

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) (b)(6)(b)(7)(C)	Telephone Number:	(b)(6)(b)(7)(C) (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:	U.S. Border Patrol
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SECTOR OR FIELD OFFICE

Name of Sector or Field Office:	Laredo, Texas
Name of Chief or Director:	(b)(6)(b)(7)(C)
PREA Field Coordinator:	(b)(6)(b)(7)(C)
Sector or Field Office Physical Address:	207 W. Del Mar Blvd., Laredo, Texas
Mailing Address: (if different from above)	

SHORT-TERM HOLDING FACILITY BEING AUDITED

Information About the Facility			
Name of Facility:	Cotulla Station		
Physical Address:	3423 Interstate Highway 35, Cotulla, Texas 78014		
Mailing Address: (if different from above)			
Telephone Number:	(b)(6)(b)(7)(C)		
Facility Leadership			
Name of Agent in Charge:	(b)(6)(b)(7)(C)	Title:	Patrol Agent in Charge (PAIC)
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) U.S. Border Patrol (USBP), Cotulla Station, Cotulla, Texas, was conducted on Tuesday, June 18, 2019, from 0600 hours until 1700 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 Cotulla Station Holding Facility. The station has a short-term processing and holding area detaining male and female adult detainees, unaccompanied alien children (UAC) and family units for a period specified to be under 24 hours, under normal operating circumstances, pending transfer for removal or detention. The purpose of the audit was to determine compliance with Subpart B of the Department of Homeland Security (DHS) Standards to Prevent, Detect, and Respond to Sexual Abuse and Assault in Confinement Facilities, 6 C.F.R. Part 115, (the "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 the Cotulla Station was (b)(6)(b)(7)(C), Deputy Patrol Agent in Charge (DPAIC).

Upon arrival at the facility, the Auditor was met by (b)(6)(b)(7)(C), Assistant Chief, USBP, HQ, and the DPAIC. After a brief introduction, the Auditor conducted interviews with the overnight Border Patrol Agents and Supervisor. Upon completion of the initial interviews, an entrance meeting was held. Attending the entrance meeting were:

(b)(6)(b)(7)(C), Certified PREA Auditor, Creative Corrections

(b)(6)(b)(7)(C), Assistant Chief USBP, HQ

(b)(6)(b)(7)(C), Deputy Patrol Agent in Charge (DPAIC)

(b)(6)(b)(7)(C), Patrol Agent in Charge (PAIC)

At this time, the Auditor explained the audit process and answered any questions the attendees had. We further discussed the schedule for the audit, interviewing locations, and operational concerns the Auditor needed to be aware of prior to beginning. Upon completion of the meeting, a facility tour was conducted.

The Cotulla Station is located on Frontage Road in Cotulla, Texas. The facility is a single-story structure. The main entrance to the facility is controlled by the staff who are stationed at the facility, and the lobby is secured after hours with visitors needing to ring a bell for assistance from the Border Patrol Agents on duty. During daytime hours, 0800-1600, the door opening to the lobby and the entrance to the main facility is controlled by support staff whose office is adjacent to the lobby. This office has a large window that faces the lobby so any entrant can be viewed. The facility consists of offices, a staff lounge, and a muster room. The entrance into the detention area is further secured with a locked door.

Upon entering the detention area, you enter into the control booth, but entrance into the (b)(7)(E) area is further secured with a locked door. The (b)(7)(E) are constructed (b)(7)(E), which provides a view from the control booth. The (b)(7)(E) all have a toilet located within them. These toilets are behind a half-block wall approximately three feet high, and removable curtains have been added to provide further privacy. During the on-site audit, the facility was housing detainees in (b)(7)(E), and they had further housing in the sally port area. (b)(7)(E) remained empty, so the detainees in the sally port area could utilize the toilet in the empty cell. The facility does not have any showers; the detainees are transported to a local motel and offered showers.

At the time of the audit, the facility was housing unaccompanied male and female juveniles (UAC), family units (both mothers with children and fathers with children), and single UAC males and females who were taken into custody by the Border Patrol Agents assigned to the station.

The facility has created a housing management system that provides the best possible supervision of the detainees under the current conditions. The unaccompanied juveniles, both male and female, are housed by themselves in separate (b)(7)(E) the family units are housed as per parents' gender (all female units together and all male units together), (b)(7)(E). The facility has contracted medical services onsite to assist with medically clearing all detainees upon their arrival at the facility. Any detainee who is found to have a medical condition that needs attention will be brought to the hospital.

The CBP PREA Posters and the DHS Language Identification Posters are located in this area outside of the cells. The CBP PREA Posters are posted in both English and Spanish. They are also located in the Sally Port area where the facility is housing detainees at this time.

(b) (7)(E) within the facility holding cells.

The overall construction of the cell allows the agents to have a view into the cells at all times.

When further discussing family units or UAC, the agents confirmed the following process: if a family unit is detained, they will be kept together, unless there is an indication of criminal activity involving the child, child abuse, neglect, unauthorized custody, etc. The family unit will be placed into a cell with the same makeup i.e., mothers and children, fathers and children. The facility is housing single fathers and children in the open sally port area, where they are under direct supervision at all times.

At the time of the audit, DHS Volunteers were assigned to the Cotulla Station to assist in the daily operation of the facility. The volunteers worked all shifts; the volunteer force consists of sworn federal law enforcement officers (LEO), and non-law enforcement. The LEOs assist with security and oversight of the detainees; the non-LEOs assist with the daily needs of the detainees, which include feeding and providing daily necessities.

Upon completion of the audit, an exit meeting was held and the Auditor provided an overview of the audit and interviews. Attending the exit meeting were:

(b)(6)(b)(7)(C), Certified PREA Auditor, Creative Corrections

(b)(6)(b)(7)(C), Assistant Chief, USBP, HQ

(b)(6)(b)(7)(C) Deputy Patrol Agent in Charge (DPAIC)

(b)(6)(b)(7)(C), Patrol Agent in Charge (PAIC)

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.

Scope of the Audit: Before the on-site audit, the Auditor was able to review the HQ and local Pre-Audit Questionnaires (PAQs), the HQ Responsive Documents and Data Requests, local documents, including the Cotulla Station specific documents, HQ Participation documents, and medical provider websites. The Auditor was also able to conduct four HQ SMEs interviews and to speak to the author of the local PAQ. The local documentation was provided to the Auditor following the on-site audit.

The Auditor had complete access to the facility and detention areas, as well as having the opportunity to observe the processing of the detainees. The Auditor was provided with a private interview room for agent and detainee interviews with a speaker telephone to access interpretive services.

During the on-site audit, the Auditor was able to interview agents from all three shifts. In total, the Auditor interviewed two local SMEs and eleven random agents. The Auditor had the opportunity to interview ten detainees (two unaccompanied children (UAC), three family units, and five single detainees).

During the Audit Process, the Auditor reviewed the compliance of 25 Subpart B standards at the Cotulla Station. The Auditor found the Cotulla Station met 22 standards (115.111; 115.114; 115.116; 115.117; 115.121; 115.122; 115.131; 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 facility has not met standards 115.113 and 115.115.

Standard 115.118 is not applicable to the facility.

Corrective action: Provide documentation that an annual review of the detainee supervision guidelines and its application for all provisions in standard provision (c) are taken into consideration and that the results of the review are provided to the PSA Coordinator.

Corrective Action: Provide documentation of re-training of all agents at the Cotulla Station on transgender pat-down searches.

SUMMARY OF AUDIT FINDINGS	
Number of standards exceeded:	0
Number of standards met:	22 + 1 not applicable
Number of standards not met:	2
OVERALL DETERMINATION	
<input type="checkbox"/> Exceeds Standards (Substantially Exceeds Requirements of Standards) <input type="checkbox"/> Meets Standards (Substantial Compliance; Complies in All Material Ways with the Standards for the Relevant Review Period) <input checked="" type="checkbox"/> Does Not Meet Standards (Requires Corrective Action)	<input type="checkbox"/> Low Risk <input checked="" type="checkbox"/> Not Low Risk

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, explain the reasoning. If additional space for notes is needed, please utilize space provided on the last page.

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

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

Notes:

(a) CBP Policy on Zero Tolerance of Sexual Abuse and Assault signed by CBP's Commissioner on March 11, 2015, constitutes the agency's zero tolerance policy of sexual abuse and assault. Additionally, CBP Directive 2130-030, Sexual Abuse and Assault Prevention and Response, dated January 19, 2018, mandates zero-tolerance toward all forms of sexual abuse and sexual assault and outlines their approach to preventing, detecting, and responding to such abusive conduct. The Directive was provided to all CBP employees on February 5, 2018 and again reissued on February 12, 2018, through the agency email program referred to as CBP Central. It defines in detail for all staff and detainees the prohibited acts. CBP National Standards on Transport, Escort, Detention, and Search (TEDS), dated October 2015, sets forth nationwide Standards that govern CBP's interaction with detained individuals. The random agent interviews confirm they were provided, and are familiar with CBP Directive 2130-030. This policy is currently available to everyone on the agency webpage.

§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 standard requires the agency shall ensure that each facility maintains sufficient supervision of detainees, including through appropriate staffing levels and, where applicable, (b) (7)(E) to protect detainees against sexual abuse. The Auditor confirmed with the facility supervisors that the facility is staffed 24 hours a day, and the staffing levels are fluid depending upon detainee flow and needs of the facility. When a detainee is taken into custody, they will be under direct supervision. The Auditor was informed the Cotulla Station maintains enough agents to provide a safe and secure environment for detainees. The supervisors and the PREA Field Coordinator state the established staff positions are appropriate. The (b) (7)(E) have toilets located in the rear corner behind a partition; removable curtains have been added for further privacy. The facility does not have showers. If a detainee is (b) (7)(E), they are checked by agents and DHS Volunteers.

(b)(c) CBP Directive 2130-030 directs that OFO and USBP develop and document comprehensive detainee supervisions guidelines for facilities under their respective control, which it has done in the issuance of the CBP National Standards on Transport, Escort, Detention, and Search. The Directive further requires each U.S. Border Patrol Sector implement an annual review of the detainee supervision guidelines to determine the supervision needs of each facility and review those supervision guidelines and applications at least annually to determine whether adequate levels of detainee supervision and monitoring exist. The results of the annual review are to be provided to the PSA Coordinator. The standard also requires the review take into account the physical layout of the facility, composition of detainees, the prevalence of substantiated and unsubstantiated instances of sexual abuse, findings, and recommendations of incident reviews and any other relevant factors. The SMEs confirmed they conduct an annual review of the supervision guidelines taking into account physical layout of the facility, composition of detainees, the prevalence of substantiated and unsubstantiated instances of sexual abuse, findings, and recommendations of incident reviews and any other relevant factors, however, no document was provided to show the results of the annual review. He further confirmed that supervision guidelines are outlined in the policy. This was confirmed during the policy review. **Corrective action:** Provide documentation that an annual detainee supervision guideline review and its application are conducted where all provisions of standard provision (c) are taken into consideration and a copy of the results provided to the PSA Coordinator.

§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)(b) CBP TEDS requires the Cotulla Station to place each at-risk juvenile in the least restrictive setting appropriate to their age and special needs, provided the setting is consistent with the need to ensure the safety and security of the detainee and that of others. The Auditor interviewed agents who would process unaccompanied juveniles and family units taken into custody. When discussing family units or children, the agents confirmed the following process: if a family unit is detained, they will be kept together, unless there is an indication of criminal activity involving the child, child abuse, neglect, unauthorized custody, etc. The family units are (b) (7)(E) with the same makeup (single mothers and children, and fathers and children). The facility is housing the single fathers and children, and fathers and mothers with children in the sally port area. This is done for the overall safety of the family unit; they are under direct supervision in this area. The agents indicated that unaccompanied juveniles would be housed together by gender. The facility was housing male juveniles and female juvenile at the time of the audit. The agents also confirm that minors accompanied by an adult are thoroughly vetted to the extent they can to ensure a parental or legal guardianship relationship. This includes the use of consulates, legitimate documentation, and interviews. If a legal relationship cannot be established, the minor is handled as an unaccompanied juvenile, separated from adults, under the least restrictive setting. The process of housing was confirmed during the interviews with both the agents and detainees. The detainees who were identified as unaccompanied children and family units confirmed the housing arrangements to the Auditor.

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

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

Notes:

(b)(c) CBP TEDS details the type and conditions under which searches can and will be performed to ensure the safety of agents, civilians, and detainees. It prohibits cross-gender strip searches or cross-gender visual body cavity searches except in exigent circumstances including consideration of agent safety, or when performed by medical practitioners. If such a search were to be required, policy requires supervisory approval prior to performing any strip/body cavity search. The search must also be recorded in the appropriate electronic system of record. The policy further states agents must not conduct visual body cavity searches of juveniles and will refer to all such body cavity searches of juveniles to a medical practitioner. The supervisor and agent interviews confirm the facility does not conduct strip searches and body cavity searches.

(d) CBP TEDS specifies the requirement that enables detainees to shower (where showers are available), perform bodily functions, and change clothing without being viewed by staff of the opposite gender, except in exigent circumstances or when such viewing is incidental to routine cell checks or is otherwise appropriate in connection with a medical examination or under medical supervision. The holding cells (b) (7)(E). The toilets in the cells are located behind partitions and removable curtains completely block the view from the windows. The agents confirmed they knock on the door and announce their presence upon entering. The holding cells have large windows that allow the detainees to see the agents approaching the cell. The facility does not have shower facilities, and it was confirmed that the detainees are not held at the facility any longer than necessary to process.

(e) CBP TEDS prohibits staff from searching or physically examining a detainee for the sole purpose of determining the detainee's gender. If the detainee's gender is unknown, agents are to ask the detainee their gender or gender identity. If the detainee declines to state their gender, the gender will be recorded in the appropriate electronic system(s) of record as unknown. Agent interviews indicate they are aware of the prohibition on searching detainees to determine their gender.

(f) CBP TEDS states a search is to be performed based on the same gender, declared gender, or gender identity. During the supervisor and agent interviews, they explained that an agent would conduct an immediate pat-down search either in the field or upon arrival at the facility. When possible, the agents conduct same-gender pat searches; this was confirmed by interviews with the agents. All agents have been trained in cross-gender pat-down search procedures, and these were initially taught at the academy. The agents attend quarterly training, and one of the mandatory yearly training topics is arrest, handcuffing, and search procedures. The interviewed agents confirmed they received the training in the academy and during yearly scenario training. They further explained that an agent would conduct an immediate pat-down search either in the field or upon arrival at the facility. The interviewed agents stated they would perform cross gender pat searches utilizing the blade or back of their hands. Only one agent confirmed that

if a detainee identified as a transgender, they would utilize an agent of the same gender identity to conduct the pat-down search. If the same gender agent was not available, the agents confirmed they would utilize the cross-gender pat-down search techniques to pat search the detainee. At the time of the audit, no transgender or intersex detainees were in custody. Corrective Action is necessary. **Corrective Action:** Provide documentation of re-training of all agents at the Cotulla Station on transgender pat-down 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)(b)(c) CBP TEDS and CBP Directive 2130-030 requires detainees with disabilities (e.g., detainees who are hearing impaired; those who are blind or have low vision; or those who have intellectual, psychiatric, or speech disabilities) to have access to CBP efforts to prevent, detect, and respond to sexual abuse and assault. When necessary to ensure effective communication with detainees who are hearing impaired, steps are to include providing access to in-person, telephonic or video interpretive services that enable effective, accurate, and impartial interpretation, both receptively and expressively, using any necessary specialized vocabulary. During agent interviews, the Auditor was informed if a communication problem exists during processing; the agent utilizes Interpreters and Translations Incorporated to provide information to detainees in a language they understand. The agents further state blind detainees would be dealt with individually with the agent reading them information, and if deaf, they would write back and forth. For low mental functioning individuals, they would provide a verbal explanation to ensure they understood the information. The agents confirm they would refer to the DHS publication, "A Guide to Interacting with People Who Have Disabilities" to assist in giving guidance on the best way to accommodate detainees who are deaf and can't speak, or who have psychiatric, low-level learning, or low functioning detainees. The Auditor reviewed the publication and confirmed all of the disabilities are addressed. This publication was in the aforementioned PREA binder. The interviewed agents confirmed that they always have found a way to interact with the detainees; this interaction is necessary to complete the processing of the detainee. They further confirmed that they do not use other detainees to interpret and would not in a situation of sexual abuse or assault. The interviewed detainees stated that they can communicate with the Spanish speaking agents, and the agents have used an interpreter if the agent did not understand the language they were speaking.

§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) CBP Directive 2130-030 requires the Office of Human Resource Management (HRM) to establish policy and procedures to ensure CBP does not hire or promote personnel or enlist the services of a contractor or volunteer who have had previous substantiated allegations of engaging in sexual abuse and assault to any position where the employee may interact with detainees in CBP holding facilities. The Auditor interviewed the HQ HRM SME and was informed CBP would not hire or promote any employee or contractor who has been found to have engaged, been convicted of engaging, or civilly or administratively adjudicated to have engaged in sexual abuse as defined in the Standard and agency policy. She also states interviews conducted with new applicants as well as applicants for promotion, include specific questions about any previous sexual abuse misconduct.

(b)(c)(d)(e) CBP Directive 2130-030 requires the Office of Professional Responsibility (OPR) ensure background investigations are conducted for applicants for employment and contractors having contact with detainees to determine their suitability, and updated background investigations be conducted every five years for CBP personnel who may have contact with detainees. The HQ Personnel Security Division (PSD) SME indicates background checks for CBP are the most thorough investigations performed for DHS. She confirms the background investigators ask all potential employees and contractors if they have engaged in, or have ever been charged with, sexual abuse. She related an affirmative response results in the individual not being hired. The SME also informed the Auditor rechecks are initiated every five years. The Auditor submitted thirteen names to OPR to review for background rechecks. The documentation provided by HQ demonstrated the five-year recheck was initiated within five years as required. The facility does have medical contractors who have contact with detainees. As indicated by the HQ PSD SME, background checks are conducted on contract employees who have contact with detainees. Further, material omissions regarding this type of misconduct or providing false information are grounds for termination or withdrawal of an offer of employment. The HQ HRM SME informed the Auditor all staff have an affirmative duty to disclose any such misconduct, false information, and any material omissions. This information is provided to them upon hiring when issued the Employee Code of

Conduct document, and they are reminded annually during training on the Performance and Learning Management System (PALMS).

(f) The HQ PSD SME and the local SME further confirmed that if a former employee were involved in a substantiated investigation and a future institutional employer where the employee applied to work requested the information, they would provide the information.

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

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

Notes:

(a) The standard provision is not applicable as the Cotulla Station has acquired no new facility or undergone a major expansion since construction.

(b) The facility has not made any upgrades to the (b) (7)(E) at the facility; the SME stated that if any (b) (7)(E), they would take into consideration sexual safety as well as the overall safety of the detainees.

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

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

Notes:

(c)(d) CBP Directive 2130-030 requires the Cotulla Station to provide emergency medical treatment and crisis intervention services, including a forensic medical exam, in accordance with professionally accepted standards of care to alleged victim detainees of sexual assault. The treatment is without financial cost to the detainee and regardless of whether the victim names the alleged abuser or cooperates with any investigation arising out of the incident. CBP TEDS requires if the detainee is transported for a forensic examination to a medical facility that offers victim advocacy services, agents will permit the detainee to use such services to the extent available, consistent with security needs. The Facility SME confirmed a victim would receive medical and mental health treatment at no cost as well as allowing advocacy personnel access to detainees, which is provided at the hospital, along with the SANE examination. He further stated that a detainee would be transported to Frio Regional Hospital in Pearsall, Texas, for a forensic medical examination. The facility SME confirmed they follow the guidelines set down by the Texas Association Against Sexual Assault. These procedures include protocols to maximize the potential for obtaining usable physical evidence. The Auditor further confirmed with the SME that anyone under the age of 18 involved in an incident would be taken to Child Advocacy Center at the Children's Alliance of South Texas located in Cotulla, Texas for examination. The Auditor contacted a supervisor at both the Frio Regional Hospital and the Child Advocacy Center and confirmed these services are offered.

(e) The local SME confirmed that the La Salle County Sheriff's Office would conduct the criminal investigation of alleged sexual abuse at the facility. He provided documentation confirming they would follow the provisions of the standards and all applicable Texas State Laws.

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

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

Notes:

(c)(d) CBP Directive 2130-030 requires staff with knowledge, suspicion, or information of any incident of sexual abuse and/or assault of a detainee in a holding facility; retaliation against any person, including a detainee, who reports, complains about, or participates in an investigation about an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation to report to the Joint Intake Center (JIC). The local SME and supervisors confirm an allegation of sexual abuse would be reported to JIC and the Commissioner's Situation Room in accordance with policy. The report would be made by the supervisor on duty. The PREA Field Coordinator confirms an Incident Report to the JIC and the Commissioner's Situation Room would be submitted upon learning of an incident. He also indicated the La Salle County Sheriff's Office would be notified as they have the legal authority to conduct criminal investigations. All notifications would be documented in the Incident report. The Cotulla Station did not have any incidents of sexual abuse within the last 12 months.

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

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

Notes:

(a)(b)(c) CBP Directive 2130-030 requires all uniformed Officers and Agents, Special Agents, fact finders, contractors, and volunteers who may have contact with detainees in CBP holding facilities receive PREA training as required in Subpart B of the DHS Standards. The Auditor reviewed the training curriculum provided to staff at the Cotulla Station through PALMS. This training includes the agency's zero-tolerance policy for all forms of sexual abuse, the definitions and examples of prohibited and illegal sexual behavior, the right of detainees to be free from sexual abuse, and the right of staff and detainees to be free from retaliation for reporting it. The training also provides information on where sexual abuse may occur; recognition of physical, behavioral, and emotional signs of sexual abuse; and methods of preventing and responding to such occurrences. Staff are instructed on how to avoid inappropriate relationships with detainees, and how to communicate effectively and professionally with detainees, including lesbian, gay, bisexual, transgender, intersex, or gender non-conforming detainees. The Auditor confirmed during interviews and review of the training materials that these topics are provided in training. The Auditor was provided a roster printed from PALMS showing all employees assigned to the Cotulla Station have received this training within the past 12 months. The Auditor further confirmed the training was initially provided within two years of the implementation of PREA and is provided every two years. The facility provided training documentation dating back to 2016. The local SME and supervisors state the Cotulla Station has contract medical and DHS volunteers who have contact with detainees. The contract medical have been provided training on PREA at the facility this was confirmed through review of the signed acknowledgments forms from the medical personnel. The DHS Volunteers have all received training. This was confirmed through the documentation provided through the PSA Coordinator showing all volunteers were trained through Federal Emergency Management Agency (FEMA), and all DHS CBP volunteers took the PALMS course.

§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:

CBP has published its zero-tolerance policy through its webpage (<https://www.cbp.gov/about/care-in-custody>). The Cotulla Station notifies all detainees of its zero-tolerance policy through posters located in the holding area. The Auditor observed posters in English and Spanish. Information on the posters includes: CBP has zero-tolerance for sexual abuse/assault; reporting can be anonymous and confidential; be safe and get help; tell a CBP official; call the DHS Office of Inspector General (OIG) (toll-free number provided), and telecommunication devices available by calling a toll-free number (provided). All interviewed detainees were aware of the posters and related that they knew how to report if anything occurred.

§115.134 – Specialized training: Investigations.

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

Notes:

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

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

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

Notes:

(a)(b)(c)(d) CBP TEDS states before placing any detainees together in a holding room the processing agent must assess the information before them to determine if the detainee may be considered an at-risk detainee, or at risk of posing a threat to others. This assessment by policy includes: whether the detainee has exhibited a mental, physical or developmental disability; the age of the detainee; their physical build; any prior arrests or incarcerations; is the detainee identified as LGBTI or gender non-conforming; any prior sexual victimization; and the detainee's own concerns about his/her physical safety. The local SME, supervisors and agents confirm the assessment is completed

upon intake to the facility. The interviewed agents confirmed that they ask if the detainee has any physical safety concerns before placing them into a holding cell. They further confirmed if they had any concerns of self-harm or victimization, they would keep the detainee separate, rather than placing them into a cell with any other detainees. They also indicate they received training on the assessment through PALMS. The interviewed detainees confirmed they were asked questions about safety concerns, age, name, county of origin, and traveling companions. The unaccompanied children confirmed they are separate from the adult detainees, and the family units confirmed they are placed with other family units where the parent is the same gender.

(e) CBP TEDS requires the Cotulla Station to implement appropriate controls on the dissemination of private and sensitive information provided by detainees during this risk assessment. Agents can disclose this information only to those with a need to know. The supervisors and agents understood their obligation on not disclosing any information from the assessment.

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

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

Notes:

(a)(b) CBP Directive 2130-030 requires detainees be provided with multiple ways to privately report sexual abuse and assault, retaliation for reporting sexual abuse and assault, or staff neglect or violations of responsibilities that may have contributed to such incidents. It further requires the facility to provide at least one way for detainees to report sexual abuse to a public or private entity not connected to the agency. Detainees must be able to report confidentially and anonymously, if desired, as well as both verbally and in writing. CBP's procedures for reporting alleged sexual abuse and assault are to be visible or continuously and readily available to detainees at holding facilities and posted on the CBP public website. The Auditor confirmed during the local SME and agent interviews the detainees are provided the reporting information through posters placed in the holding area. During the facility tour, the Auditor observed the posters; they are in both English and Spanish. The interviewed agents further confirm they utilize Interpreters and Translators Incorporated for any other language interpretation. The posters state the detainee can report to the DHS OIG. The posters provide the telephone number to call. During the supervisor and agent interviews, they confirmed if a detainee indicated they wanted to call OIG, they would be taken into an office to call and placed in the room by themselves to call. The interviewed supervisors and agents indicated the detainee would not have to provide a specific reason for wanting to call OIG. They also indicated that they would dial the number for them to ensure they were contacting OIG, and leave the room. The interviewed detainees were all aware of the posters on how to report and confirmed they understood how to report.

(c) CBP TEDS requires agents at the Cotulla Station to receive allegations reported to them from third parties, in writing, anonymously, and verbally and promptly record such reports according to operational procedures. The interviewed local SME, supervisors and agents confirm all verbal allegations of sexual abuse or sexual assault made to them would be documented in writing.

§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:

CBP Directive 2130-030 states detainees may utilize third-party individuals to report allegations of sexual abuse. The agency provides reporting information for anyone wishing to report any allegation on behalf of a detainee on their webpage <https://www.cbp.gov/about/care-and-custody/how-make-report>. The information on the webpage provides a toll-free telephone number, USPS address and email, address to the JIC, and a toll-free telephone number, a direct complaint link and USPS address for DHS OIG for anyone wishing to make an allegation on behalf of a detainee.

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

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

Notes:

(a)(b) CBP Directive 2130-030 requires staff to report as promptly as possible any knowledge, suspicion, or information of the following: an incident of sexual abuse and/or assault of a detainee in a holding facility; retaliation against any person, including a detainee, who reports, complains about, or participates in an investigation about an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. CBP Directive 2130-030 also requires all staff to report any misconduct upon becoming aware of it. CBP TEDS requires staff to immediately report: any knowledge, suspicion, or information regarding an incident of sexual abuse against any detainee; retaliation against detainees or staff who reported or participated in an investigation about such an incident; and staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. CBP Directive 51735-013A, Standards of Conduct, dated March 13, 2012, not only allows staff to report within their chain of command, it requires them to report outside of their chain of command to either JIC, or by contacting CBP Office of Professional Responsibility, OPR, and contacting DHS OIG to report all allegations of misconduct. The Auditor confirmed the reporting requirements during the Local SME, supervisor and agent interviews. They stated they would immediately report any allegation of sexual abuse, retaliation, or staff failure to perform their duties utilizing the reporting avenues outlined in the policy. They also confirmed any allegation would be immediately reported to a supervisor.

(c) CBP Directive 2130-030 requires staff not reveal any information related to a sexual abuse report except as necessary to aid the detainee, protect other detainees or staff, or to make security and management decisions. This information about confidentiality is provided to all staff in the mandatory PALMS PREA training, as well as in policy. Interviews with the local SME, supervisors and agents confirm information would not be shared with other staff except on a need to know basis or during an investigation into the matter.

(d) CBP Directive 2130-030 requires CBP staff to notify relevant agencies if the alleged victim of a sexual assault is a vulnerable adult or under the age of 18. Interviews with the local SME and supervisors confirm should a vulnerable adult or person under 18 be sexually assaulted at the Cotulla Station. The supervisor would submit an Incident Report to the JIC and the Commissioner's Situation Room. Notifications would be completed as required by CBP Directive 3340-025E. The PREA Field Coordinator stated he would make the notification to the proper State Agencies. Staff at the Cotulla Station indicate the facility has not had any incidents requiring this type of notification during the last 12 months.

§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:

CBP TEDS states if an agent has a reasonable belief a detainee may be subject to a substantial risk of imminent sexual abuse, he or she shall take immediate action to protect the detainee. The local SME, supervisors and agents interviewed indicate any detainee believed to be in imminent danger of being sexually abused will be separated from other detainees. They all confirm the facility can place a detainee in a holding cell by themselves for protection if needed.

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

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

Notes:

(a)(b) CBP Directive 2130-030 requires staff at the Cotulla Station, upon receiving an allegation that a detainee was sexually abused while confined at another facility, to notify the agency or administrator. On August 13, 2014, a memorandum was issued by the Chief, USBP, titled, Implementation of the Standards to Prevent, Detect, and Respond to Sexual Abuse and Assault in CBP Holding Facilities which requires CBP facilities to report allegations received at CBP facilities to the prior agency or administrator of the facility within 72 hours. An Incident Report to JIC and the Commissioner's Situation Room would be submitted as required by CBP Directive 3340-025E. Interviews with the local SME and supervisors confirm these notifications would be done immediately. There were no notifications made by this facility during the last 12 months as no alleged incidents at other facilities have been reported to any Cotulla Station staff.

(c)(d) CBP Directive 2130-030 requires that staff who makes notification to other confinement facilities document the date and time the administrator at the other facility was notified of the allegation. Local SME and supervisors confirm these notifications and documentation of the notification would be done immediately by the on-duty facility supervisor. They further indicate if an allegation was received, it would be referred for an immediate investigation as outlined in the policy.

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

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

Notes:

(a)(b) CBP Directive 2130-030 details the responsibilities of the first staff on the scene of a reported allegation of sexual abuse. The Directive requires staff members to separate the alleged victim and abuser, preserve and protect the crime scene, and if the abuse occurred within a period that still allows for the collection of physical evidence, request the alleged victim and abuser do not take any actions that could destroy physical evidence. This is further outlined in the PALMS training that all staff complete. The Cotulla Station does not allow contractors, mission support volunteers, or civilian staff into the holding area by themselves; supervisors or agents are always present. The policy does, however, address their responsibilities if they do encounter a detainee and something is reported to them. The policy requires a contractor, volunteer, or civilian staff to request the alleged victim not to take any actions that could destroy physical evidence and notify law enforcement staff. The interviewed agents indicate they would separate the victim from the abuser, provide medical assistance if needed, preserve evidence to the extent possible, and notify their supervisor. The DHS Volunteers have all been trained on the PREA Policy; the Auditor confirmed that part of the training is their duty to report immediately to an agent.

§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) CBP Directive 2130-030 indicates that the entire document constitutes CBP's written institutional plan outlining the coordinated multidisciplinary team approach to responding to sexual abuse. The policy covers all aspects from hiring, training, reporting, responding, medical and mental health services, investigations, and data collection. The local SME, during his interview, discussed the institutional plan. He stated information about specific responsibilities are explained in the Directive and reinforced in training.

(b)(c) CBP Directive 2130-030 states if an alleged victim of sexual abuse and assault is transferred to another DHS facility, the Cotulla Station must inform the receiving DHS agency of the alleged incident and the alleged victim's potential need for medical or social services. If the alleged victim of sexual abuse and assault is transferred to a non-DHS facility, the Cotulla Station must inform the receiving facility or agency, as permitted by law, of the incident and the alleged victim's potential need for such services, unless the alleged victim requests otherwise. The local SME confirms that during the last 12 months, the Cotulla Station has had no cases requiring any such notification to a DHS or non-DHS facility. All incidents of this type require the supervisor to submit an Incident Report to the JIC and the Commissioner's Situation Room upon notification. Any transfer or move would require the supervisor to update JIC of the incident, and notify the receiving facility. This process was detailed to the Auditor by the local SME and supervisors as the Cotulla Station has had no incidents for the Auditor to review. Notifications would be completed as required by CBP Directive 3340-025E.

§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:

CBP Directive 2130-030 requires agency management consider whether any staff, contractor, or volunteer alleged to have perpetrated sexual abuse and assault 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 makes removal appropriate. The HQ Sexual Abuse and Assault Investigations (SAAI) SME indicates any allegation of sexual assault or sexual abuse involving staff, a contractor, or volunteer would result in the person being removed from detainee contact pending the outcome of an investigation if the seriousness and plausibility of the allegation makes removal appropriate. The procedure was confirmed during the local SME interview; he further indicates the Cotulla Station had not had any allegations of sexual abuse made against a staff member requiring this type of response.

§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:

CBP Directive 2130-030 prohibits agents and other CBP personnel from retaliating against any person or detainee, who reports, complains about, or participates in an investigation of sexual abuse and assault. This retaliation prohibition is also detailed in the PREA training (PALMS) each staff member receives at the Cotulla Station. The Auditor interviewed the local SME, supervisors and agents. Each was aware of the policy prohibiting retaliation against anyone who makes an allegation of sexual abuse or participates in the investigation. The local SME informed the Auditor there had been no allegations of retaliation made at the Cotulla Station during the last 12 months.

§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): 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): 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) CBP Directive 2130-030 informs CBP personnel they 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 assault and/or for violating CBP's sexual abuse policies. The Auditor confirmed with the HQ Labor and Employee Relations (LER) SME and HQ SAAI SME that staff would be subject to disciplinary action up to and including removal from Federal Service for a substantiated allegation of sexual abuse or violating the agency sexual abuse policy.
(c) CBP Directive 2130-030 requires OPR to report all removals or resignations in lieu of removal to appropriate law enforcement agencies for violations of the agency or facility sexual abuse and assault policies unless the activity was not criminal. The local SME and HQ SAAI SME confirm CBP would notify law enforcement of all removals or resignations in lieu of removal for violations of the agency zero-tolerance policy. They further indicate there were no such resignations or removals at the Cotulla Station within the last 12 months.
(d) CBP Directive 2130-030 requires OPR to report all removals or resignations in lieu of removal to any relevant licensing bodies for violations of the agency or facility sexual abuse and assault policies, to the extent known. The local SME and HQ OPR SME confirm OPR would notify licensing bodies, if known, of all removals or resignations in lieu of removal for violations of the agency zero-tolerance policy. They confirm there were no such resignations or removals at the Cotulla Station within the last 12 months.

§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:

CBP Directive 2130-030 requires any contractor or volunteer suspected of perpetrating sexual abuse and assault be removed from all duties requiring detainee contact pending the outcome of an investigation, as appropriate. As previously stated, the Cotulla Station does not allow contractors or public volunteers in the holding area without the presence of supervisors or agents. The Auditor did not observe any contractors or mission support volunteers alone in the holding rooms during the site visit. The local SME indicates that if sexual misconduct was alleged to have occurred by them, this would result in their removal from duties and contact with any detainees pending the outcome of an

investigation. He indicated he would be responsible for notifying both the local law enforcement and any licensing bodies.

§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) CBP Directive 2130-030 requires alleged sexual assault victims be provided timely unimpeded access to emergency medical treatment and crisis intervention services, including emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care. It also requires emergency medical treatment services to be provided to the alleged victim without financial cost and regardless of whether the victim names the alleged abuser or cooperates with any investigation arising out of the incident. The local SME and supervisors confirm they are aware of alleged victims of sexual assault are to receive all medical service and medications without cost even if the detainee does not name the abuser or cooperates with the investigation. The Auditor further confirmed with the SME that anyone under the age of 18 involved in an incident would be taken to a Child Advocacy Center at the Children's Alliance of South Texas located in Cotulla, Texas for examination.

§115.186(a) – Sexual abuse incident reviews.

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

Notes:

(a) CBP Directive 2130-030 requires after every investigation of sexual abuse and assault, a sexual abuse incident review is to be conducted within 30 days. The review is to determine whether the allegation or investigation indicates a change is needed in policy or practice to better prevent, detect, or respond to sexual abuse. The recommendation(s) for improvement outlined in the review must be implemented, or the agency must document the reasons for not doing so in a written response. The report and response are to be forwarded to the PSA Coordinator. The Auditor interviewed the PSA Coordinator about the incident review process for allegations of sexual abuse. She informed the Auditor the operational offices conduct sexual abuse incident reviews consistent with the procedures outlined in Section 18.1 of CBP Directive 2130-030. The Cotulla Station had no incident reviews conducted during the audit period as the facility had no allegations of sexual abuse incidents investigated requiring one.

§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.

The Auditor conducting the audit was unable complete any corrections required in this report. The initial report was submitted by the Auditor on September 13, 2019. (b)(6)(b)(7)(C), Certified PREA Auditor, has reviewed the Auditor's notes and has made grammatical changes, policy references, and restructuring of the paragraphs within the report applying them to the appropriate standard provisions.

AUDITOR CERTIFICATION:

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

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

September 13, 2019
Date

(b)(6)(b)(7)(C)
Secondary Auditor/Reviewer Signature

March 3, 2020
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
------------------------	------------------------------------

PROGRAM OFFICE

Name of Program Office:	U. S. Border Patrol
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SECTOR OR FIELD OFFICE

Name of Sector or Field Office:	Laredo, Texas
Name of Chief or Director:	(b)(6)(b)(7)(C)
PREA Field Coordinator:	(b)(6)(b)(7)(C)
Sector or Field Office Physical Address:	207 W. Del Mar Blvd., Laredo, Texas
Mailing Address: (if different from above)	Same as Above

SHORT-TERM FACILITY BEING AUDITED

Information About the Facility	
Name of Facility:	Cotulla Station
Physical Address:	3423 Interstate Highway 35, Cotulla, Texas 78014
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:	Patrol Agent in Charge (PAIC)
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 Customs and Border Protection (CBP), U.S. Border Patrol (USBP), Cotulla Station, was conducted on June 18, 2019, and the preliminary findings report was submitted on September 15, 2019. Following comments from CBP Headquarters and from the Reviewing Auditor, the report was submitted as a Final Draft on March 4, 2020.

At that time, the Auditor reviewed the compliance of 25 Subpart B standards and the Cotulla Station was found to be in compliance with 22 standards: (115.111; 115.114; 115.116; 115.117; 115.121; 115.122; 115.131; 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 Cotulla Station was found to not be in compliance with two standards: (115.113 and 115.115). Standard provision 115.118 was not applicable to the Cotulla Station.

The Cotulla Station submitted a preliminary Corrective Action Plan (CAP) dated April 7, 2020. In conjunction with the submission of the CAP, an Annual Review of Detainee Supervision Guidelines document was submitted to comply with standard provision 115.113 (b) and (c). This information was reviewed by the assigned Certified PREA Auditor and Program Manager for Creative Corrections and accepted. The document was found to be sufficient for compliance and the Cotulla Station is now compliant with Standard 115:113.

On September 29, 2020, the Cotulla Station submitted a copy of a memorandum dated September 17, 2020, to all CBP Customs and Border Patrol Agents and all Directorate Chiefs reinforcing proper pat search techniques to comply with standard provision 115.115 (f). In conjunction with the memorandum, a Muster Module was attached which provides requirements of Safety Searches, Threat Assessments, and Pat Search Techniques for cross-gender, transgender, and intersex detainees. On October 6, 2020, the staff re-training and confirmation of staff understanding roster was received. The Auditor reviewed the submitted documentation and found the Cotulla Station to be compliant with standard 115.115.

The Cotulla Station 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:

On April 7, 2020, the Cotulla Station submitted a record of an Annual Review of Detainee Supervision Guidelines dated April 7, 2020, which satisfied all elements of the standard. These elements included the correct listing of participants, facility descriptions, and a description of responses employed to respond to the holding of diverse populations at the Cotulla Station including Unaccompanied Alien Children (UACs). Cotulla Station is now compliant with standard provisions 115:113 (b) and (c).

§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 September 29, 2020, the Cotulla Station submitted a memorandum from the Chief, Strategic Planning and Analysis Directorate, dated September 17, 2020, to all Patrol Agents and Directorate Chiefs on the pat search techniques of transgender and intersex detainees according to the detainee's declared gender identity. The memorandum referenced sections 4.3 and 5.5 of the National Standards on Transport, Escort, Detention, and Search (TEDS) policy.

The memorandum also included a Muster Module that provides instructions to agents in the safe search of suspects, threat assessments, and pat search techniques for cross gender, same gender, transgender, and intersex detainees.

On October 7, 2020, the Cotulla Station submitted four training rosters to the Auditor, documenting substantial compliance regarding the retraining musters detailed above.

The Cotulla Station is now compliant with standard 115.115 (f).

OVERALL DETERMINATION - AFTER IMPLEMENTATION OF THE CORRECTIVE ACTION PLAN	
<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)	<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

 October 13, 2020
Date