

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



U.S. Customs and  
Border Protection

## AUDITOR

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

## AGENCY

<b>Name of Agency:</b>	U.S. Customs and Border Protection
------------------------	------------------------------------

## PROGRAM OFFICE

<b>Name of Program Office:</b>	Office of Field Operations
--------------------------------	----------------------------

## SECTOR OR FIELD OFFICE

<b>Name of Sector or Field Office:</b>	Laredo Field Office
<b>Name of Chief or Director:</b>	(b)(6)(b)(7)(C)
<b>PREA Field Coordinator:</b>	(b)(6)(b)(7)(C)
<b>Sector or Field Office Physical Address:</b>	109 Shiloh Drive, Laredo, TX 78045
<b>Mailing Address: (if different from above)</b>	NA

## SHORT-TERM HOLDING FACILITY BEING AUDITED

### Information About the Facility

<b>Name of Facility:</b>	Hidalgo POE
<b>Physical Address:</b>	1026 S. International Blvd., Hidalgo, TX 78557
<b>Mailing Address: (if different from above)</b>	NA
<b>Telephone Number:</b>	(b)(6)(b)(7)(C)

### Facility Leadership

<b>Name of Officer in Charge:</b>	(b)(6)(b)(7)(C)	<b>Title:</b>	Acting Port Director
<b>Email Address:</b>	(b)(6)(b)(7)(C)	<b>Telephone Number:</b>	(b)(6)(b)(7)(C)

## AUDIT FINDINGS

### NARRATIVE OF AUDIT PROCESS AND DESCRIPTION OF FACILITY CHARACTERISTICS:

**Directions:** Discuss the audit process to include the date(s) of the audit, names of all individuals in attendance, audit methodology, description of the sampling of staff and detainees interviewed, description of the areas of the facility toured, and a summary of facility characteristics.

The initial Prison Rape Elimination Act (PREA) audit of the U.S. Customs and Border Protection (CBP), Office of Field Operations, Hidalgo Point of Entry (POE), Hidalgo, Texas, was conducted on July 18, 2019, by PREA certified Auditor William Peck, a contractor for Creative Corrections, LLC. The single-story facility is located at 1026 S. International Blvd., Hidalgo, Texas, and is utilized by CBP for short-term detention of individuals pending release from custody or transfer to a court, jail, prison, other agency or other unit of the agency.

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"). (b)(6)(b)(7)(C), Prevention of Sexual Assault (PSA) Coordinator, Privacy and Diversity Office (PDO) Headquarters (HQ); (b)(6)(b)(7)(C), Deputy Director, Personnel Security Division (HQ); (b)(6)(b)(7)(C), Employee Relations Specialist (HQ); (b)(6)(b)(7)(C), acting in lieu of (b)(6)(b)(7)(C), Branch Chief CBP Hiring Center (HQ); (b)(6)(b)(7)(C), Sexual Abuse and Assault Investigations Coordinator (SAII), (HQ); (b)(6)(b)(7)(C), National OFO PREA Coordinator, OFO, HQ, HQ; and (b)(6)(b)(7)(C), Chief Supervisory CBP Officer, Hidalgo POE, provided the HQ and local Pre-Audit Questionnaires (PAQ) along with supporting documents for Hidalgo POE on the secure CBP SharePoint website approximately three weeks prior to the on-site portion of the audit. Pre-audit preparation included a thorough review of all supplied documentation and supporting materials provided by the facility along with the data included in the completed PAQs. The documentation received included agency policies with corresponding attachments, procedures, forms, training curricula, and other PREA-related materials provided to demonstrate compliance with the PREA standards.

The Auditor arrived at Hidalgo POE at 5:45 a.m., on July 18, 2019, and proceeded to the office of (b)(6), (b)(7)(C) Chief Supervisory CBP Officer/PREA Field Coordinator. At approximately 8:00 a.m., the Auditor proceeded to the facility conference room where the in-briefing was conducted. Those in attendance were:

(b)(6)(b)(7)(C), Acting Port Director  
(b)(6)(b)(7)(C), Assistant Port Director  
(b)(6)(b)(7)(C), Chief Supervisory CBP Officer

After introductions and a brief question and answer period the in-briefing ended and the tour of Hidalgo POE began.

Hidalgo POE has (b)(7)(E), (b)(7)(E). Each holding room contains a toilet, posters on the walls in Spanish and English informing detainees of how and to whom to report (in writing, anonymously to the Office of Inspector General (OIG)) any allegations of sexual abuse, or report an incident of sexual abuse by notifying a CBP official. The holding rooms also provide a sitting area. The (b)(7)(E) are in the Administrative Offices, (b)(7)(E). There are also sitting areas outside of the holding rooms in the processing area. Hidalgo POE is staffed around the clock by CBP Officers only, however, there are medical contractors working in these areas. The Officers are present within a reasonable range in the event of a non-medical emergency or need for law enforcement response. Privacy is respected behind examination curtains for medical staff and detainee, while Officers remain in the immediate area of the medical staff conducting examinations. Hidalgo POE receives males, females, family units, and juveniles.

During the site visit, the Auditor was able to observe the initial part of the detainee intake process. Line staff walked the Auditor through the arrival and intake process that each detainee receives upon arrival. The typical time to be held at Hidalgo POE for detainees is 48 hours. Detainees are provided food and bedding for the duration of the time they are there.

Scope of the Audit: The Auditor reviewed all relevant policies, procedures and documents in assessing Hidalgo POE. Information not available in the original documents was asked for and received. This sampling included 13 background investigation records, 4 detainee risk assessment forms, staff rosters, and staff PREA training. The Auditor had access to all parts of the facility and found (b)(7)(E) being used for close detainee observation or equipment requiring a (b)(7)(E). While on-site the Auditor interviewed 15 staff (11 Officers, 3 local SMEs and the PFC) and 4 detainees (adults). The Auditor used Language Services Associates to

provide interpretative services for the detainee interviews. There were no allegations of sexual assault reported at the Hidalgo POE within the last 12 months.

**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 July 18, 2019, an exit briefing was held in the Hidalgo POE Conference Room. In attendance were:

(b)(6)(b)(7)(C), Acting Port Director  
(b)(6)(b)(7)(C), Chief Supervisory CBP Officer

The Auditor discussed observations made during the on-site audit and gave preliminary findings of the audit. He informed those present of initial concerns and explained that he would not be able to make a final determination until he reviewed the on-site notes from interviews, policies, and Standard requirements.

The Auditor did not find compliance with three Standards: 115.113 (b) No documentation of an annual review of the detainee supervision guidelines and its application was provided; 115.115 (f) No documentation of transgender search training provided; 115.121(e) Documentation not provided making a request to the Hidalgo Police department they comply with subparts (a) through (d) of the Standard.

**SUMMARY OF AUDIT FINDINGS**

Number of standards exceeded: 0

Number of standards met: 21 + 1 Not applicable

Number of standards not met: 3

**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:

(a) CBP Policy on Zero Tolerance of Sexual Abuse and Assault signed by CBP's Commissioner on March 11, 2015, constitutes CBP's policy on zero tolerance of sexual abuse and assault. CBP Directive 2130-030, Sexual Abuse and Assault Prevention and Response, dated January 19, 2018, was provided to all staff on February 5, 2018, and reissued on February 12, 2018 through the agency email program referred to as CBP Central. These two policies mandate zero-tolerance toward all forms of sexual abuse and sexual assault which outlines the agency's approach to preventing, detecting, and responding to such abusive conduct. It defines in detail for all staff and detainees the prohibited acts. This policy is supplemented with CBP National Standards on Transport, Escort, Detention, and Search (TEDS), dated October 2015, which sets forth nationwide Standards that govern CBP's interaction with detained individuals. The random staff interviews confirm they were provided and are familiar with CBP Directive 2130-030 and the Commissioner's memorandum. These policies are 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) Hidalgo POE provides appropriate levels of supervision, operational procedures and supplemental (b) (7)(E). CBP Directive 2130-030 requires OFO to develop facility based guidelines to meet detainee supervision needs of each facility. The Auditor spoke with the facility Subject Matter Experts (SMEs) and the PREA Field Coordinator (PFC) who discussed at length the supervision guidelines, informing the Auditor there are no definitive daily staffing numbers established at Hidalgo POE. Staff numbers are driven by the number of detainees brought in for processing, and situations going on in the community and at the border. The Auditor was informed that on any given day Hidalgo POE maintains enough Officers to provide a safe and secure environment for detainees. The local SME, staff and the PFC state the established staff positions at Hidalgo POE are appropriate and flex from day to day. There were (b) (7)(E) located in the general area, however there were (b) (7)(E) in the holding rooms. The two hold rooms had mostly glass and could be adequately supervised by staff and the third hold room had a glass window on the door.

(b) CBP Directive 2130-030 requires a comprehensive detainee supervision guideline to determine operational needs at Hidalgo POE that meets the facility's detainee supervision needs and review those supervision guidelines and application at least annually to determine whether adequate levels of detainee supervision and monitoring exist. The results of the development of comprehensive detainee supervision guidelines and annual review are to be provided to the PSA Coordinator. Hidalgo POE did not provide this auditor documentation to show that an annual review of the detainee supervision guidelines was conducted. **Corrective Action:** Provide documentation of the annual review of the detainee supervision guidelines and its application at the Hidalgo POE taking into consideration all elements within standard provision (c) and provide a copy to the PSA Coordinator as stated in CBP Directive 2130-030.

(c) Hidalgo POE has developed guidance for supervision ratios for juveniles and unaccompanied children, and influx of detainees being held. The interviewed leadership states established ratios are driven by detainee population sizes and they review operational needs routinely as there is an established series of population thresholds that drive staffing allocations and changes as needed. They further stated they consider all factors required in the standard. Therefore, the factors in the Standard appear to have been considered and utilized when reallocating staff dependent on population variations.

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

- Exceeded Standard (substantially exceeds 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 Hidalgo POE to place each juvenile in the least restrictive setting appropriate to their age and special needs, provided the setting is consistent with the need to ensure the safety and security of the detainee and that of others. The Auditor interviewed Officers who process these juveniles and children brought to Hidalgo POE who state they are processed as either accompanied by a parent or legal guardian, or as an unaccompanied child (UAC). The UAC is held separately from any adult under the direct supervision of Officers. The minor child/juvenile is typically placed in a sitting area in front of the Officer or in a holding room. According to the Officers, the UAC remains under the supervision of the Officer until removal from the holding room. The Officers also state minors accompanied by an adult are thoroughly vetted to the extent they can to ensure a parental or legal guardianship relationship exists. This includes use of consulates, legitimate documentation and interviews. If a legal relationship cannot be established the minor is handled as an UAC, separated from adults, and held under the least restrictive setting under the direct supervision of an Officer. There were no UACs or juveniles present for the Auditor to interview during the site visit.

**§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 Officers, civilians and detainees. It prohibits cross-gender strip searches or cross-gender visual body cavity searches except in exigent circumstances including consideration of officer safety, or when performed by medical practitioners. If performed, the policy requires these strip/body cavity searches be recorded in the electronic system of record. CBP TEDS details that Officers/Agents must not conduct visual body cavity searches of juveniles and shall refer all such body cavity searches of juveniles to a medical practitioner. During random interviews, the local SME, Officers and Supervisors explained, according to policy requirements, the conditions under which pat searches, strip searches and body cavity searches could be performed. All indicate strip searches and body cavity searches are not done at Hidalgo POE, but would be done at a medical facility if required. There have not been any of such searches conducted in the past 12 months. Their explanations are in compliance with the Standard and the policy.

(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. As previously noted, there are (b) (7)(E) in any of the (b) (7)(E) and there is a wall around the toilets in each of the holding rooms. Interviews with Officers confirm they knock on the door or window and announce upon entering. It should be noted each of the holding room's exterior walls are entirely made up of glass. Detainees usually see the Officers prior to their knocking and entering. Detainees are transported outside of the facility for showers as Hidalgo POE has no showers onsite. Random interviews with detainees indicate staff of the opposite gender knock and/or announce prior to entering the hold rooms.

(e) CBP TEDS prohibits staff from searching or physically examining a detainee for the sole purpose of determining the detainee's gender-related characteristics. If the detainee's gender is unknown, Officers/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. Interviews with random staff indicate staff are aware of the prohibition on searching detainees to determine their gender.

(f) A review of both policy and the training curriculum for staff at Hidalgo POE reveals Law Enforcement staff did not receive specific training on conducting pat down searches of intersex and transgender detainees as required by the Standard. Random staff indicate in their interviews all pat searches are performed in a professional manner. They stated that same sex pat searches are the norm, but in a situation involving safety of the Officer and no females being available to conduct the search, opposite gender Officers may conduct pat searches. Interviewees informed the Auditor they have not yet received pat search training specific to transgender and intersex detainees. Interviewed staff gave differing answers that reflected two different understandings of transgender search policies and procedures, one based on the old policy of assigning a searching officer based on the detainee's biological anatomy; the other one based on the new policy of searching by staff of the same gender as the detainee's gender, gender identity, or declared gender. The Standard is

not compliant. **Corrective Action:** Provide documentation all staff have been trained on procedures for conducting pat searches of transgender and intersex detainees as required by the Standard.

**§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) have access to CBP efforts to prevent, detect, and respond to sexual abuse and/or 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 the staff interviews the Auditor was informed if a LEP (Limited English Proficiency) communication problem exists during processing the Officer utilizes the CBP interpreter service, Language Line to provide information to detainees in a language they understand. The Officers further state visually challenged or deaf detainees would be dealt with individually with the Officers reading them information and/or providing visual information to hearing-challenged detainees as with the posters through an interpreter, if necessary, and could even include referral to outside medical authorities for assistance. CBP would not use a detainee interpreter for another detainee unless the detainee expresses a preference for the detainee to provide interpretation, and Shift Supervisor determines that such interpretation would be consistent with DHS policy, normally a process used with family members. However, interpretation would never be provided by minors, alleged abusers, detainees who witnessed the alleged abuse, and detainees who have a significant relationship with the alleged abuser.

**§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)(b)(e)(f) CBP Directive 2130-030 requires the Office of Human Resource Management (HRM) to establish policy and procedures and ensure CBP does not hire or promote personnel who have had previous substantiated allegations of engaging in sexual abuse and/or assault to any positions where the employee may interact with detainees in CBP holding facilities. The Auditor interviewed the HQ HRM SME prior to the site visit and was informed CBP will 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 any applicants for promotion include specific questions about any previous sexual abuse misconduct, and 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 on hiring when issued the U.S. Customs and Border Protection Standards of Conduct and they are reminded annually during training on the Performance and Learning Management System (PALMS).

(c)(d) 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 suitability and that updated background investigations be conducted every five years for CBP personnel who may have contact with detainees. The HQ OPR/Personnel Security Division (PSD) SME indicates background checks (Tier 4, Tier 5) for CBP are the most thorough investigations performed for DHS. She informed the Auditor one of the questions asked by all credentialed background investigators is, "Have you even engaged in or have you ever been charged with sexual abuse?" According to her, 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 15 names to OPR to review for background rechecks. Documentation provided by HQ demonstrated the five year recheck were initiated within five years resulting in compliance.

**§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)

X Not Applicable

**Notes:**

Hidalgo POE was opened and dedicated in 2000. There has been no substantial expansion or modification to the Port since that time. The electronic surveillance system has not had any new updates. There (b) (7)(E) only general administrative areas. The leadership is also actively developing a new technology approach that will provide (b) (7)(E) throughout the holding rooms and areas as well. Port leadership is actively seeking additional coverage that they believe will enhance detainee safety and security. This area is non-applicable.

**§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)
- X Does not meet Standard (requires corrective action)

**Notes:**

(c)(d) CBP Directive 2130-030 requires Hidalgo POE provide emergency medical treatment and crisis intervention services, including a forensic medical exam, in accordance with professionally accepted standards of care to alleged victims 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 (alleged victim) is transported for a forensic examination to a medical facility that offers victim advocacy services, Officers/Agents will permit the detainee to use such services to the extent available, consistent with security needs. Both staff interviewed and policy reviewed confirm detainee victims receive medical and mental health treatment at no cost as well as allowing advocacy personnel access to detainees if available at the hospital where the detainee is sent. Detainees are sent to McAllen Medical Center where services are bilingual and bi-cultural. Forensics are completed, and detainees are afforded advocacy services if requested. The local PFC verified that he was aware of these resources and had completed a coordination call with the Advocate just prior to the audit. The Auditor confirmed the availability of both a SANE Nurse and a Victim Advocacy service at the hospital by calling the SANE nursing office. The nurse also verified that they had the capability for pediatric forensic evaluations. The Auditor was told by HQ Sexual Assault and Abuse Investigator (SAAI) SME that local law enforcement would, in most cases, be notified of any sexual assault and handle criminal investigations for allegations of sexual abuse.

(e) Facility staff informed the Auditor the local law enforcement agency would be the Hidalgo Police Department or OPR if staff is involved in the allegations. The facility SME confirmed in his interview and in a subsequent telephone call that he has personally interacted and negotiated with the police department and hospital resources, including the Victim Advocate, and is aware of their compliance with PREA requirements, however, no documentation was provided. **Corrective Action:** Provide documentation of the request made to the Hidalgo Police department that they comply with subparts (a) through (d) of the Standard.

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

- Exceeded Standard (substantially exceeds requirement of standard)
- X 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) and the Commissioner's Situation Room. The HQ SAAI SME and the local SME both indicate sexual abuse allegations are reported to JIC and the Commissioner's Situation Room in accordance with policy. The PFC states the Watch Commander would submit an Incident Report to the JIC and the Commissioner's Situation Room upon learning of an incident. The Directive also requires Hidalgo POE report allegations of sexual assault/abuse to law enforcement agencies with the legal authority to conduct criminal investigations. According to the PFC, the facility Watch Commander would be required to notify local Law Enforcement after notification to the JIC. This notification becomes part of the Incident Report. The PSA Coordinator indicates in her interview that upon any notification of sexual abuse or sexual assault made to the JIC she is immediately notified by the JIC (email) and/or the Commissioner's Situation Room as stipulated in CBP Directive 3340-025E, Reporting

**§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 agents and officers, 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 records regarding compliance with training schedule requirements provided to staff at Hidalgo POE through PALMS and all staff records reviewed were in compliance. 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, and transgender, intersex, or gender non-conforming detainees. Interviews with random staff and local SMEs confirm the information is provided to staff in this training. They also informed the Auditor PREA training is provided to them every two years mandatorily, but much more frequently in Muster training. The PALMS system is able to provide an up-to-date listing of staff trained and those needing training. Based on provided information from the local SME, all individuals currently assigned to Hidalgo POE have had the required PREA training. The Auditor was informed training records for staff are maintained for their entire employment and an additional five years. As previously noted, there are contractors in medical services; privacy is respected behind examination curtain for medical staff and detainee, while Officers remain in the immediate area of the medical staff conducting the examination. There are military personnel assigned, but none in contact with detainees unless accompanied by Hidalgo law enforcement personnel. The Auditor was informed that if contractors or volunteers were to come in contact with detainees they would be required to attend the same PREA training as required by policy. CBP Directive 2130-030 was provided to all staff through the agency email program referred to as CBP Central. As noted, the Auditor interviewed 11 random line staff members. The Auditor questioned them about this training they received. All indicated it was received within the last six months and it was clear the training included required topics.

**§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:**

Hidalgo POE makes public its zero-tolerance policy to the general public through its webpage (<https://www.cbp.gov/about/care-in-custody>) and to all detainees through posters located in the processing area and outside the detainee holding rooms. The posters observed were in English and Spanish with a note in Arabic, Farsi, French, Hindi, Korean, Romanian, Simplified Chinese, Tagalog and Urdu informing detainees to report sexual abuse. 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 OIG (toll free number provided), and telecommunication devices available by calling a toll-free number (provided). The interviewed staff stated they also use translation services, Google Translate, or access information from the CBP intranet to provide information to the detainees. The Auditor spoke with four random detainees. They were all aware of the posters and had a general understanding of the information provided to them on the poster. Most indicate they would call the published telephone number (OIG). All detainees interviewed were limited-English-proficient.

**§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 hold room the processing Officer 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 Auditor reviewed the training all staff receive (PALMS) in order to perform this assessment. It is provided at the same time as the zero-tolerance training and is part of that curriculum. The random Officer interviews conducted by the Auditor confirm this assessment is performed on each detainee arriving at Hidalgo POE to assess the detainee's potential vulnerability and potential abusive behavior. They further state if the assessment indicates any vulnerability or abusive behavior with any detainee he/she is provided with heightened protection. If the detainee is abusive he/she is kept separate from those who are vulnerable. This may include direct sight and sound supervision, single room placement or seated in front of the Officer in the process room. The random interviews with detainees confirm they were asked about their own safety concerns on admission. At the time of the site visit, there were no detainees processed into the Hidalgo POE for the Auditor to observe the assessment screening process.

(e) CBP TEDS requires Hidalgo POE implement appropriate controls on the dissemination of private and/or sensitive information provided by detainees during this risk assessment. Officers can disclose this information only to those personnel with a need to know. The staff interviews detailed for the Auditor the handling of this information: the written assessment is placed in the detainee folder after completion; at the end of the shift the supervisor removes the assessments and places the documents securely in an office. Staff interviewed (Officers, Supervisor and SME staff) indicate this information is never shared and only provided on a need-to-know-basis or under investigative questioning.

**§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 multiple ways to privately report sexual abuse and/or assault, retaliation for reporting sexual abuse and/or assault, or staff neglect or violations of responsibilities that may have contributed to such incidents. It further requires the facility 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/or assault are to be visible or continuously and readily available to detainees at holding facilities and posted on the CBP public website. Interviews with the local SMEs, Officers and Supervisors confirm detainees are provided PREA information through posters (Spanish and English) on how to report sexual assault, retaliation and staff failure to perform their duties while remaining confidential and anonymous. For those who are not fluent in English or Spanish (both written or spoken) the Officers utilize Interpreters and Translators Incorporated which provides over the telephone translations for over 150 languages. Posters indicate detainees may, verbally or in writing, report to any CBP Official or by utilizing the toll-free telephone number to DHS OIG. DHS OIG is a public agency that is not part of CBP. The Auditor also asked the Officers about the process for making anonymous and confidential reports to OIG, as there are no telephones in any of the holding rooms. Officers state the detainee only needs to tell the Officer they wish to report something, not disclose what they wish to report, and the Officer would escort the detainee to one of the private interview rooms and give them an outside line to call. The Officers indicate they would step out of the room and close the door observing the detainee through the glass in the door. Detainees interviewed were aware that they could contact OIG and it would be confidential but were not aware of this exact process. The Auditor interviewed four available detainees and they were all aware there was a telephone number available to them, and all were aware they could inform staff of any allegation of sexual abuse and felt they would be safeguarded. The Auditor tested the OIG toll free report number, from the same telephone detainees would use and found it operational.

(c) CBP TEDS requires Officers at Hidalgo POE to receive allegations reported to them from third parties and promptly record such reports according to operational procedures. The Auditor was informed by the Officers and Supervisors, during interviews, all verbal allegations of sexual abuse or sexual assault made to them is documented in writing to their supervisor.

**§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. Posters throughout the processing area inform detainees of the DHS OIG reporting telephone number for them to report an allegation.

**§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 the JIC hotline, email JIC, contacting CBP Office of Professional Responsibility (OPR), or contacting DHS OIG to report all allegations of misconduct. Interviews with staff verified they would immediately report any and all incidents of sexual abuse or assault to their 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 staff verified of maintaining confidentiality and provide information on a need to know basis.

(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. The Auditor confirmed the reporting requirements during the interviews conducted with the 11 random staff and local SME staff. They all indicate their responsibility to immediately report any allegation of sexual abuse, retaliation or staff failure to perform their duties within and outside the chain of command if necessary. They also indicate all information they become aware of is not shared except on a need-to-know-basis or during an investigation into the matter. The local SME interviews and the PFC informed the Auditor that should a vulnerable adult or person under the age of 18 be sexually assaulted at the Hidalgo POE the normal protocol would be the Watch Commander 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 PFC stated that he/or the Watch Commander would make these notifications to the appropriate local State Agencies if required, and would update the JIC with this information. Staff interviewed at Hidalgo POE 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 Officer 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. This specific question was asked of the 11 random staff interviewed and the four local SMEs. All indicate any detainee believed to be in imminent danger of being sexually abused would be immediately separated from the other detainees and placed under constant supervision of an Officer. The safety of the detainee would be their primary focus. Depending on the number of rooms being used at the time, the

detainee would be placed in a holding room alone or under direct supervision of an Officer.

**§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) CBP Directive 2130-030 requires staff at Hidalgo POE make reasonable efforts to promptly report any allegation of sexual abuse the facility becomes aware of occurring at another facility. This notification is required to be made to the appropriate office or Administrator of the facility where the alleged incident occurred. The local SMEs and the PFC state the notification is made in the same manner as any incident is reported. The Hidalgo POE Watch Commander 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. 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 Hidalgo POE staff.

(b) CBP policy requires these notifications to other facilities be done promptly and staff interviews indicate the same understanding.

(c) The standard requires notification must be documented. The PFC and SMEs confirmed notifications would be documented. They further stated notifications would be made in the same manner as any incident of this nature.

(d) The Standard requires the agency/office receiving a notification of an allegation occurring in a facility covered by this subpart must ensure the allegation is referred for investigation. The Acting Assistant Commissioner, Office of Field Operations issued a policy on August 12, 2014, titled Standards to Prevent, Detect, and Respond to Sexual Abuse in CBP Holding Facilities, which states that any CBP office that receives an allegation of sexual abuse and/or sexual assault shall ensure the allegation is referred for investigation. Interviews with the local SMEs and the PFC confirm these notifications would be done immediately by the facility Watch Commander in accordance with 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 law enforcement staff on scene of a reported allegation of sexual abuse. The Directive and PREA Training in PALMS reinforces the policy by requiring law enforcement staff members to separate the alleged victim and abuser, preserve and protect the crime scene, and if the abuse occurred within a time period that still allows for the collection of physical evidence, request the alleged victim and ensure the alleged abuser not take any actions that could destroy physical evidence. As previously noted, there are no contractors allowed in the holding rooms alone while detainees are present. During the site visit the Auditor did not observe anyone who was not law enforcement in the holding areas. When cleaning personnel and military are present in the area they are always supervised by CBP Officers. CBP Directive 2130-030, does, however, address non-law enforcement first responder duties. The policy requires non-law enforcement staff request the alleged victim not take any actions that could destroy physical evidence and then notify law enforcement staff. During the random interviews, staff detailed their responsibilities as first responders. Each staff told the Auditor they would separate the victim from the abuser, provide medical assistance if needed, preserve evidence to the extent possible and notify their Supervisor.

**§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 stipulates this entire document constitutes CBP's written institutional plan outlining the coordinated multidisciplinary team approach to responding to sexual abuse. The 21 sections of this Directive cover aspects from hiring, training, reporting, responding, medical and mental health services, investigations, and data collection. The PFC discussed this 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/or assault is transferred to another DHS facility, Hidalgo POE 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/or assault is transferred to a non-DHS facility, Hidalgo POE 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. Each of the local SMEs and the PFC informed the Auditor during their interviews that during the last 12 months Hidalgo POE has had no cases requiring any such notification to a DHS or non-DHS facility. As previously noted, all incidents of this type require the Watch Commander to submit an Incident Report to the JIC and the Commissioner's Situation Room upon any notice. Any transfer or move would require the Watch Commander to update JIC of the incident and notify the receiving facility. This process was detailed to the Auditor by the PFC as Hidalgo POE has had no reports of incidents of alleged sexual abuse and/or assault 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/or 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 make removal appropriate. The HQ SAAI SME interview 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 the investigation if the seriousness of the allegation make removal appropriate. This policy requirement was also communicated to the Auditor by the local SMEs and the PFC. As noted previously, there are no contractors or volunteers currently allowed in the hold room without supervision by an Officer. The local SMEs indicate there have not been 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, officers, and other CBP personnel from retaliating against any person or detainee, who reports, complains about, or participates in an investigation of sexual abuse and/or assault. This retaliation prohibition is also detailed in the PREA training (PALMS) each staff member receives at Hidalgo POE. The Auditor interviewed 10 random staff, 4 local SMEs and the PFC. Each was aware of the policy prohibiting retaliation against anyone who makes an allegation of sexual misconduct or participates in the investigation. There were no detainees who either filed an allegation or participated in an investigation to interview. The PFC informed the Auditor there have been no allegations of retaliation made at Hidalgo POE 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):

**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) CBP Directive 2130-030 informs CBP personnel they may be subjected to disciplinary or adverse action up to and including removal from their position and Federal Service for substantiated allegations of sexual abuse and/or assault and/or for violating CBP's sexual abuse policies. The Auditor interviewed HQ LER SME and HQ SAAI SME. Both these individuals indicate 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 agency or facility sexual abuse and/or assault policies, unless the activity was clearly not criminal. The interview with the HQ SAAI SME indicates CBP would notify law enforcement of all removals or resignations in lieu of removal for violations of the agency zero-tolerance policy. The HQ SAAI SME indicates there were no such resignations or removals at Hidalgo POE 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 agency or facility sexual abuse and/or assault policies, to the extent known. The interview with the HQ SME from OPR indicates their office would notify licensing bodies, if known, of all removals or resignations in lieu of removal for violations of the agency zero-tolerance policy. She indicated there were no such resignations or removals at the Hidalgo POE 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:**

(a)(b) CBP Directive 2130-030 requires any contractor or volunteer suspected of perpetrating sexual abuse and/or assault be removed from all duties requiring detainee contact pending the outcome of an investigation, as appropriate. As noted throughout the report, Hidalgo POE only allows law enforcement staff to have unaccompanied contact with detainees. All cleaning contractors and assigned military support staff always have a law enforcement member present when in contact with a detainee. As stated previously, medical contractors provide medical screening and medical examinations; however, a CBP Officer is located within a reasonable range in the event of a non-medical emergency or need for law enforcement response. The detainee is provided privacy during medical screening and medical examinations either in a separate room or behind a curtain. The Auditor did not observe any contractors or volunteers in the holding rooms during the site visit. Interviews with the Hidalgo POE SMEs did indicate that the facility will prohibit any contractor or volunteer from having contact with detainees when suspected of perpetrating sexual abuse pending the outcome of the investigation. The PFC informed the Auditor that if contractors were ever allowed inside the holding room area alone and were found to violate CBP's zero-tolerance policy, they would be removed from contact with any detainee and he would be responsible to notify 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 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. Interviews with the local SMEs and the PFC confirm Supervisors are aware that alleged victims of sexual assault are to receive all medical service and medications without cost even if they do not name the abuser or cooperate with the investigation. They are also aware all detainees requiring any serious or PREA-related medical or forensic treatment must be sent to the local hospital (McAllen Medical Center) in Hidalgo, Texas, since only routine medical services are available at Hidalgo POE. Their services are bilingual

(English/Spanish).

**§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 at the conclusion of every investigation of sexual abuse and/or 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 is to be forwarded to the PSA Coordinator. The Auditor interviewed the PSA Coordinator regarding the incident review process for allegations of sexual abuse. She informed the Auditor that sexual abuse incident reviews are conducted consistent with the procedures outlined in Section 18.1, of CBP Directive 2130-030. Hidalgo had no incident reviews conducted during the audit period as the facility had no allegations of sexual abuse incidents.

**§115.187 – Data collection.**

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

**Notes:**

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

**ADDITIONAL NOTES**

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

None.

**AUDITOR CERTIFICATION:**

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

**(b)(6)(b)(7)(C)**  
Auditor

January 10, 2020  
Date



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

### AUDITOR

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

### AGENCY

<b>Name of Agency:</b>	U.S. Customs and Border Protection
------------------------	------------------------------------

### PROGRAM OFFICE

<b>Name of Program Office:</b>	Office of Field Operations
--------------------------------	----------------------------

### SECTOR OR FIELD OFFICE

<b>Name of Sector or Field Office:</b>	Laredo Field Office
<b>Name of Chief or Director:</b>	(b) (6), (b) (7)(C)
<b>PREA Field Coordinator:</b>	(b)(6)(b)(7)(C)
<b>Sector or Field Office Physical Address:</b>	109 Shiloh Drive, Laredo, TX 78045
<b>Mailing Address: (if different from above)</b>	Same as Above

### SHORT-TERM FACILITY BEING AUDITED

<b>Information About the Facility</b>	
<b>Name of Facility:</b>	Hidalgo Port of Entry
<b>Physical Address:</b>	1026 S. International Blvd., Hidalgo, TX 78557
<b>Mailing Address: (if different from above)</b>	Same as Above
<b>Telephone Number:</b>	(b)(6)(b)(7)(C)

<b>Facility Leadership</b>			
<b>Name of Officer in Charge:</b>	(b)(6)(b)(7)(C)	<b>Title:</b>	Acting Port Director
<b>Email Address:</b>	(b)(6)(b)(7)(C)	<b>Telephone Number:</b>	(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 U.S. Customs and Border Protection (CBP), Office of Field Operations (OFO), Hidalgo Port of Entry (POE), was conducted on July 18, 2019, and the preliminary findings report was submitted on October 18, 2019. Following comments from CBP Headquarters and from the Auditor, the report was submitted as a Final Draft on January 10, 2020.

At that time, the Auditor reviewed the compliance of 25 Subpart B standards and the Hidalgo POE was found to be in compliance with 21 standards: (115.111; 115.114; 115.116; 115.117; 115.118; 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 Hidalgo POE was found to not be in compliance with three standards: (115.113; 115.115; and 115.121). Standard 115.118 was not applicable at the Hidalgo POE.

On April 14, 2020, the Hidalgo POE submitted a preliminary Corrective Action Plan (CAP) with a completion date of June 1, 2020. Several documents were requested by the Auditor regarding the re-training of transgender pat-down search procedures. An Annual Review of Detainee Supervision Guidelines document was also submitted to comply with standard 115.113 (b). The report was reviewed and the Auditor determined the documentation complied with the standard provision. On April 14, 2020, a copy of the letter dated February 6, 2020, to La Villa Police Department was submitted to the Auditor requesting the Police Department to follow established PREA evidence collection protocols and procedures when investigating alleged sexual abuse and/or assault allegations at the Hidalgo POE to comply with standard provision 115.121 (a) through (d). The Auditor requested clarification as to whether the Hidalgo Police Department as reported during the audit was the investigative entity or whether the investigative entity was La Villa Police Department. On August 20, 2020, the Hidalgo POE clarified that the Hidalgo Police Department is the investigative agency of alleged sexual abuse and/or assaults occurring at the Hidalgo POE. Additionally, the Hidalgo POE submitted a copy of the letter dated August 20, 2020, to the Hidalgo Police Department which satisfied the standard provision. On July 31, 2020, the Hidalgo POE submitted staff re-training, muster and staff sign-offs to comply with standard 115.115 (f). A review determined the documentation received was satisfactory. The Hidalgo POE is now compliant with all PREA standards.

Although there was on-going 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 14, 2020, the Hidalgo POE submitted a record of an Annual Review of Detainee Supervision Guidelines dated July 18, 2019, as required by standard Provision (b). The Annual Review of Detainee Supervision Guidelines document included all elements as required by standard provision (c). Standard provision 115.113 (b) was satisfied prior to the 180-day date. The Hidalgo POE is now compliant with 115.113 (b).

### §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 July 30, 2020, the Hidalgo POE submitted training musters dated December 2018 referencing National Standards, Transport, Enforcement, Detention Search policy reinforcing proper personal search techniques, cross-gender searches, determination of detainee gender identification and proper procedures for the pat search of transgender detainees. The Hidalgo POE also submitted a re-training memorandum dated July 30, 2020, to all staff reminding them of the search procedures that were established with the December 2018 muster. Staff training muster sign-offs and acknowledgements were also submitted. The Hidalgo POE is now compliant with standard provision 115.115 (f).

### §115.121

- 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 February 6, 2020, the Hidalgo POE submitted a letter to La Villa Police Department requesting the Police Department follow established PREA evidence collection protocols and procedures when investigating allegations of sexual abuse and/or sexual assault at the Hidalgo POE. The Auditor requested clarification as to whether La Villa Police Department is the investigating entity as opposed to the Hidalgo Police Department as identified during the Audit. On August 20, 2020, clarification was received verifying the Hidalgo Police Department is the investigative agency who conducts investigations of sexual abuse and/or assault allegations. The Hidalgo POE also submitted a letter dated August 20, 2020, to the Hidalgo Police

Department requesting the Hidalgo Police Department follow the requirements of Section 115.121 (a) through (d) of the standard which sets forth provisions regarding evidence protocols and forensic medical examinations when investigating allegations of sexual abuse and/or assault at the Hidalgo POE. The Hidalgo POE is now compliant with standard provision 115.121 (e).

OVERALL DETERMINATION - AFTER IMPLEMENTATION OF THE CORRECTIVE ACTION PLAN	
<input type="checkbox"/> Exceeds Standards (Substantially Exceeds Requirements of Standards)	<input checked="" type="checkbox"/> Low Risk
<input checked="" type="checkbox"/> Meets Standards (Substantial Compliance; Complies in All Material Ways with the Standards for the Relevant Review Period)	<input type="checkbox"/> Not Low Risk
<input type="checkbox"/> Does Not Meet Standards (Requires Corrective Action)	

**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**

\_\_\_\_\_  
August 20, 2020  
**Date**