and
Border Protection

AUDITOR

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

AGENCY

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

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

Name of Sector or Field Office:	Chicago, Illinois
Name of Chief or Director:	(b)(6)(b)(7)(C)
PREA Field Coordinator:	(b)(6)(b)(7)(C)
Sector or Field Office Physical Address:	610 South Canal Street, Room 300, Chicago, Illinois 60607
Mailing Address: (if different from above)	610 South Canal Street, Chicago, Illinois 60607

SHORT-TERM FACILITY BEING AUDITED

Information About the Facility	
Name of Facility:	Midway International Airport, Main Terminal, Lower Level
Physical Address:	5757 South Cicero Avenue, Chicago, Illinois 60638
Mailing Address: (if different from above)	Same as Above
Telephone Number:	(b)(6)(b)(7)(C)

Facility Leadership			
Name of Officer in Charge:	(b)(6)(b)(7)(C)	Title:	Area Port Director
Email Address:	(b)(6)(b)(7)(C)	Telephone Number:	(b)(6)(b)(7)(C)

FINAL DETERMINATION

SUMMARY OF AUDIT FINDINGS:

Directions: Please provide summary of audit findings to include the number of provisions with which the facility has achieved compliance at each level after implementation of corrective actions: Exceeds Standard, Meets Standard, and Does Not Meet Standard.

An on-site audit of the Office of Field Operations (OFO), Midway International Airport Port of Entry (POE) Holding Facility was conducted on March 21, 2019, and the preliminary findings report was submitted on April 18, 2019. Following comments from CBP Headquarters and from the Auditor, the report was submitted in Final Draft on August 20, 2019.

At that time, the Auditor reviewed the compliance of 25 Subpart B standards and the Midway International Airport POE was found to have exceeded one standard: (115.131). The Chicago Midway International Airport was found in compliance with 22 standards: (115.111; 115.114; 115.116; 115.117; 115.118; 115.121; 115.122; 115.132; 115.141; 115.151; 115.154; 115.161; 115.162; 115.163; 115.164; 115.165; 115.166; 115.167; 115.176; 115.177; 115.182 and 115.186). The Midway International Airport POE was found to not be in compliance with two standards: (115.113 and 115.115).

On April 17, 2020, the Midway International Airport POE submitted a preliminary Corrective Action Plan (CAP) with a completion date of May 1, 2020. Several documents were requested by the Auditor. Additionally, an Annual Review of Detainee Supervision Guidelines (standard 115.113) document was submitted by the Midway International Airport POE. The Auditor requested that additional information regarding the supervision of detainees including Undocumented Alien Children (UAC) be included. An amended Annual Review of Detainee Supervision Guidelines was received on April 28, 2020. This information was reviewed by the Certified PREA Auditor and accepted. The Midway International Airport POE submitted staff re-training, muster and staff sign-offs for standard provision 115.115 on June 29, 2020. After an additional document was received on July 17, 2020, the Midway International Airport is now compliant with all PREA standards.

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

PROVISIONS

Directions: After the corrective action period, or sooner if compliance is achieved before the corrective action period expires, the auditor shall complete the Corrective Action Plan Final Determination. The auditor shall insert the provision(s) below that required corrective action and state if the facility's implementation of the provision now "Exceeds Standard," "Meets Standard," or "Does not meet Standard." The auditor shall include the evidence replied upon in making the compliance or non-compliance determination for each provision that was found non-compliant during the audit.

§115.113

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
- ☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- ☐ Does not meet Standard

Notes:

The Midway International Airport Port of Entry (POE) submitted a record of an Annual Review of Detainee Supervision Guidelines dated September 19, 2019, which satisfied standard provisions (b). Review of the report revealed that several elements required by standard provision (c) had not been satisfied and the report was returned for revision. The elements missing was a description of responses employed to respond to the different types of populations entering the Port of Entry, who were determined to be inadmissible. This included the direct supervision of detainees in Secondary Screening and in particular, Unaccompanied Alien Children (UAC). On April 28, 2020, an amended Annual Review of Detainee Supervision Guidelines was submitted to the Reviewing Auditor via Headquarters and was found to be satisfactory. The Midway International Airport POE is now compliant with 115:113.

§115.115

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
- ☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- ☐ Does not meet Standard

Notes:

On June 29, 2020, the Midway International Airport POE (POE) submitted both local and national documents outlining officer performance requirements regarding cross-gender staff announcements upon entering holding rooms, proper personal search techniques, cross-gender searches, determination of detainee gender identification and proper procedures for the pat search of transgender detainees. Also submitted were staff training muster sign-offs and acknowledgements from December 2018. The Auditor questioned the dates of re-training and on July 17, 2020, the Auditor received additional documentation of retraining musters issued on July 17, 2020, to all personnel at the Midway International Airport POE. The Midway International Airport POE is now compliant with Standard 115.115.

OVERALL DETERMINATION - AFTER IMPLEMENTATION OF THE CORRECTIVE ACTION PLAN

- | | |
|--|---|
| <ul style="list-style-type: none"> <input type="checkbox"/> Exceeds Standards (Substantially Exceeds Requirements of Standards) <input checked="" type="checkbox"/> Meets Standards (Substantial Compliance; Complies in All Material Ways with the Standards for the Relevant Review Period) <input type="checkbox"/> Does Not Meet Standards (Requires Corrective Action) | <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Low Risk <input type="checkbox"/> Not Low Risk |
|--|---|

AUDITOR CERTIFICATION:

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

(b)(6)(b)(7)(C)
Reviewing Auditor's Signature

July 28, 2020
Date