

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:	Border Patrol
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SECTOR OR FIELD OFFICE

Name of Sector or Field Office:	Yuma Sector
Name of Chief or Director:	Chief Patrol Agent (b)(6)(b)(7)(C)
PREA Field Coordinator:	Special Operations Supervisor/PREA Field Coordinator (SOS/PFC) (b)(6)(b)(7)(C)
Sector or Field Office Physical Address:	4151 South Avenue A, Yuma Arizona 85365
Mailing Address: (if different from above)	

SHORT-TERM HOLDING FACILITY BEING AUDITED

Information About the Facility			
Name of Facility:	Yuma Station		
Physical Address:	4151 South Avenue A, Yuma Arizona 85365		
Mailing Address: (if different from above)			
Telephone Number:	(b)(6)(b)(7)(C)		
Facility Leadership			
Name of Agent in Charge:	(b)(6)(b)(7)(C)	Title:	Patrol Agent in Charge (PAIC)
Email Address:	(b)(6)(b)(7)(C)	Telephone Number:	(b)(6)(b)(7)(C)

AUDIT FINDINGS

NARRATIVE OF AUDIT PROCESS AND DESCRIPTION OF FACILITY CHARACTERISTICS:

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

The Prison Rape Elimination Act (PREA) on-site audit of Customs and Border Protection (CBP) Border Patrol (BP) Yuma Station (YUS) in Yuma, Arizona was conducted on Tuesday, July 30, 2019, from 05:30 hours until 17:15 hours. The audit was conducted by (b)(6)(b)(7)(C), Certified PREA Auditor, contracted through Creative Corrections, LLC of Beaumont, Texas. This was the first PREA audit for YUS. The YUS is a short-term processing and holding area detaining male and female adults, Unaccompanied Alien Children (UAC), and family units for a time period specified to be under six hours, pending transfer for removal, detention, or placement.

The purpose of the audit was to determine compliance with the Department of Homeland Security (DHS) PREA Standards. The on-site audit followed the Auditor's electronic review of CBP's PREA policies and procedures and telephonic interviews with CBP Headquarters (HQ) Subject Matter Experts (SMEs).

The Points of Contact for the YUS audit were Special Operations Supervisor (SOS)/ Sector PREA Field Coordinator Michael Wisniewski and Supervisory Border Patrol Officer (SBPO) Esgardo Gonzalez.

In an effort to facilitate midnight shift interviews and to return Agents to the field as quickly as possible, the Auditor initiated third-shift staff and supervisory interviews prior to the entry briefing. The Entry Briefing was held at 7:30 a.m. Those present at the Entry Briefing were:

(b)(6)(b)(7)(C), Deputy PSA Coordinator, Privacy and Diversity Office (PDO), HQ
(b)(6)(b)(7)(C), Patrol Agent in Charge (PAIC), USBP YUS
(b)(6)(b)(7)(C), Deputy Patrol Agent in Charge (DPAIC), USBP, YUS
(b)(6)(b)(7)(C), Deputy Patrol Agent in Charge (DPAIC), USBP, YUS
(b)(6)(b)(7)(C), Assistant Chief, USBP, HQ
(b)(6)(b)(7)(C), Assistant Chief, USBP, HQ
(b)(6)(b)(7)(C), Assistant Chief, USBP, YUS
(b)(6)(b)(7)(C), Special Operations Supervisor/Yuma Sector PREA Field Coordinator (SOS/YSPFC), Yuma Sector
(b)(6)(b)(7)(C), Compliance Officer, Yuma Sector
(b)(6)(b)(7)(C), Supervisory Border Patrol Agent/Station PREA Field Coordinator (SBPA/SPFC), YUS

Immediately following the entry-briefing, all parties were given a tour of YUS by the YSPFC and the SPFC, which followed the path someone would follow from their arrest/custody, booking/processing, and being placed into holding. Once a detainee processing commences at YUS, a determination is made as to the secure area in which that person will be held. Single adults are separated by gender and safety factors. Unaccompanied Alien Children (UAC) are separated by age and gender. Families are separated by male or female head-of-household or both parents and are held in the soft-sided structure. YUS is comprised of a large masonry building and a large soft-sided, four-pod structure contained within a very large fenced compound with several electronic gates providing access to these two structures and many supportive out-buildings, containers, vehicle garages, and service sheds. The masonry building has a secured public entrance which leads to an administrative area, staff areas, physical conditioning areas for staff, a muster area, a secure armory, and secured weapon storage. Supervisors, Agents, and allied law enforcement personnel do not enter detainee holding areas with their sidearm. Entry to the secure holding area is gained via an electronic locking system. Upon entering the secure holding area, there is a secured control area (referred to at YUS as "the Bubble"). This area allows for limited lock control and (b)(7)(E). Video screens can be manually "called-up" from a computer keyboard and are both color and high definition. Detainees are processed at a counter in the secured area and there are also several private processing rooms.

To the right of the "Bubble" is a corridor with a room utilized by the contracted medical staff, a medical supply room and (b)(7)(E). Four of these rooms currently have a visible toilet which violates Standard 115:115. Facility leadership were immediately advised of this matter and immediately mobilized to find an appropriate solution. The Auditor made several suggestions to the YSPFC and the SPFC.

In the area to the left, center and soft right of the "Bubble" are several large holding rooms where many detainees

were securely held. Each of these areas has partitioned toilets. There are separate shower facilities where one holding room may be showered at a time. The showers have separate stalls and curtains that allow Agents/trained volunteers to observe heads and feet, while maintaining privacy of detainee's bodies. There are sufficient male/female staff and assigned personnel to allow for supervision of showering by same-sex personnel.

In the area immediately adjacent to the left of the "Bubble", there are two separate group holding rooms. The first is designated solely for male Unaccompanied Alien Children (UAC) and the other is for female UACs. Each has two partitioned toilets. To the right of these two holding rooms, are several additional holding rooms which span the remainder of the processing area in front of the "Bubble". The remaining group holding rooms are for adult males and females and are separated by gender and country of origin. The holding room are secured by key lock and each have two partitioned toilets.

Detainee families are held in one of four large pods contained within the soft-sided structure located 100 yards from the masonry structure across the compound. Detainee families are processed in the front pod and then assigned to one of the three remaining pods: female head-of-household and children; male head-of-household and children; and two parent households. There are sleeping mats, televisions, recreational supplies for children, snacks and drinks and private bathroom facilities in each pod. Families are showered separately in the other building. Private security contractors provide 24/7 door security only. They have no contact with the detainees except to control the exits. Each pod has a raised control podium. During the on-site audit, the control podium and the family processing areas were staffed by assigned Office of Field Operations (OFO) Officers.

Detainee property is currently collected, tagged and stored outside the secure holding area by U.S. Coast Guard personnel.

All staff with direct contact with detainees are law enforcement officers or enlisted members of the United States Coast Guard. Coast Guard activities are limited to collecting, tagging and storing detainee property; escorting detainees throughout the compound, serving food and monitoring showers with a sworn officer present. Each time a Coast Guard detail was observed, there was a Petty Officer present to insure that Coast Guard personnel were operating within the purview of their agreed upon orders. The Auditor reviewed the duty orders issued by the Commanding Rear Admiral. At no time were Coast Guard personnel operating outside the direct view of sworn law enforcement officers.

Detainees are removed from any area where janitorial or maintenance contractors must work and the workers are escorted in and out by law enforcement staff. The number of Agents/Assigned OFO Officers working in the holding areas remains fluid and varies in accordance with the flow of arrestees/detainees.

Note: In addition to the United States Coast Guard, there is a United States Marine platoon providing logistical support under the direction of an assigned Lieutenant and a United States Army National Guard Unit providing perimeter security outside the buildings, but both inside and outside the compound fences. Neither of these military units is situated to have detainee contact. There are also Transportation Security Administration (TSA) officers and Homeland Security civilian employees providing logistical and administrative support services, again without detainee contact. The Auditor was able to interview OFO, TSA, and civilian Homeland Security staff to vet that they had been PREA trained. The Auditor has no authorization to interview military personnel and did not do so. However, given the level of necessary exposure between detainees and Coast Guard personnel, the Auditor expressed concern to Border Patrol HQ staff and the Deputy PSA Coordinator that USCG personnel receive sexual abuse reporting training. These concerns were addressed by the PSA Coordinator's Office and this training was made available to USCG personnel serving at Border Patrol Stations and Consolidated Processing Centers (CPC).

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.

An Exit Briefing was held in the YUS Main Conference Room at 15:45. The Exit Briefing was opened by (b)(6)(b)(7)(C), Deputy PSA Coordinator (PDO) and was conducted by (b)(6)(b)(7)(C), Creative Corrections Certified PREA Auditor. Present at the Exit Briefing were:

(b)(6)(b)(7)(C), Deputy PSA Coordinator, Privacy and Diversity Office (PDO), HQ
(b)(6)(b)(7)(C), Patrol Agent in Charge (PAIC), USBP YUS
(b)(6)(b)(7)(C), Deputy Patrol Agent in Charge (DPAIC), USBP, YUS
(b)(6)(b)(7)(C), Assistant Chief, USBP, HQ
(b)(6)(b)(7)(C), Assistant Chief, USBP, HQ
(b)(6)(b)(7)(C), Assistant Chief, USBP, YUS
(b)(6)(b)(7)(C), Special Operations Supervisor/Sector PREA Field Coordinator (SOS/YSPFC), Yuma Sector
(b)(6)(b)(7)(C), Special Operations Supervisor, Yuma Sector
(b)(6)(b)(7)(C), Compliance Officer, Yuma Sector
(b)(6)(b)(7)(C), Supervisory Border Patrol Agent/Station PREA Field Coordinator (SBPA/SPFC), YUS

Scope of the Audit: Prior to the on-site audit, the Auditor was able to review the HQ and Local Pre-Audit Questionnaires (PAQs), the HQ Responsive Documents and Data Requests, local documents, including YUS specific documents, HQ Participation documents, and medical provider websites. The Auditor also conducted four HQ Subject Matter Expert (SME) interviews.

The Auditor was given a complete tour of YUS. The Auditor had complete access to the facility and observed all custody areas, processing area and holding rooms/areas. The Auditor was provided with a private interview area for staff interviews and a processing room in the secure holding area to interview single detainees/UAC's. No detainee families agreed to be interviewed by the Auditor. The Auditor was able to use a private telephone line to privately access OIG.

During the on-site audit, the Auditor interviewed law enforcement personnel (Agents) from all three shifts. In total, the Auditor interviewed 12 BP Agents, one OFO Officer, five local SMEs, one medical contractor staff member and two volunteers. Three detainees were interviewed including one female UAC from Mexico who was LEP. The Auditor also interviewed a LEP male from Nicaragua and an English speaking female from Cameroon. Several single adult detainees and two UAC's refused to be interviewed as did all queried detainee families. Many families had just arrived and were timid when approached by the SPFC. The Auditor interviewed a total of 18 staff, 2 volunteers, one contractor, and three detainees.

The Auditor was able to review the staff training completion records. There were no strip (partial body search) or body cavity search records for the audit period, as SME staff reported none had been conducted.

During the Audit Process, the Auditor reviewed the compliance of 25 DHS Subpart B Standards at YUS. The Auditor found YUS met 23 standards (115.111; 115.114; 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, 115.186; and did not meet two standards (115,113; 115.115).

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"/> Meets Standards (Substantial Compliance; Complies in All Material Ways with the Standards for the Relevant Review Period) <input checked="" type="checkbox"/> Does Not Meet Standards (Requires Corrective Action)	<input type="checkbox"/> Low Risk <input checked="" type="checkbox"/> Not Low Risk

PROVISIONS

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

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

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

Notes:

The facility meets the standard. The agency has taken definitive steps to inform the public, all employees, and detainees of its adherence to the PREA Standards. CBP Directive 2130-030 Prevention, Detection and Response to Sexual Abuse and/or Assault in CBP Holding Facilities (1/19/2018), the Commissioner's Memorandum dated March 11, 2011, "CBP's Policy on Zero Tolerance of Sexual Abuse and Assault" and the Commissioner's Memorandum on Unaccompanied Alien Children (undated) issued to all CBP employees clearly outline the duty of all CBP staff members to prevent, detect and respond to all allegations or observations of sexual abuse. Zero tolerance posters are posted throughout the custody, processing and holding area of the facility. Interviews with the HQ and Local SMEs emphasize staff training on zero tolerance and local random staff interviews verify staff has been trained. The Auditor was able to interview both the HQ PSA Coordinator and the two PREA Field Coordinators, one from Yuma Sector and one from Yuma Station. These interviews verify both the agency and the facility have provided dedicated personnel to insure PREA provisions are in compliance.

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

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

Notes:

(a) The facility meets the standard provision. The Auditor was able to determine appropriate levels of supervision through observation of staff supervision of detainees, operational procedures and (b)(7)(E). (b)(7)(E) capabilities appear to be adequate. CBP Directive 2130-030 requires the development of facility-based staffing guidelines to meet the detainee supervision needs of each facility. The USBP Chief's memorandum of 8/13/2014 provides broad guidelines for supervision as required by the standard. Interviews with the Special Operations Supervisor/ Sector PREA Field Coordinator (SOS/ YSPFC and the Supervisor/PREA Field Coordinator (SBPA/SPFC) verify shift supervisors have both the responsibility and the authority to bring Border Patrol Agents in the field back into YUS when supervision needs require them to do so.

(b) The facility does not meet the standard provision. CBP Directive 2130-030 requires each Sector Office implement an annual review process for all holding facilities. YUS does not have a formal staffing review process with the Sector Office. Corrective Action is required. **Corrective Action:** Provide documentation of formal staffing guidelines and of the annual staffing review for YUS.

(c) The facility does not meet the standard provision. Areas of consideration detailed in the standard provision are regularly discussed by PAIC, the APAIC and the SBPA, but are not formally discussed as part of the annual review. Corrective Action is required. **Corrective Action:** Provide documentation of the annual staffing review for YUS which addresses the six elements detailed in the standard provision.

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

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

Notes:

(a) The facility meets the standard provision. CBP National Standards on Transport, Escort, Detention and Search (TEDS) (October, 2015), requires juveniles be treated at all times in their best interest and all guidelines for Special Populations be taken into consideration. SME and random staff interviews verify that UACs will be held in the least restrictive

environment while maintaining safety. Sector procedures mirror agency requirements for BP stations to transfer UAC's to Department of Health and Human Services, Office of Refugee Resettlement (ORR) personnel as soon as possible. UAC's are separated from adults and by gender pending this transfer.

(b) The facility meets the standard provision. UACs are immediately separated from accompanying adults, unless the relationship has been properly vetted and determined to be appropriate prior to holding. Local SME and random staff interviews confirm a combination of agency and State Department data base searches with separate interviews of both the minor and the accompanying adult are used to vet the relationship. Interviewed and observed staff were well-versed in dynamic interviewing skills including eye contact, interrupted speech patterns and the observation of the relationship between the parties involved.

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

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

Notes:

(b) The facility meets the standard provision. CBP TEDS sets specific guidelines for cross-gender viewing and searches in the absence of truly exigent circumstances. Interviews with Local SMEs and random staff support the standards and strip (partial body) and body cavity searches are not performed except in exigent circumstances, with body cavity searches of juveniles being referred to a medical practitioner. Children and UACs are not pat frisked, except for immediate searches in the field as determined by the Agent for personal/public safety. All interviewed SMEs and random staff indicated training proper hand placement when searching breast and groin areas during immediate searches.

(c) The facility meets the standard provision. CBP TEDS requires all strip (partial body) and body cavity searches be documented. The Auditor requested and was shown the search training provided to all law enforcement personnel quarterly when they have firearms re-certification. Random staff interviews verified this training. There were no strip (partial body) or cavity searches performed at YUS within the past 12 months and therefore, no search logs to review.

(d) The facility does not meet the standard provision. YUS has developed internal procedures and practices which allows for privacy during detainee clothes changing and toileting as required in the standard provision and CBP TEDS. There are no shower facilities at YUS. Random staff interviews confirm the practice of making deliberate announcements when opposite gender staff enter a holding room or search area. The Auditor observed this practice. Staff at YUS have received the CBP PREA Quick Reference Cards which detail privacy rights. However, the Auditor identified four secure small holding rooms (#609, #610, #614 and #617) during the site review where toilets can be clearly viewed from the outside corridor through monitoring windows. There was also (b)(7)(E) where detainees could possibly be viewed if they stood to remove clothing to use the toilet. Corrective Action is required. **Corrective Action:** Provide photographs of partitions or screens in the four secure holding rooms and a photograph of digital occlusion of the (b)(7)(E) in question.

(e) The facility meets the standard provision. All supervisory and random staff report they would ask the detainee to self-identify if they had a need to know the detainee's gender. They all report strip searches are not authorized to determine a detainee's gender.

(f) The facility does not meet the standard provision. While interviews with supervisors and Agents confirmed training for pat-down searches, the agency/facility produced no specific training materials for pat-down searches of transgender detainees. This lapse in training has creates a situation where staff interviews reveal Agents perform differently when searching transgender detainees. Some Agents respond to the detainee's self-identification and they are patted-down by an Agent or law enforcement Agent of the same gender as how they identify. Some Agents ask the detainee the status of their genitalia and they are searched by an Agent of the same biological gender as they indicate, regardless of their gender identification. Corrective Action is required. **Corrective Action:** Provide documentation all law enforcement staff at YUS have received and understand specific training regarding the searching of transgender detainees.

§115.116(a) through (c) – Accommodating detainees with disabilities and detainees who are limited English proficient.

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

Notes:

(a) The facility meets the standard provision. CBP Directive 2130-030 requires staff in holding facilities to provide reasonable accommodations to detainees who are hearing impaired, blind or have low vision, or who have intellectual

or mental health disabilities. Staff interviews verified the steps Agents and supervisors would take to provide accommodations to detainees with these disabilities. These include processing staff reporting having read PREA notices to visually impaired and functionally illiterate detainees. Interviewed SMEs and random staff report there have been no detainees with pervasive disabilities and attribute this to the short time period detainees are held at YUS.

(b) The facility meets the standard provision. CBP Directive 2130-030 requires all holding facilities to provide effective, accurate and impartial in-person or telephonic interpretation services to detainees who are Limited English Proficient (LEP). All PREA posters are posted in both English and Spanish, but also provide direction in commonly spoken languages. All staff report they have been able to communicate with LEP detainees via the available Interpreters and Translators Incorporated" line. Many staff at YUS speak fluent Spanish. All interviewed random staff members but they have used the interpretive services when necessary. Two of three interviewed detainees indicated there were many bilingual staff members who they could speak to as they were LEP.

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

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

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

Notes:

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

(b) The facility meets the standard provision. Interview with the HQ HRM SME verifies new employees and employees seeking promotion must complete an application which asks about previous sexual misconduct and imposes a continuing duty to disclose any such future misconduct.

(c) The facility meets the standard provision. The Auditor selected the names of 13 random staff members of all ranks from YUS. The Assistant Chief, HQ and the Deputy PSA Coordinator, HQ submitted these names to the Office of Professional Responsibility, Personnel Security Division. Review of a computer check of these employees found the agency to be in compliance with pre-hire and five-year updated investigations.

(d) The facility meets the standard provision. YUS currently uses no contractors who have contact with the detainees. Local procedures require staff to remove any detainees from an area where maintenance or janitorial contractors must work.

(e) The facility meets the standard provision. Interview with the HQ HRM SME confirms it is agency policy to rescind an offer of employment to a prospective employee or to terminate the employment of any employee who makes a material omission or provides false information regarding sexual abuse misconduct. Staff are informed of the policies regarding material omissions and providing false information in the CBP Code of Conduct which is referenced in their yearly required ethics training taken online.

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

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

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

Notes:

(a) The agency and facility meet the standard provision. In order to address the immigration surge on the Southwest border, the soft-sided holding facility at YUS was erected expeditiously. This facility was constructed under the careful supervision of both HQ and sector office leadership to ensure that PREA standards regarding separation, supervision, and

privacy concerns were kept in the forefront. These concerns included the provision of private showering and toileting facilities, separate family areas, a staff observation tower, staff and contractor security assignments, and (b)(7)(E) (b)(7)(E) that met technology best practice at the time of construction. These practices were confirmed by interviews with the PAIC and the SOS/YSFPC.

b) The facility meets the standard provision. When (b)(7)(E) was last upgraded at YUS, an interview with the PAIC verifies PREA supervision and privacy concerns were taken into consideration and approved by the sector office.

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

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

Notes:

(c) The facility meets the standard provision. CBP Directive 2130-030 specifies the treatment services to be provided to a detainee victim of sexual assault. YUS utilizes the services of Amberly's Place for forensic examinations of sexual abuse victims determined to be evidentiary or medically appropriate at no cost to the detainee and only with the detainee's consent. The examination is to be performed by a Sexual Assault Nurse Examiner (SANE) who is available on-call. The Auditor confirmed the services with a supervisor at Amberly's Place via a telephonic conference on 8/8/2019.

(d) The facility meets the standard provision. The Auditor determined Amberly's Place has sexual abuse advocates available. Local SME interview with the PFC verified sexual abuse victims from YUS would have access to victim services at the hospital. (e) The facility meets the standard provision. Interview with the Yuma PFC/SOS verifies both the Yuma Police Department and the Yuma County Sheriff's Office have been advised of and are agreeable to following PREA requirements.

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

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

Notes:

(c) The facility meets the standard Provision. CBP Directive 2130-030 requires prompt reporting of all sexual assaults/allegations to the facility administrator or agency office. All interviewed Local SMEs and random staff report they will immediately report such incidents up the chain of command and to the Joint Intake Center (JIC). After discussion with the PAIC or APAIC, the SBPA or delegated supervisor is to inform local law enforcement, as appropriate. This report was confirmed by the PAIC during their SME interview.

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

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

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

Notes:

(a) The facility meets the standard provision. All YUS employees have completed the mandatory PREA training including the agency's zero tolerance policies, detainee's right to be free of sexual abuse, and staff duty to report all allegations of sexual abuse. The Auditor was able to review the training curriculum and training records for a sample number of employees. Staff interviews verified the above training via the Department of Homeland Security (DHS) PALMS. Note: Contractor (maintenance and janitorial) staff is not trained as YUS insures the contractors and detainees have no contact. The facility has addressed the issue of contract employees by initiating internal procedures which require detainees to be removed from any area where contractors need to clean or conduct maintenance. CBP processing and holding facilities utilize no volunteers.

(b) The facility meets the standard provision. Reviewed training records verify all active staff at YUS were trained within two years of the effective date of the standards or upon their hire, if hired after the initial training. Training records confirm all law enforcement staff received annual refresher training as required. Random staff interviews confirm yearly PREA training on PALMS and bi-annual search training.

(c) The facility meets the standard provision. Training records are maintained electronically as required by the standard

and Local SME interview with the PFC verified compliance. The Auditor had the opportunity to view all required staff training records.

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

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

Notes:

The facility meets the standard. YUS maintains colorful, large print posters of DHS’s Zero Tolerance Policy in all detainee holding and processing areas. The posters are printed and posted in English and Spanish, but also contain a box providing zero tolerance and reporting information in all common languages. In addition, CBP addresses Zero-Tolerance prominently on its website, <https://www.cbp.gov/about/care-in-custody>.

§115.134 – Specialized training: Investigations.

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

Notes:

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

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

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

Notes:

(a) The facility meets the standard provision. CBP TEDS requires all detainees be assessed for being at-risk of sexual assault before being placed in a hold room or holding facility. Based on this assessment, the processing Agent is to decide whether the detainee needs to be placed alone or placed away from certain other detainees. Local SME and random staff interviews demonstrate a proficiency on the part of staff to establish a dialogue with the detainee to look for and respond to non-verbal cues and to ask additional questions until the Agent determines if the detainee is vulnerable to sexual assault. Vulnerable detainees are removed from contact with other detainees whenever possible. If not possible, continuous sight and sound supervision is required by local procedure and was verified by staff interviews.

(b) The facility meets the standard provision. All detainees at YUS are asked if they have concerns about their personal safety in holding at YUS. This practice was verified by interviews of both random staff and SMEs. Staff report they are asking questions to determine the detainee’s safety in custody. They will assess potential victims or perpetrators according to their physical build, available criminal records and subsequent questioning.

(c) The facility meets the standard provision. CBP TEDS requires the processing Agent consider evaluation factors outlined in the standard provision. Randomly interviewed Agents were able to identify the factors they had been trained to look for.

(d) The facility meets the standard provision. Interviewed Local SMEs report upon a detainee being identified as “high risk” and no single cell being available, Agents will consult with the on-duty supervisor and an Agent will be detailed to provide continuous sight and sound supervision. This practice was confirmed through Agent interviews.

(e) The facility meets the standard provision. CBP TEDS requires staff to ensure assessments are provided in privacy where sensitive information cannot be learned by other parties. The dissemination of sensitive information is to be controlled on a “need to know” basis. Random staff interviews verify this practice. Agents regularly practice field interviews and reported that privacy in and around interviews is standard practice.

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

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

Notes:

(a) The facility meets the standard provision. Both CBP TEDS and CBP Directive 2130-030 provide multiple ways for detainees to report sexual abuse/assault, retaliation and/or staff neglect or violations leading to sexual assault. HQ and Local SME interviews, staff interviews verify detainees may report abuse orally or in writing to staff; third party reports

are accepted and detainees may request to make private anonymous telephone calls to OIG. When questioned about detainee calls to OIG, the Agents report should a detainee request to call OIG or the number on the PREA poster; they will be escorted to the processing room with windows where they can complete their call in privacy. Agents reported they shall supervise the detainee from outside the office. Agents report they will not ask the detainee why they wish to call OIG.

(b) The facility meets the standard provision. Local SME and staff interviews reveal all staff have been trained to allow detainees to report sexual abuse to OIG, or to have a family member or other third party contact OIG. Detainees simply reported they can report abuse by calling the number on the poster.

(c) The facility meets the standard provision. Random staff interviews confirm they must accept oral, written or third party reports of sexual abuse. In turn, those reports must immediately be reported 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:

The facility meets the standard provision. CBP Directive 2130-030 directs third parties may report sexual abuse on behalf of detainees. The public can also go to the CBP PREA website at <https://www.cbp.gov/about/care-in-custody>. DHS posters direct third parties on how to make written or telephonic reports to OIG. YUS staff are required to allow private and anonymous calls from detainees to OIG. Interviewed staff report third parties can call OIG directly on the hotline number. They also report that should a third party report abuse to them, they would immediately remove the detainee from holding, notify their supervisor and follow the same protocol for a detainee report. During the on-site audit, the Auditor was able to place a call to OIG from a YUS telephone.

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

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

Notes:

(a) The facility meets the standard provision. CBP Directive 2130-030 requires all staff to report immediately any knowledge, suspicion or information regarding an incident of sexual abuse/assault; retaliation against detainees or staff who made such a report or participated in an investigation of sexual abuse, or any staff neglect or violation of responsibilities contributing to an incident of sexual abuse/assault. All interviewed Local SMEs and random staff affirmed these responsibilities. When staff were asked how they could report outside of the chain of command, they all reported they could call the OIG hotline or the Joint Intake Center (JIC).

(b) The facility meets the standard provision. YUS staff have gone over the PREA requirements at muster and reported during random staff interviews they must immediately report any incident to their supervisor and their supervisor, in turn, must ensure the incident is reported to local law enforcement, JIC, and OIG.

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

(d) The facility meets the standard provision. Interview with the HQ Sexual Abuse and Assault Investigations (SAAI) SME reveals sexual assaults of victims under age 18 and vulnerable adults will be reported to the designated State or local services agency by the PAIC or their designee and at the direction of the OPR SAAI SME. This practice was verified by the PAIC.

§115.162 – Agency protection duties.

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

Notes:

The facility/agency meets the standard. CBP TEDS requires any agency employee who believes circumstances exist which place a detainee at imminent risk of sexual assault to take immediate action to protect the detainee. Interviews with the PAIC, APAIC and the SBPA affirm the detainee must immediately be protected by isolation or direct constant supervision (sight and sound) or both. Random staff report any detainee who is determined to be of imminent risk of sexual abuse/assault would be removed from contact with other detainees and would be supervised as directed by

supervisory 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) The facility meets the standard provision. CBP Directive 2130-030 requires should a detainee have been sexually abused/assaulted at another facility prior to arriving at YUS, the prior agency or administrator must be notified. Interview with the PREA Field Coordinator verifies the PAIC or their designee would make this notification.

(b) The facility meets the standard provision. The standard provision requires the notification be made within 72 hours of receiving the allegation. The PREA Field Coordinator reports the PAIC or their designee will make the notification immediately. The PAIC confirmed the report would be immediately following verification of the allegation.

(c) The facility meets the standard provision. The PREA Field Coordinator indicates the notification would be documented by notation in the detainee's electronic file.

(d) The facility meets the standard provision. The PREA Field Coordinator reports the advised agency, if outside of the requirements of DHS PSA Subpart B, would be notified of the incident. If part of CBP, the agency receiving the notice is required by Directive 2130-030 to notify JIC.

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

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

Notes:

(a) The agency/facility meets the standard provision. CBP Directive 2130-030 requires upon learning of a detainee sexual assault, the first responding Agent or their supervisor is to perform all first responder duties delineated in the standard provision. In addition to training all law enforcement personnel on first responder duties, YUS reviews these duties at staff musters. All SMEs and Agents were able to recite their duties, as detailed in the standard, as first responders to a sexual abuse/assault incident. YUS agents and Supervisors have been issued PREA "Quick Reference" Cards.

(b) The facility meets the standard provision. Interviewed volunteers have been trained to immediately inform trained Agents of any allegations in order that first responder duties may be initiated. This practice was verified by interviews with volunteers and random staff. It was also verified by the PFC after speaking with the ranking USCG officer on-site.

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

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

Notes:

(a) The facility meets the standard provision. CBP Directive 2130-030 is the agency's coordinated response plan for prevention, detection and response to sexual abuse. The Directive provides a clear progressive plan for all components of addressing sexual abuse in holding facilities. Interviews with all SME's and random staff verified an awareness of their requirement to provide medical care. They were also aware detainees must have access to the advocates, if provided by either or both hospitals.

(b, c) The facility meets the standard provision. CBP Directive 2130-030 requires YUS to notify another DHS facility if the victim of sexual abuse/assault is transferred there. This notification must include the detainee's need for medical or social services, if the need exists. YUS must also make the same notifications to non-DHS facilities, if the law allows for this notification. These requirements were verified by the SOS/YSPFC and would be made by the PAIC or their designated supervisor.

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

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

Notes:

The facility meets the standard. With regard to staff, interviews with both the HQ LER SME and the HQ OPR SAAI SME verified Agency policy is to remove staff from contact with detainees pending the outcome of an investigation into alleged sexual abuse/assault or violation of agency policies when the seriousness and plausibility of the allegation make removal appropriate. The PAIC would reassign any staff member, who allegations of sexual abuse/assault or violations of policy had been made against from detainee contact accordingly. This reassignment would remain in force until the completion of the investigation. YUS by practice, does not allow contact between contractors and detainees and volunteers are monitored by DHS supervisors. Volunteers are restricted from detainee contact. Interview with the HQ LER SME reports Agents do not supervise contractors, but control detainee exposure. If contractor or volunteer/detainee contact somehow did occur and there is an allegation of sexual abuse/assault; the contractor or volunteer would be removed from any possible detainee contact and the PAIC through the Sector Chief would seek the removal of the contractor or volunteer from the facility. This practice was verified by interview of the SOS/YSFPC.

§115.167 – Agency protection against retaliation.

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

Notes:

The facility meets the standard. CBP TEDS prohibits all CBP staff from retaliating against any person, including a detainee, who alleges or complains about mistreatment, participates in an investigation into an allegation of staff misconduct, including sexual abuse, or for participating in sexual activity as a result of force coercion, threats, or fear of force. The training on and implementation of this policy was verified by interviews with the HQ SAAI SME, the PAIC, the APAIC and the SBPA. Interviewed random staff report retaliation is prohibited by directive and they have been trained to look for signs it was occurring.

§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)

Notes:

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

§115.172 – Evidentiary standard for administrative investigations.

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

Notes:

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

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

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

Notes:

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

(c) The agency meets the standard provision. Interview with the HQ HRM/LER SME reveals there were no reports of substantiated sexual abuse/violation of sexual abuse policies for staff at YUS. Interview with the HQ SAAI SME confirms all substantiated cases of sexual abuse are referred to appropriate law enforcement agencies by the facility PAIC or Yuma Sector Chief and notification is coordinated by HQ SAAI SME.

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

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

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

Notes:

(a) The facility meets the standard provision. Interviews with the Local SMEs reveal all suspected perpetrators of sexual abuse will immediately be removed from contact with detainees. CBP facilities do not utilize volunteers and YUS has excluded contractors from contact with detainees by local procedure and practice. Interview with the HQ SAAI SME verifies any substantiated allegations of sexual abuse would result in notification of the allegation to appropriate law enforcement agencies and licensing authorities by the Sector Chief or their designee.

(b) The facility meets the standard provision. Local SME interview with the SOS/YSPFC verifies any contractor suspected of perpetrating sexual abuse would be removed from all duties where detainee contact could occur pending the outcome of the investigation.

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

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

Notes:

(a, b) The facility meets the standard provision. Detainee victims of sexual abuse at YUS needing medical/mental health services are to be immediately transported to Yuma Regional Medical Center. This hospital offers the comprehensive medical services as outlined in the standard provision. The services would be provided to the victim at no charge regardless of the victim's cooperation with the sexual assault investigation. Interviews with the SOS/YSPFC and the SPFC verified these services would be provided and at no charge, regardless of the detainee's cooperation with any investigation.

§115.186(a) – Sexual abuse incident reviews.

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

Notes:

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

§115.187 – Data collection.

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

Notes:

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's Signature

November 8, 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:	U. S. Border Patrol
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SECTOR OR FIELD OFFICE

Name of Sector or Field Office:	Yuma Sector
Name of Chief or Director:	(b)(6)(b)(7)(C), Chief Patrol Agent
PREA Field Coordinator:	(b)(6)(b)(7)(C), Special Operations Supervisor/PREA Field Coordinator (SOS/PFC)
Sector or Field Office Physical Address:	4151 South Avenue A, Yuma Arizona 85365
Mailing Address: (if different from above)	Same as Above

SHORT-TERM FACILITY BEING AUDITED

Information About the Facility

Name of Facility:	Yuma Station
Physical Address:	4151 South Avenue A, Yuma Arizona 85365
Mailing Address: (if different from above)	Same as Above
Telephone Number:	(b)(6)(b)(7)(C)

Facility Leadership

Name of Officer in Charge:	(b)(6)(b)(7)(C)	Title:	Patrol Agent in Charge (PAIC)
Email Address:	(b)(6)(b)(7)(C)	Telephone Number:	(b)(6)(b)(7)(C)

FINAL DETERMINATION

SUMMARY OF AUDIT FINDINGS:

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

An on-site audit of the Customs and Border Protection (CBP), U.S. Border Patrol (USBP), Yuma Station, was conducted on July 30, 2019, and the preliminary findings report was submitted on August 29, 2019. Following comments from CBP Headquarters and from the Auditor, the report was submitted as a Final Draft on November 8, 2019.

At that time, the Auditor reviewed the compliance of 25 Subpart B standards and the Yuma Station was found to be in compliance with 23 standards: (115.111; 115.114; 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 Yuma Station was found to not be in compliance with two standards: (115.113 and 115.115).

On December 13, 2019, the Yuma Station submitted a preliminary Corrective Action Plan (CAP) with a completion date of January 1, 2020. Several documents were sought and received by the Auditor. On March 30, 2020, an Annual Review of Detainee Supervision Guidelines document was submitted to comply with standard provision 115.113 (b). The document was found to be sufficient by the Auditor. This information was reviewed by the Certified PREA Auditor and Program Manager for Creative Corrections and accepted. On September 29, 2020, the Yuma Station submitted a copy of a memorandum dated September 17, 2020, to all CBP Chief Patrol Agents and all Directorate Chiefs reinforcing proper pat search techniques to comply with standard provision 115.115 (f). In conjunction with the memorandum, a Muster Module was attached which provides requirements of Safety Searches, Threat Assessments, and Pat Search Techniques for cross-gender, transgender, and intersex detainees. On January 9, 2021, re-training roster sign-offs indicating Agent/Supervisor understanding and compliance was received. The Auditor reviewed the documents and found the Yuma Station to have now achieved compliance with standard 115:115. The Yuma Station is now compliant with all PREA standards.

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

PROVISIONS

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

§115.113

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

Notes:

On March 30, 2020, the Yuma Station submitted a record of an Annual Review of Detainee Supervision Guidelines which satisfied all elements of the standard. These elements included the listing of all Sector/Station participants, facility descriptions, and a description of responses employed to respond to the different types of populations entering the custody of the Yuma Station. The Yuma Station is now compliant with standard provision 115.113.

§115.115

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

Notes:

On September 29, 2020, the Yuma Station submitted a copy of a memorandum dated September 17, 2020, to all CBP Chief Patrol Agents and all Directorate Chiefs reinforcing proper pat search techniques to comply with standard provision 115.115 (f). In conjunction with the memorandum, a Muster Module was attached which provides requirements of Safety Searches, Threat Assessments, and Pat Search Techniques for cross-gender, transgender, and intersex detainees. On January 9, 2021, re-training roster sign-offs indicating Agent/Supervisor understanding and compliance was received. The Auditor reviewed the documents and found the Yuma Station to have now achieved compliance with standard 115.115.

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

January 13, 2021

Date