

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



U.S. Customs and
Border Protection

AUDITOR

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

AGENCY

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

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

Name of Sector or Field Office:	Laredo Field Office
Name of Chief or Director:	(b)(6)(b)(7)(C)
PREA Field Coordinator:	(b)(6)(b)(7)(C)
Sector or Field Office Physical Address:	109 Shiloh Dr., Suite 301, Laredo, Texas 78045
Mailing Address: <i>(if different from above)</i>	

SHORT-TERM HOLDING FACILITY BEING AUDITED

Information About the Facility

Name of Facility:	Laredo Bridge II – Lincoln Juarez Bridge
Physical Address:	Admin. Building #2 Laredo, Texas 78040
Mailing Address: <i>(if different from above)</i>	700 Zaragoza Street, Laredo, Texas 78040
Telephone Number:	(b)(6)(b)(7)(C)

Facility Leadership

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

AUDIT FINDINGS

NARRATIVE OF AUDIT PROCESS AND DESCRIPTION OF FACILITY CHARACTERISTICS:

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

The initial Prison Rape Elimination Act (PREA) audit of the Customs and Border Protection (CBP), Office of Field Operations (OFO), Laredo Bridge II, Lincoln Juarez Bridge, Laredo, Texas, was conducted on Thursday March 7, 2019 by PREA certified auditor (b)(6)(b)(7)(C), a contractor for Creative Corrections, LLC. The facility is located at 700 Zaragoza Street, Laredo, 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 PREA audit is to determine compliance with the Department of Homeland Security (DHS) PREA standards. (b)(6)(b)(7)(C), CBP Prevention of Sexual Assault Coordinator, Headquarters (HQ); (b)(6)(b)(7)(C), Program Manager, OFO, 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), Branch Chief, CBP Hiring Center, HQ; (b)(6)(b)(7)(C), Sexual Abuse and Assault Investigations Coordinator, HQ, and (b)(6)(b)(7)(C), Acting Watch Commander/PREA Field Coordinator, Port of Laredo, provided the HQ and Local Pre-Audit Questionnaires (PAQ) along with supporting documents for Laredo Bridge II on the secure CBP SharePoint website approximately two 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 PAQ's. 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.

On March 5, 2019 at approximately 8:30 a.m. the Auditor arrived at the Laredo Bridge II Conference Room where a joint Laredo Bridge I and Laredo Bridge II in-briefing was conducted. Those in attendance were:

(b)(6)(b)(7)(C), PSA Coordinator, Privacy and Diversity Office (PDO), HQ
(b)(6)(b)(7)(C), Deputy PSA Coordinator, PDO, HQ
(b)(6)(b)(7)(C), Acting Port Director, Port of Laredo
(b)(6)(b)(7)(C), Assistant Port Director, Port of Laredo
(b)(6)(b)(7)(C), Program Manager, Port of Laredo
(b)(6)(b)(7)(C), Chief CBP Officer, Port of Laredo
(b)(6)(b)(7)(C), Watch Commander, Port of Laredo
(b)(6)(b)(7)(C), Acting Watch Commander/PREA Field Coordinator, Port of Laredo
(b)(6)(b)(7)(C), Supervisory CBP Officer, Port of Laredo
(b)(6)(b)(7)(C), National OFO PREA Coordinator, OFO, HQ

After introductions and a brief question and answer period the in-briefing ended.

The Auditor arrived at Laredo Bridge II at 6:00 a.m. on March 7, 2019, and proceeded to an interview room near the processing area to begin interviewing random staff and detainees. After interviews were conducted a tour of the processing area and hold rooms began. Laredo Bridge II has a (b)(7)(E). Each of the hold rooms contain a toilet, posters on the wall in English and Spanish informing the detainees of how and whom to report (in writing, anonymously, to the Office of the Inspector General (OIG)) any allegations of sexual abuse, and a bench. Laredo Bridge II is staffed around the clock by CPB staff only. There are no volunteers or contractors with direct detainee contact. The Auditor observed contract cleaning staff under direct staff observation at all times while in the processing area. Laredo Bridge II receives males, females, family units, and juveniles.

In addition to the processing area and hold rooms the Auditor was able to tour the Command Center. Laredo Bridge II has an (b)(7)(E). The Auditor was able to view (b)(7)(E) while on-site.

During the site visit the Auditor was unable to observe the intake process due to no arrivals while the Auditor was present but line staff did walk the auditor through the arrival and intake process. The typical time to be held at Laredo

Bridge II is 48 hours. Detainees are provided food and given bedding to sleep on for the duration of the time they are held.

After the completion of the tour, the Auditor proceeded back to the interview room and completed interviews with random staff, including Officers and Supervisors. All interviews of both staff and detainees were conducted in a secure, private setting.

Scope of the Audit: Auditor reviewed all relevant policies, procedures, and documents in assessing Laredo Bridge II. Information not available in the original documents was requested and received. The Auditor had access to all areas of the facility. While on-site the Auditor interviewed 16 staff (11-Officers, 4-Supervisors and the PREA Field Coordinator) and 10 detainees (6-females and 4-males with Honduras, Cuba, and Mexico represented). The Auditor used Language Services Associates to provide interpreter services for the detainee interviews. Prior to arriving on site, the Auditor interviewed six Headquarter SMEs who deal with hiring, investigations, labor employee relations, and the Agency PSA Coordinator. The Auditor also spoke with staff from both local Hospitals (Doctors Hospital of Laredo and Laredo Medical Center) regarding the availability of medical and advocacy services.

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 March 7, 2019, a joint Laredo Bridge I and Laredo Bridge II exit briefing was held in the Laredo Bridge II Conference Room. In attendance were:

- (b)(6)(b)(7)(C), PSA Coordinator, PDO, HQ
- (b)(6)(b)(7)(C), Deputy PSA Coordinator, PDO, HQ
- (b)(6)(b)(7)(C), Acting Port Director, Port of Laredo
- (b)(6)(b)(7)(C), Assistant Port Director, Port of Laredo
- (b)(6)(b)(7)(C), Acting Watch Commander/PREA Field Coordinator, Port of Laredo
- (b)(6)(b)(7)(C), Supervisory CBP Officer, Port of Laredo
- (b)(6)(b)(7)(C), National OFO PREA Coordinator, OFO, HQ

The Auditor discussed observations made during the on-site audit and gave preliminary findings of the audit. She informed those present a final determination would not be made until she reviewed the on-site notes from interviews, policies, and the standard requirements.

The Auditor found Laredo Bridge II in compliance with all but two standards: 115.113 regarding Detainee Supervision and Monitoring, and 115.115 regarding Searches of Detainees.

SUMMARY OF AUDIT FINDINGS	
Number of standards exceeded: 0	
Number of standards met: 23	
Number of standards not met: 2	
OVERALL DETERMINATION	
<input type="checkbox"/> Exceeds Standards (Substantially Exceeds Requirements of Standards)	<input type="checkbox"/> Low Risk
<input type="checkbox"/> Meets Standards (Substantial Compliance; Complies in All Material Ways with the Standards for the Relevant Review Period)	<input checked="" type="checkbox"/> Not Low Risk
<input checked="" type="checkbox"/> Does Not Meet Standards (Requires Corrective Action)	

PROVISIONS

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

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

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

Notes:

(a) CBP Policy on Zero Tolerance of Sexual Abuse and Assault, signed by the CBP Commissioner on March 11, 2015, and CBP Directive 2130-030, Sexual Abuse Assault Prevention and Response (SAAPR), dated January 19, 2018, are the Agencies main policies mandating zero tolerance toward all forms of sexual abuse and sexual assault and outlining their approach to preventing, detecting, and responding to abusive conduct. They define in detail for all staff the prohibited acts. The policy and Directive are supplemented with CBP's National Standards on Transport, Escort, Detention, and Search (TEDS), dated October 2015, and sets forth nationwide standards that govern staff interaction with detained individuals. Compliance is based on a review by the Auditor of CBP Policy on Zero Tolerance of Sexual Abuse and Assault, CBP Directive 2130-030, CBP TEDS, and interviews conducted with random Supervisors and Officers. All staff indicate they are aware of agency policy and are familiar with their role in preventing, detecting and responding to sexual abuse. Document review confirms CBP Directive 2130-030 was provided to all staff in March 2015, through the agency email program referred to as CBP Central. The Directive is currently available to everyone on the agency website. There has also been multiple refresher emails provided to all CBP employees since March 2015 which were reviewed by the Auditor in the provided documentation.

§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) CBP Directive 2130-030 requires all short-term holding facilities, including Laredo Bridge II, develop and document a comprehensive detainee supervision guideline that meets the facility's detainee supervision needs. The Auditor interviewed the Local PREA Field Coordinator who explained at length the supervision guidelines, describing to the Auditor there are no definitive daily staffing numbers established at Laredo Bridge II. Staff numbers are driven by the number of detainees brought in for processing. The Auditor was informed Laredo Bridge II maintains enough staff positions to provide a safe and secure environment for detainees. The PREA Field Coordinator states the established staff positions are appropriate and flexible from day to day. Additionally, Laredo Bridge II has considerable (b) (7)(E) (b) (7)(E) in the (b) (7)(E) that are monitored by staff on a steady basis. This aids as an additional monitoring measure in the supervision of detainees by allowing more staff supervision than only those present in the processing area.

(b)(c) CBP Directive 2130-030 requires the supervision guidelines be reviewed at least annually taking into account the physical layout, composition of detainees, the prevalence of substantiated and unsubstantiated instances of sexual abuse, findings and recommendations of incident reviews, and any other relevant factors. The Auditor spoke with the PREA Field Coordinator who was able to detail how Laredo Bridge II maintains appropriate supervision of detainees and how the process is reevaluated on a continuous basis. However the facility was not able to sufficiently explain how the agency conducts an annual review of the circumstances to determine if supervision is appropriate, in comparison to previous years, or if changes are needed to the overall staffing level or (b) (7)(E) to protect detainees from sexual abuse resulting in non-compliance. **Corrective Action:** Provide documentation of an annual review of the supervision guidelines that takes into account all the elements required in the standard.

§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 Laredo Bridge II 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 random Supervisors and Officers who process juveniles and children brought to Laredo Bridge II. Staff 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 adults in a hold room specified for the purpose of holding UACs. Staff indicate minors accompanied by an adult are thoroughly vetted to ensure it is a parent or legal guardian relationship. This includes the review of available documentation, interviews and telephone calls when contact information for other relatives is available. If a legal relationship cannot be established the minor is treated as a UAC and separated from adults under the least restrictive setting possible. There were no UACs present for the Auditor to interview during the site visit. The Auditor was able to view the hold room utilized for UACs and discussed in depth with random Supervisors and Officers methods used to allow the least restrictive setting. This includes leaving the hold room door unlocked to allow the UAC free movement, a television with DVDs, and snacks as needed. All random Supervisors and Officers interviewed state the well-being of all juveniles processed into Laredo Bridge II is a top priority.

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

Notes:

(b)(c) CBP TEDS details the type and conditions under which searches can be performed to ensure the safety of staff, 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 Directive requires strip/body cavity searches be documented in the electronic system of record. CBP TEDS details staff must not conduct visual body cavity searches of juveniles and are to refer all body cavity searches of juveniles to a medical practitioner. During interviews with the PREA Field Coordinator, random Supervisors and Officers, all consistently explained cross-gender strip searches and cross-gender body cavity searches would not be conducted except in exigent circumstances and then only after receiving approval from a supervisor. They also explained any need for a visual body cavity search of a detainee, adult or juvenile, would be referred to a medical practitioner at one of the local hospitals. The Local PAQ provided to the Auditor reports there have been no strip searches or body cavity searches at Laredo Bridge II during the past 12 months and all Supervisors and Officers interviewed state strip searches and body cavity searches are done very rarely at Laredo Bridge II.

(d) CBP TEDS requires detainees be able 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. Hold rooms at Laredo Bridge II do not have shower areas. All hold rooms have partitions around the toilet areas and the (b) (7)(E) have the toilet area pixelated to ensure staff are not able to view the detainee while he/she is performing bodily functions. Observation and interviews with random Supervisors, Officers and detainees confirm opposite gender staff knock on the door to announce their presence before entering a hold room.

(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, staff 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 of record as unknown. During interviews random Supervisors and Officers confirm staff are aware of the prohibition on searching to determine gender and the appropriate way to ask detainees what their gender or gender identity is. There were no detainees self-identified as transgender for the Auditor to interview during the on-site visit.

(f) CBP has issued a new training curriculum, Processing Transgender Applicants for Admission, issued by Headquarters in December 2018. This training details the appropriate way to admit a transgender detainee into custody and includes a provision of asking transgender and intersex detainees how they identify. The Auditor interviewed random Supervisors and Officers of which most knew to ask transgender detainees their sexual orientation. The Auditor reviewed the training presentation and Instructor Guide for CBP S340C Personal Search Policy and Procedure that is delivered to all CBP Officer trainees in basic academy, and the CBP Personal Search Handbook, OFO, dated July 2004. This handbook gives general direction on how staff are to conduct pat down searches, including cross gender pat down

searches in exigent circumstances, and the S340C training goes in more detail on the procedures of an immediate pat down, a pat down search, and a partial body search. Neither the training presentation or the handbook go into detail on how staff are to search the breast and groin area, nor does it explain how to search a transgender detainee. Further, during staff interviews staff could not explain in detail how to search breast or groin areas of male, female, or transgender detainees resulting in non-compliance. **Corrective Action:** Provide documentation of training material, and completion of training by all staff, that provides specific details on how to conduct pat down searches of male, female and transgender detainees, to include the breast and groin areas.

§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) CBP TEDS and CBP Directive 2130-030 require 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. Laredo Bridge II has a job aide available to staff on communicating with detainees with disabilities. The Auditor observed this posted in various areas of the processing area. The Auditor conducted interviews with random Supervisors and Officers who state deaf and blind detainees would be dealt with individually with staff reading them information, providing visual information, or use of an interpreter if necessary. Staff interviews also confirm if a detainee had a psychiatric disability or was low level learning/functioning they would ensure they took the appropriate time to go over the information with them at a pace the detainee was able to understand.

(b)(c) CBP Directive 2130-030 requires detainees who are limited English proficient (LEP) be provided in person or telephonic interpretation services. During the site inspection the Auditor observed a video monitor continually playing reporting methods of sexual abuse. The video loops continuously through the available languages which currently include English, Spanish, French and Russian. Staff are in the process of translating the video into other languages. During interviews with random Supervisors and Officers the Auditor was informed if a communication problem exists with detainees who are LEP during processing staff utilize Language Solutions to provide information to detainees in a language they understand. This also includes sign language in multiple languages. Random Supervisors and Officers informed the Auditor other detainees would not be allowed to interpret for another detainee during a sexual abuse investigation.

§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) CBP Directive 2130-030 requires the Office of Human Resource Management (HRM) establish policy and procedures to 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 confirmed CBP does not hire or promote any employee or enlist the services of any 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 Directive. She explained interviews conducted with new applicants and applicants for promotion include specific questions about any previous sexual abuse misconduct. She also confirms new staff and applicants for promotion are made aware there is a continuing affirmative duty to disclose any such misconduct and explained staff receive this information in the new employee orientation packet which includes CBP Standards of Conduct and the Table of Offenses and Penalties. The information is also included during annual refresher training in the Rules of Behavior module.

(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 Personnel Security Division (PSD) SME indicates background checks for CBP are the most thorough investigations conducted for DHS. She informed the Auditor question number three asked by all credentialed background investigators is "have you ever engaged in or have you ever been charged with" sexual abuse? She adds an affirmative response results in the individual not being hired and their application is stopped. The HQ PSD SME informed the Auditor rechecks are completed every five years. The Auditor submitted 15 names to PSD for background check and re-check confirmation. Documentation provided in response confirms all 15 names submitted have had background investigations completed according to the required schedule.

(e) CBP HRM Operations, Programs, and Policy Standard Operating Procedures, PREA Hiring and Promotions, dated February 29, 2016, informs potential and current staff material omissions regarding such misconduct, or the provision of materially false information are grounds for termination or withdrawal of an offer of employment. The HQ LER SME confirms staff receive this information in the new employee orientation packet which includes CBP Standards of Conduct and the Table of Offenses and Penalties; the information is also included during annual refresher training in the Rules of Behavior module.

(f) The HRM PREA Hiring and Promotions SOP requires the agency provide information on substantiated allegations of sexual abuse involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work, unless prohibited by law. The Auditor interviewed the HQ HRM Hiring Center SME who confirms these requests would be sent to PSD for a response to be provided.

§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)
- Not Applicable (provide explanation in notes):

Notes:

(a)(b) Laredo Bridge II has recently been remodeled to include a considerable upgrade to the electronic surveillance system. During an interview with the PREA Field Coordinator he explained the Agency considered how updated technology would enhance its ability to protect detainees at Laredo Bridge II from abuse. The Auditor was able to view all areas of the remodel pertinent to the audit during the site inspection, including (b) (7)(E) system to confirm compliance.

§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 alleged victims of sexual assault at Laredo Bridge II be provided emergency medical treatment and crisis intervention service, including forensic medical exam, in accordance with professionally accepted standards of care. The Directive requires treatment be provided 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 victim is transported for a forensic medical exam to a local medical facility that offers victim advocacy services, the detainee will be permitted to use such services to the extent available, consistent with security needs. The Auditor interviewed the PREA Field Coordinator who confirms detainee victims receive medical and mental health treatment at no cost to the detainee and would be allowed access to advocacy personnel. He states detainees are transported to one of two local hospitals, Doctors Hospital of Laredo or Laredo Medical Center. The Auditor confirmed both hospitals offer forensic medical exams at no cost and advocacy services are available.

(e) The PREA Field Coordinator states the Laredo Police Department would be notified of any sexual assault. The PREA Field Coordinator provided the Auditor documentation requesting Laredo Police Department comply with sections (a-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)
- 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 report to the Joint Intake Center (JIC) any knowledge, suspicion, or information of any incident of sexual abuse and/or assault of a detainee in a holding facility, retaliation against any person who reports, complains about, or participates in an investigation about an incident, and any staff neglect or violation of responsibilities contributing to an incident or retaliation. The Directive also requires allegations of sexual assault/abuse be reported to law enforcement agencies with the legal authority to conduct criminal investigations. Interviews with the HQ Sexual Abuse and Assault Investigations Coordinator (SAAI) SME and PREA Field Coordinator both confirm sexual abuse allegations are reported to JIC, the Commissioner's Situation Room and local law enforcement in accordance with the Directive. The PREA Field Coordinator states the required notifications would be made by the supervisor on duty. During interviews with random Supervisors the Auditor confirmed they are generally aware of the notification requirements. The PSA Coordinator indicates in her interview any notification of sexual abuse made to JIC is immediately sent to her as stipulated in CBP Directive 3340-025E, Reporting Significant Incidents to the Commissioners Situation Room, dated May 21, 2018. The facility had no sexual abuse allegations reported or investigated during the prior 12 months so there were no notifications made. All interviews confirm staff are well versed in the reporting requirements.

§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 Directive also stipulates the retention of training documents required by the standard. The Auditor reviewed the PREA General Training curriculum provided to staff. Training is provided online through the Performance and Learning Management System (PALMS) and is provided every two years. The training includes zero-tolerance for all forms of sexual abuse, definitions and examples of prohibited behavior, the rights of detainees to be free from sexual abuse, and the prohibition of retaliation for reporting sexual abuse. 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 is instructed in how to avoid inappropriate relationships with detainees, and how to communicate effectively and professionally with all detainees including those who identify as lesbian, gay, bi-sexual, transgender/intersex, or gender non-conforming. Review of documentation provided by the PREA Field Coordinator confirms all staff currently assigned to Laredo Bridge II have completed the required PREA training in the appropriate time frame. Laredo Bridge II does not have any contractors or volunteers in direct contact with detainees who require training. The Auditor interviewed 15 random Supervisors and Officers and questioned them about the training they received regarding PREA. All indicate training has been received and were able to verify the eight topic requirements of the standard were covered.

§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 publicizes its zero-tolerance policy to the general public through its webpage at: <https://www.cbp.gov/about/care-and-custody>. The facility also ensures key information regarding the zero-tolerance policy is visible and continuously available to detainees through posters located in the processing area and inside the hold rooms. The posters were observed by the Auditor in English and Spanish. Information on the posters includes: CBP has a zero tolerance for sexual abuse/assault; reporting can be anonymous and confidential; be safe and get help; tell CBP official; call the DHS OIG (toll free number provided); and telecommunication devices available by calling a toll-free number (provided). The Auditor interviewed 10 random detainees who all state they were aware of the posters and had a general understanding of the information provided to them on the poster. Most indicate they would feel comfortable reporting to an Officer if needed. All detainees interviewed were limited English proficient. The Auditor interviewed random Supervisors and Officers who confirm detainees are notified of the agency's zero tolerance policy with posters and a PREA video.

§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)
- X 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)
- 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:

(a)(b)(c)(d) A review of CBP TEDS indicates before placing any detainees together in a (b) (7)(E) Officers must assess the information before them to determine if the detainee may be considered as an at-risk detainee, or is at risk of posing a threat to others. The Directive states the assessment is to include: whether the detainee has exhibited a mental, physical, or developmental disability; the age of the detainee; their physical build; any prior arrests or incarcerations; if the detainee identifies as lesbian, gay, bisexual, transgender/intersex, or gender non-conforming; any prior sexual victimization, and the detainee's own concerns about his/her physical safety. The Auditor reviewed the PREA General training staff receive regarding conducting assessments. The Auditor also conducted interviews with random Supervisors and Officers who all confirm this assessment is performed on each detainee arriving at Laredo Bridge II. Supervisors and Officers consistently state if the assessment indicates a detainee may be at high risk of being abused by another detainee he/she is provided with heightened protection and if the assessment indicates a detainee may be at high risk of being sexually abusive towards other detainees he/she is provided with heightened supervision. According to the staff, this could include direct sight and sound supervision, single room placement or being seated with an Officer in the processing area. Interviews conducted by the Auditor with 10 detainees confirms they were asked upon admission about concerns for their own safety at the facility. At the time of the site visit there were no detainees being processed into Laredo Bridge II for the auditor to observe the process. (e) CBP TEDS requires all short-term holding facilities, including Laredo Bridge II, implement appropriate controls on the dissemination of private and/or sensitive information provided by detainees during the risk assessment. Officers can disclose information only to those personnel with a need to know. Interviews with random Supervisors, Officers, and the PREA Field Coordinator indicate sensitive information provided in the risk assessment is only provided to others on a need to know basis.

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

- 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:

(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 detainees be provided at least one way to report sexual abuse to a public or private entity not connected to the agency and to be able to report confidentially and anonymously, as well as both verbally and in writing. Interviews conducted by the Auditor with the PREA Field Coordinator and random staff confirm detainees are provided information through posters (English and Spanish) and through the continuously played video available in English, Spanish, French, and Russian. The posters and video indicate detainees may report confidentially and anonymously, verbally or in writing to any CBP Official or by utilizing the toll free telephone number to DHS OIG. The auditor interviewed 10 random detainees. Most were aware there was a telephone number available to them and all were aware that they could inform staff of any allegation of sexual abuse confidentiality when needed. The Auditor was able to view and test the telephone detainees would use to call OIG during the site inspection and found it operational. The Auditor also questioned staff about the process for detainees to make calls to OIG. They explain detainees only need to tell staff they wish to report something and they would not be required to disclose what they wished to report. (c) CBP Directive 2130-030 requires staff accept allegations reported to them verbally, in writing, anonymously, and from third parties and promptly record such reports according to the operational procedures. The Auditor conducted

interviews with 15 random Supervisors and Officers who all confirm their understanding of accepting allegations verbally, in writing, anonymously, and from third parties. Staff state they would promptly report any allegation of sexual abuse to their supervisor and document the report.

§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>. The information provides a toll free telephone number, USPS address and email address to JIC, and a toll free telephone number, direct complaint link, and USPS address for OIG. Posters throughout the processing area and in the hold rooms are available to detainees and informs them of the OIG reporting number for them or anyone to report an allegation on their behalf. During interviews with the 10 random detainees most indicate they are aware of being able to have someone report sexual abuse on their behalf.

§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 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, CBP Standard of Conduct, dated March 13, 2012, indicates staff are not only required to report within their chain of command, they are required to report outside their chain of command to JIC, CBP Internal Affairs, OPR, or OIG. The Auditor interviewed 15 random Supervisors and Officers. All understood the reporting requirements if they receive a report of sexual abuse of a detainee, retaliation of a detainee or staff for reporting or participating in an investigation, or staff neglect, or violation of responsibility that may have contributed to sexual abuse. During random interviews conducted by the Auditor, Supervisors and Officers confirmed their responsibilities to immediately report any allegation of sexual abuse, retaliation, or staff failure to perform their duties within and outside of their chain of command if necessary.

(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 is provided to staff in the mandatory PREA training as well as in policy. The Auditor interviewed 15 random Supervisors and Officers. All indicate information they become aware of is not shared except on a need to know basis or during an investigation into the matter.

(d) CBP Directive 2130-030 requires CBP staff notify relevant agencies if the alleged victim of a sexual assault is a vulnerable adult or under the age of 18. During an interview with the PREA Field Coordinator he states should a vulnerable adult or person under 18 be sexually assaulted at Laredo Bridge II the supervisor on duty would make notifications to the appropriate local State Agencies. Interviews with random Supervisors confirm they are aware of this duty and understand the notification procedure. Laredo Bridge II has had no 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 is to take immediate action to protect the detainee. This specific question was asked of the 15 random Supervisors and Officers interviewed as well as the PREA Field Coordinator. All confirm any detainee believed to be in imminent danger of being sexually abused would be separated from other detainees and placed under constant supervision of staff. All state the detainee would be placed in a hold room alone or under direct supervision of staff.

§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 make reasonable efforts to promptly report any allegation of sexual abuse the facility becomes aware of occurring at another facility. The notification is required to be made to the appropriate office or Administrator of the facility where the alleged incident occurred. The PREA Field Coordinator indicates these notifications would be done as soon as possible by the supervisor on duty in accordance with the Directive. There were no notifications made to other facilities in the last 12 months as no alleged incidents have been reported to any staff. Interviews with random Supervisors confirm they are aware of this duty and notification procedure.

(b)(c) While CBP Directive 2130-030 does not stipulate the notification to other confinement facilities is to be made within 72 hours and documented, an interview with the PREA Field Coordinator indicates he understands the 72 hour deadline stipulated in the standard. He states the supervisor on duty would be responsible for making the notification and it would be documented. He also states in most instances the notification would be completed immediately, well in advance of the 72 hour deadline. The Auditor conducted interviews with random Supervisors on all shifts and confirmed they are well versed in the notification requirement, including their responsibility to make the notification. All Supervisors state the notification would be made as soon as possible and were aware it must be made no later than 72 hours after the allegation is received. They also confirm the notification would be documented immediately.

(d) CBP Directive 2130-030 requires prompt, thorough, objective investigation be conducted anytime an allegation of sexual abuse is received. Laredo Bridge II received no referrals from other facilities of allegations of sexual abuse occurring at Laredo Bridge II in the last 12 months so there were no referrals for investigations. The interview with the PREA Field Coordinator indicates if an allegation is received an investigation would be initiated by the supervisor on duty.

§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) Responsibilities for law enforcement first responders to sexual assault are defined in CBP Directive 2130-030. The Directive and PREA training require law enforcement staff separate the alleged victim and abuser, preserve and protect the crime scene, and if the abuse occurred within a time period that allows for the collection of physical evidence, request the alleged victim and abuser not take any actions that could destroy physical evidence. The Directive requires non-law enforcement staff also request the alleged victim not take any actions that could destroy physical evidence and then notify law enforcement staff. The Auditor conducted interviews with 15 random Supervisors and Officers who detailed their responsibilities as first responders. Each told the auditor they would separate the victim from the abuser, provide medical assistance if needed by having the detainee transported to a local hospital, preserve evidence to the extent possible, and notify their supervisor. There are no contractors with direct access to detainees at Laredo Bridge II and therefore there were no interviews of non-law enforcement first responders.

§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 the document is CBP's written institutional plan outlining the coordinated multidisciplinary team approach to responding to sexual abuse. The Directive covers aspects from hiring, training, reporting, responding, medical and mental health services, investigations, and data collection. During the interview with the PREA Field Coordinator he described first responder duties, medical treatment for detainees at local hospitals, mental health services provided, investigations, and the involvement of the Laredo Police Department.

(b)(c) CBP Directive 2130-030 states if an alleged victim of sexual abuse and/or assault is transferred to another DHS facility, Laredo Bridge II must inform the receiving agency of the alleged incident and the victim's potential need for medical or social services. The notifications are also to be made if the alleged victim is transferred to a non-DHS facility as permitted by law or unless the alleged victim requests otherwise. During the PREA Field Coordinator's interview, he informed the Auditor Laredo Bridge II has had no cases requiring notification to a DHS or non-DHS facility in the last 12 months. He states if they did the supervisor on duty would be responsible for the notification requirements outlined in CBP Directive 2130-030.

§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 will do so if the seriousness and plausibility of the allegation make removal appropriate. The Auditor conducted an interview with the PREA Field Coordinator who states an allegation of sexual abuse and/or assault involving staff, a contractor, or volunteer would result in the person being removed from positions with detainee contact pending the outcome of the investigation. He indicates there have been no 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. The retaliation prohibition is also detailed in the PREA training each staff member receives. Interviews with 15 random Supervisors and Officers confirm they are aware of the prohibiting of retaliation against anyone who makes an allegation of sexual misconduct. The PREA Field Coordinator informed the auditor there have been no allegations of retaliation made at Laredo Bridge II 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) A review of CBP Directive 2130-030 confirms CBP personnel may be subject to disciplinary or adverse action up to and including removal from their position and Federal service for substantiated allegations of sexual abuse or violating sexual abuse policies. Interviews with the HQ SMEs for SAAI and LER indicate staff would be subject to disciplinary action including removal from their position or Federal service for a substantiated allegation of sexual abuse or violating the agency sexual abuse policy.

(c)(d) CBP Directive 2130-030 requires OPR to report all removals or resignations in lieu of removal to appropriate law enforcement agencies and relevant licensing bodies 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 the LER would notify law enforcement and licensing bodies of all removals or resignations in lieu of removals for violations of the agency zero-tolerance policy.

§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/or assault be removed from all duties requiring detainee contact pending the outcome of an investigation, as appropriate. The Auditor conducted an interview with the PREA Field Coordinator who confirms any contractor alleged to have conducted any sexual misconduct would result in their removal from duties and contact with detainees pending investigation. CBP Directive 2130-030 also requires OPR report any removal or resignation in lieu of removal of contractors for violation of the agency sexual abuse policy to law enforcement any relevant licensing bodies, to the extent known.

§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 prophylaxis, in accordance with professionally accepted standards of care. It also requires emergency medical treatment services be provided to the 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 Auditor conducted an interview with the PREA Field Coordinator who confirms detainee victims of sexual assault are to receive all medical care, treatment and medications at no cost to the detainee, even if they do not name the abuser or cooperate with the investigation.

§115.186(a) – Sexual abuse incident reviews.

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

Notes:

(a) Incident reviews are required at the conclusion of every investigation of sexual abuse/assault according to CBP Directive 2130-030. The reviews are to occur within 30 days and determine whether the allegation or investigation indicate a change is needed in policy or practice to better prevent, detect, or respond to sexual abuse. Any 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 HQ SME from OFO prior to the site visit and he described the process for the completion of

the review and recommendations. His description confirms the procedures outlined in the Directive are followed. An interview with the PREA Field Coordinator confirms he is aware of the incident review and recommendation process. An interview with the PSA Coordinator confirms no reviews had been conducted at Laredo Bridge II due to there being no allegations reported during the previous 12 months.

§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)
- X Not Applicable (provide explanation in notes):

Notes:

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

ADDITIONAL NOTES

None.

AUDITOR CERTIFICATION:

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

(b)(6)(b)(7)(C)

Auditor's Signature

May 27, 2019

Date

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



U.S. Customs and Border Protection

AUDITOR

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

AGENCY

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

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

Name of Sector or Field Office:	Laredo Field Office
Name of Chief or Director:	(b)(6)(b)(7)(C)
PREA Field Coordinator:	(b)(6)(b)(7)(C)
Sector or Field Office Physical Address:	109 Shiloh Dr., Suite 301, Laredo TX 78045
Mailing Address: (if different from above)	Same as above.

SHORT-TERM FACILITY BEING AUDITED

Information About the Facility	
Name of Facility:	Laredo Bridge II – Lincoln Juarez Bridge
Physical Address:	Admin. Building #2 Laredo, Texas 78040
Mailing Address: (if different from above)	700 Zaragoza Street, Laredo, Texas 78040
Telephone Number:	(b)(6)(b)(7)(C)

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

FINAL DETERMINATION

SUMMARY OF AUDIT FINDINGS:

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

An on-site audit of the Customs and Border Patrol (CBP) Office of Field Operations (OFO), Laredo Bridge II Port of Entry (POE), Lincoln Juarez Bridge, Laredo, Texas, was conducted on March 7, 2019, and the preliminary findings report was submitted on April 7, 2019. Following comments from CBP and Auditor Review, the report was submitted in Final Draft on May 27, 2019.

At that time, the Auditor reviewed the compliance of 25 Part B standards and the Laredo Bridge II was found to be in compliance with 23 standards (115.111; 115.114; 115.115; 115.116; 115.117; 115.118; 115.121; 115.122; 115.131; 115.132; 115.141; 115.151; 115.154; 115.161; 115.162; 115.163; 115.164; 115.165; 115.166; 115.167; 115.176; 115.177; 115.182 and 115.186). The facility had not met the requirements for standard 115.113 and 115.115.

On April 6, 2020, the Laredo Bridge II POE, submitted a Corrective Action Plan (CAP) to the Auditor through Headquarters. Several documents were requested by the Auditor of transgender pat-down searches. The re-training musters and staff sign-offs were received on July 31, 2020. As part of the CAP, the facility submitted a copy of the "After Action Report: Summary of the Annual Review of Detainee Supervision," as required by Standard Provision 115.113 (b). The Summary of the Annual Review of Detainee Supervision included the elements as required in standard provision 115.113 (c). This report was found to be sufficient and an analysis of the report follows below. Although there was regular communication, 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 relied 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 6, 2020, the Laredo Bridge II POE submitted documentation of the After Action Meeting Summary Report of the Annual Review of Detainee Supervision Guidelines as required by Standard Provision 115.113 (b). This Report was prepared by the Acting Watch Commander and dated February 4, 2020. The report verified the meeting involving the Assistant Port Director and the Acting Watch Commander. All elements of supervision required by standard provision 115.113 (c) which include (b) (7)(E), detainee population size and composition, facility layout and past incidents of sexual abuse were considered in the facility's findings. The findings supported no current need to change supervision practices at Laredo Bridge II POE. The Auditor's review of this report results in a finding of "Meets Standard" 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 July 31, 2020, the Laredo Bridge II POE submitted staff musters dated December 10 and December 11, 2018, outlining staff performance in the processing of transgender applicants for admission. The muster referenced CBP National Standards on Transport, Escort, Detention, and Search (TEDS). The Laredo Bridge II POE also submitted staff re-training sign offs and acknowledgements. Upon review, the Auditor requested additional information and on August 4, 2020, the Auditor received an email dated July 31, 2020, "Clarification on the Search of Transgender and Intersex Individuals," to all Laredo Bridge II POE staff which satisfied the Auditor's request. The Auditor's review of this material results in a finding of "Meets Standard" with standard provision 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)

Auditor's Signature

August 9, 2020

Date