



OIDO INSPECTION

U.S. Border Patrol Facilities - Big Bend Sector

OIDO-23-012
September 27, 2023



OIDO is an independent
office within the Department
of Homeland Security.



September 27, 2023

MEMORANDUM FOR: Troy A. Miller
Senior Official Performing the Duties of the Commissioner
U.S. Customs and Border Protection

FROM: David D. Gersten DAVID D GERSTEN
Acting Ombudsman
Office of the Immigration Detention Ombudsman

SUBJECT: OIDO-23-012
U.S. Border Patrol Facilities - Big Bend Sector
May 24-25 and July 26-27, 2022

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Attached is the Office of the Immigration Detention Ombudsman's (OIDO) final report based on its inspection of four U.S. Border Patrol facilities in the Big Bend Sector (BBT) in Texas. OIDO inspected Van Horn Border Patrol Station in Van Horn, Texas, and Central Processing Center West in Sierra Blanca, Texas, on May 24 and 25, 2022, respectively, and Presidio Border Patrol Station in Presidio, Texas, and Central Processing Center East, on July 26 and 27, 2022, respectively. We reviewed the facilities' performance as well as compliance with the U.S. Customs and Border Protection (CBP) National Standards on Transport, Escort, Detention, and Search (TEDS) and relevant CBP policies and procedures. The inspections focused on facility conditions, detainee property, and contracted medical services.

The report contains four recommendations aimed at improving operations and conditions at BBT facilities and their compliance with the TEDS and contract terms. Your office concurred with all four recommendations. Based on the information provided in your responses to the draft report, we consider recommendations 1 and 4 addressed and closed; recommendation 2 unaddressed and open; and recommendation 3 addressed and open.

Attachments



**OIDO INSPECTION
OF
U.S. CUSTOMS AND BORDER PROTECTION
BIG BEND SECTOR FACILITIES**

Executive Summary

Pursuant to its statutory responsibilities, the Department of Homeland Security (DHS) Office of the Immigration Detention Ombudsman (OIDO) Detention Oversight Division conducted announced inspections of four U.S. Border Patrol facilities in the Big Bend Sector in Texas. OIDO inspected Van Horn Border Patrol Station in Van Horn, Texas, and Central Processing Center - West in Sierra Blanca, Texas on May 24 and 25, 2022, respectively, as well as Presidio Border Patrol Station in Presidio, Texas and Central Processing Center - East in Alpine, Texas on July 26 and 27, 2022, respectively. OIDO reviewed facility compliance with the National Standards on Transport, Escort, Detention, and Search (TEDS) as well as applicable U.S. Customs and Border Protection (CBP) policies, procedures, and contracts. OIDO examined issues related to facility conditions, detainee property, and medical care.

OIDO's inspections led to several findings. Related to facility conditions, OIDO noted a concern at one facility. Related to detainee property, OIDO found that several facilities had non-compliance issues related to labeling, and communicating with detainees about personal effects. Related to medical care, OIDO noted deficiencies in staffing levels by the service provider. In addition, OIDO found areas of non-compliance in the conduct of initial detainee health interviews, including limited documentation, lack of detainee privacy, and poor infection control practices. Finally, OIDO noted concerns related to administrative oversight in medical care and procedural discrepancies for pregnancy assessments.

OIDO made four recommendations to improve facility conditions and operations and to meet TEDS, the CBP Personal Effects Internal Operating Procedures, and medical contract terms.

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Introduction

Pursuant to its statutory responsibilities, OIDO conducts independent, objective, and credible inspections of U.S. Customs and Border Protection (CBP) facilities throughout the United States. OIDO reviews, examines, and makes recommendations to address concerns with or violations of performance standards and contract terms regarding immigration detention facilities and services.

As part of OIDO's statutory mandate to conduct inspections of detention facilities holding individuals in federal immigration custody, OIDO conducted announced inspections of four U.S. Border Patrol (USBP) facilities in the Big Bend Sector (BBT). OIDO selected facilities in BBT because they had not been inspected by any other federal oversight entity in the last two years. Moreover, BBT facilities provided additional context to explore issues related to medical staffing levels and services, which OIDO's recent site visits and inspections between spring 2021 and early 2022 and review of contractor data had suggested required immediate attention due to medical personnel shortages.¹ Finally, OIDO used these inspections to further explore areas reviewed during inspection of four Tucson Sector facilities and an observation of the Yuma Soft-Sided Facility in April 2022, including detainee property and medical care.²

On May 24 and 25, 2022, OIDO inspected the Van Horn Border Patrol Station (VHT) in Van Horn, Texas, and Central Processing Center - West (CPC-W) in Sierra Blanca, Texas.³ After these inspections, USBP requested OIDO return and inspect additional stations in BBT. Therefore, on July 26 and 27, 2022, OIDO inspected Presidio Border Patrol Station (PRS) in Presidio, Texas and Central Processing Center - East (CPC-E) in Alpine, Texas.⁴ OIDO reviewed the facilities' performance and compliance with the CBP National Standards on Transport, Escort, Detention, and Search (TEDS), CBP Directive 2210-004 Enhanced Medical Support Efforts, dated December 30, 2019,⁵ and related Loyal Source Government Services, LLC (LSGS) medical services contract, and the USBP Personal Effects Internal Operating Procedure, dated April 15, 2021 (hereinafter referred to as the Personal Effects IOP).⁶ The inspections focused on facility conditions, detainee property, and contracted medical services.

Background

CBP's Office of Field Operations (OFO) provides security and facilitates operations at 328 ports

¹ On July 12, 2022, OIDO published an Ombudsman Alert regarding the shortage of medical personnel at CBP facilities along the United States border in California, Arizona, New Mexico, and Texas. The Alert was intended to provide immediate notification of OIDO's observations while OIDO performed a full evaluation of the medical contract and is available here: [OIDO Ombudsman Alert - Critical Medical Understaffing at the Border](#). On July 20, 2023, OIDO's published its full report on this issue, which is available here: [OIDO REVIEW: CBP Medical Support Contract for Southwest Border and Tucson](#).

² See full reports here: [OIDO Final Inspection Report - U.S. Border Patrol Tucson Sector Facilities](#) and [OIDO Final Observation Report - U.S. Border Patrol Yuma Soft-Sided Facility](#).

³ OIDO notes that Central Processing Center - West is a Big Bend Sector entity located within the Sierra Blanca Border Patrol Station's processing area.

⁴ OIDO notes that Central Processing Center - East is a Big Bend Sector entity located within the Alpine Border Patrol Station's processing area.

⁵ See [CBP Directive No. 2210-004 Enhanced Medical Support Efforts](#).

⁶ Scott, R. (April 22, 2021). [Personal Effects Internal Operating Procedures](#) [Memorandum], effective April 15, 2021. United States Border Patrol.

of entry throughout the United States, while CBP's USBP secures U.S. borders between the ports of entry, detecting and apprehending individuals who have illegally entered the United States.⁷ USBP organizes its activities under a structure of 20 Border Patrol Sectors.⁸

In support of mission activities, CBP OFO and USBP have facilities throughout the United States. Many of these facilities include short-term hold rooms used to temporarily detain individuals. Hold rooms include processing areas, detention cells, or open areas within a facility. Hold rooms are intended for short-term detention, generally under 72 hours, while individuals are being processed for release, transfer, or removal.⁹

TEDS Standards govern CBP's interactions with and care of individuals while they are detained in CBP short-term facilities, including medical care.¹⁰ TEDS reflects legal and regulatory requirements in the areas of transport, escort, detention, and search provisions, sexual abuse and assault prevention and response, care of at-risk individuals, and personal property. In addition to the national standards, contractors who provide services and/or equipment to CBP are also subject to requirements set forth by contractual provisions. For example, in September 2020, CBP entered a medical services contract with LSGS to provide front-line medical services, medical logistics support, and medical quality management to CBP along the Southwest Border of the United States. The contract established requirements for the medical services to be provided to detainees in USBP and OFO custody during the performance period.¹¹ At the time of inspection, LSGS provided 24/7 medical care at 81 facilities along the Southwest Border, including basic medical assessments and referrals to community resources when a higher level of care was required.

BBT is responsible for patrolling 517 miles of the Southwest Border along the Rio Grande River, which is the international boundary between the United States and Mexico. BBT includes six Border Patrol stations.¹² As noted above, OIDO inspected four USBP facilities within BBT. At the time of inspection, LSGS provided medical services at all four facilities inspected. A description of each facility, its purpose, and its capacity are provided below.

⁷ The U.S. borders include nearly 6,000 miles of Mexican and Canadian international land borders and over 2,000 miles of coastal waters. See [Border Patrol Overview | U.S. Customs and Border Protection \(cbp.gov\)](#).

⁸ See [Border Patrol Sectors | U.S. Customs and Border Protection \(cbp.gov\)](#).

⁹ Unaccompanied children are transferred to the Department of Health and Human Services, Office of Refugee Resettlement, which is responsible under 6 U.S.C. § 279(a) for their care. If detained, single adults are transferred to ICE long-term detention facilities.

¹⁰ See [CBP National Standards on Transport, Escort, Detention, and Search | U.S. Customs and Border Protection](#).

¹¹ The task order was issued under prime contract number V797D-30203. The period of performance for the base period was September 30, 2020, to February 24, 2021. At the time of OIDO's inspection, the contract was in the second option and was set to expire on September 29, 2022. The firm fixed task order number 70B03C20F00001383 dated September 30, 2020, was changed in contract modification number five to a mix (hybrid) time and materials with firm fixed price.

¹² The following are USBP Stations in Big Bend Sector: Sanderson, Alpine, Marfa, Presidio, Van Horn, and Sierra Blanca.



- | | |
|--|---|
| <p>1 Central Processing Center—West
Sierra Blanca, TX</p> | <p>3 Presidio Border Patrol Station
Presidio, TX</p> |
| <p>2 Van Horn Border Patrol Station
Van Horn, TX</p> | <p>4 Central Processing Center—East
Alpine, TX</p> |

Presidio Station

PRS is one of six Border Patrol stations within BBT in Texas. USBP Agents at PRS are responsible for patrolling the southern half of Presidio County, which covers 1,100 square miles and 113.8 miles along the international border with Mexico. The primary duties of USBP Agents at the station include tracking and line watch operations.

At the time of OIDO’s inspection, PRS had zero detainees in its custody because the facility processing area and the sally port were under construction. PRS detention cells were being fitted with a new fire suppression system. For this reason, detainees could not be processed or housed in the processing area. Instead, USBP Agents temporarily conducted detainee intake and screened for detainees who were subject to Title 8 or Title 42 in a makeshift processing area, a fenced and covered area that had been used for government vehicle parking.

PRS was also in the process of building a permanent sally port, which would be used as a designated area to disembark and outbound detainees. In the meantime, the facility used the covered government vehicle parking area as a temporary space for detainee intake. The space was divided into two parts by a chain link fence. In one part, detainees had access to seating, two portable toilets, a garbage can, and a large fan located outside the fence. In the second part, USBP Agents took detainees’ biometrics, processed property, and conducted health intake interviews. Agents provided water, juice, snacks, and other items to detainees. After this initial processing, USBP Agents would transport the detainees to CPC-E.

Van Horn Station

VHT is one of six Border Patrol stations within BBT in Texas. USBP Agents at VHT are responsible for patrolling 31.1 miles of U.S. border with Mexico. The station's area consists of all of Culberson County. While the station had capacity for 113 detainees, most of the detainees apprehended were sent directly to CPC-W because VHT is not a U.S. General Services Administration facility and has no indoor showers for detainee use. At the time of the OIDO inspection, there were no detainees in custody. The primary duties of USBP Agents at the station included tracking and line watch operations.

Central Processing Center - East

CPC-E is one of two processing, detention, and transportation hubs for BBT. USBP Agents at CPC-E are responsible for processing, housing, and transporting detainees subject to Title 8 (and Title 42 as in effect at the time), as well as detainees subject to criminal prosecutions who are apprehended by USBP Agents at the eastern BBT stations. The Del Rio Border Patrol Sector (DRT) also transports some of their detainees to CPC-E for processing. USBP Agents who staffed CPC-E were detailed for 28 days from other area stations, such as the Alpine and Marfa Border Patrol Stations. CPC-E had housing capacity for 140 detainees. At the time of OIDO's inspection, CPC-E had five detainees in custody.

Central Processing Center - West

CPC-W is one of two processing, detention, and transportation hubs for BBT. USBP Agents at CPC-W are responsible for processing, housing, and transporting detainees who are subject to Title 8 (and Title 42 as in effect at the time) and are apprehended by USBP Agents at the Van Horn Station and Sierra Blanca Checkpoint Station. CPC-W could also house detainees who are subject to criminal prosecution. Additionally, detainees transported from CPC-E and DRT, or other facilities stop at CPC-W on their way to USBP facilities or other detention centers in El Paso, Texas. USBP Agents who staffed CPC-W were detailed for 90 days from other area stations, such as VHT and Sierra Blanca Border Patrol Stations. CPC-W had housing capacity for 104 detainees. At the time of OIDO's inspection, CPC-W had 42 detainees in custody.

Objective, Scope, and Methodology

OIDO's inspections of four facilities in BBT were intended to evaluate compliance with TEDS, applicable policies and procedures, and medical contract terms. OIDO limited its review to the following areas: facility conditions, detainee property, and contracted medical services.

Six personnel, including four inspectors, one Director, and one senior advisor conducted the VHT and CPC-W inspections. Seven personnel, including five inspectors and two medical subject matter experts conducted the Presidio Station and CPC-E inspections. The inspection teams conducted interviews with USBP Agents and employees, contract medical staff, and detainees, made direct observations of facility conditions and operations, and reviewed documentary evidence, including but not limited to, files, contracts, logbooks, reports, and records.

Inspection results are divided into three sections: facility conditions, detainee property, and medical care.

Results of Inspection

A. Facility Conditions



Exhibit 1. [Redacted] s OIDO observed on July 27, 2022.
Source: OIDO

B. Detainee Property

i. Notifying Detainees about U.S. Border Patrol Policies for Prohibited Personal Effects

Van Horn and Presidio Stations Were Not in Compliance at the Time of the Inspection with Requirements to Inform Detainees in Writing about Prohibited Personal Effects

The Personal Effects IOP Section 6.3 on Notification, paragraph 6.3.1 states:

All subjects are notified if personal effects are classified as contraband or a health hazard and are not permitted to be taken into USBP facilities. Proper notification protocols are determined by the local office and must be done visually through signage . . . or in writing (no verbal notifications).

The IOP provides sample signage, available in both English and Spanish, that identifies what items are considered contraband or a health hazard and are not permitted in a USBP facility (*See Appendix A*). OIDO observed during its inspections that neither VHT nor PRS had signage regarding prohibited items in the sally port or intake area, respectively, which served as the primary sites at each facility for detainees to be searched prior to entering the facility (*See Exhibit 2*).



Exhibit 2: No signs notifying detainees about prohibited items on walls of sally port at Van Horn Station, as OIDO observed on May 24, 2022.

Source: OIDO

By contrast, OIDO observed during its inspections that both CPC-E and CPC-W posted signage in their respective intake areas indicating what detainee personal effects would be classified as contraband and prohibited from being taken into the facilities (*See Exhibit 3*).



Exhibit 3. Sign notifying detainees of what items are prohibited posted in sally port of CPC-W (left) and intake area at CPC-E (right), as OIDO observed on May 25 and July 27, 2022, respectively.

Source: OIDO

The lack of mandated signage could prevent both Agents and detainees from understanding what items are considered prohibited inside a USBP facility. This could result in items not labeled as contraband to be discarded in error. OIDO notes that the Patrol Agent in Charge at PRS addressed the issue while OIDO was onsite by commissioning a printout of the prohibited items poster as depicted in Attachment 3 of the Personal Effects IOP.

After OIDO's inspection, USBP posted the correct signage at VHT and PRS. USBP BBT provided additional photos of the signage. As a result, OIDO finds these corrective actions sufficient to address this compliance deficiency.

ii. Storing, Labeling, and Tracking Detainee Property

Van Horn Station and Central Processing Center – West Complied with Standards for Storing Detainee Property Under Cover in a Secure Area with Limited Access

The Personal Effects IOP section 6.6 on storage states that, at a minimum, personal effects should be stored under cover in a secure area with limited access. During its inspection, OIDO observed that VHT stored detainee property in a designated property room. The facility used a sign-in sheet to monitor access to the room and record receipt and removal of detainee personal effects stored there. Further, during its inspection of CPC-W, OIDO observed that the facility stored detainees' personal effects inside a secure room within the facility. Detainees' personal effects were stored on a shelf. The facility issued a room key only to the seized property specialist and supervisors to limit access to the room. In addition, the facility maintained two logbooks to record and track

detainee personal effects.¹³ One logbook was kept inside a locked cage in the property room, and one kept on the outside of the cage. In short, both VHT and CPC-W maintained secured spaces for storing detainee property as required.

Central Processing Center – West Complied but Presidio Station Did Not Comply with Requirements to Label Detainees’ Property

TEDS Standard 7.1 on Monetary Personal Property provides, in part: “[s]pecial attention must be given to the security and return of the detainee’s cash.” In addition, the Personal Effects IOP section 6.5 on Inventory, paragraph 6.5.2, provides that “[a]t a minimum, the subject’s personal effects are stored in an individual bag/container and properly receipted with a control number utilizing CBP Form I-77, Baggage Check Claim.”

During its inspection of CPC-W, OIDO observed property rooms and reviewed logs for the period April 28 to May 23, 2022. OIDO found the facility provided a receipt for each detainee’s property with a control number and recorded this information in a logbook.

By contrast, during its inspection of PRS, OIDO observed detainee cash in an open CBP evidence bag. The bag was located in a plastic bin labeled “Mar.” The bin was located inside the PRS Property Room. The bag did not have a Form 6051R or another identifier other than the detainee’s first and last name (*See Exhibit 4*).



Exhibit 4. Detainee currency in an open CBP evidence bag without Form 6051R at Presidio Station, as OIDO observed on July 26, 2022.

Source: OIDO

The Assistant Chief at the facility explained that PRS does not process detainees at the facility, but determines whether the detainee is subject to removal under Title 8 or has a criminal history. The detainees are then transported to a CPC for processing.

¹³ OIDO notes that each logbook contained the same information; the facility recorded property information twice, storing the logbooks in different locations.

Failing to label detainee property could prevent the facility from appropriately tracking, securing, and returning items. Monetary personal property, in particular, is considered sensitive in nature and must be given special attention to ensure that it is stored securely and returned.

Central Processing Center – East Complied but Presidio Station Did Not Comply with Requirements to Issue Separate Labels for Each Bag of Detainee Property

The Personal Effects IOP section 6.5 on Inventory provides that “[s]ubjects with multiple bags of personal effects are to be provided with multiple control numbers via CBP Form I-77, Baggage Check Claim.” OIDO reviewed property logs at CPC-E listing detainee property for the period of June 25 to July 26, 2022, and found that the facility provided separate control numbers via Form I-77 for each bag when detainees had multiple bags.

By contrast, OIDO reviewed facility property logs at PRS for the period of April 22, 2021, one week after the Personal Effects IOP went into effect, to July 26, 2022. OIDO found 26 instances where USBP had not provided control numbers via Form I-77 for all bags when detainees had multiple bags (*See Exhibit 5*).

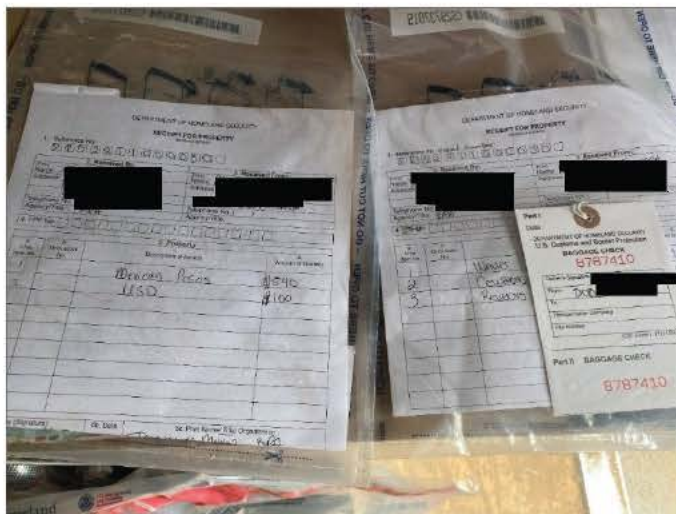


Exhibit 5. Two detainee property bags labeled with the same control number at Presidio Station, as OIDO observed on July 26, 2022.

Source: OIDO

Facilities should issue separate I-77s for each bag to ensure that detainees receive all their stored property. If only one control number is issued for multiple bags, Agents could in error fail to account for and return all detainee property stored at the facility.



[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

C. Medical

i. Medical Staffing

Medical Staffing Levels in Big Bend Sector Were Below Contract Requirements

The LSGS medical services contract establishes requirements for medical service provision during the performance period. The contract states that onsite staff for each site are expected to maintain a 95 percent adherence to schedule.¹⁴ OIDO reviewed the LSGS Weekly Staffing Reports dated May 21 and July 30, 2022, and found that the LSGS medical staffing level for BBT facilities was approximately 51.02 and 54.08 percent. Both USBP and contract medical personnel reported difficulty in hiring staff because of the remoteness of the facilities and competing markets. They also indicated that the lack of health care educational programs servicing the region was a contributing factor. Nonetheless, staffing shortages can pull on USBP resources, requiring referral to the local health care system when a contracted health care provider is unavailable. This could result in delay of care or poor outcomes.

OIDO notes that LSGS's CBP Weekly Staffing Report dated April 9, 2023, showed an improved staffing rate of 87.24 percent for BBT; however, LSGS medical staffing remains under the contractual requirements.

¹⁴ OIDO notes that the statement of work attached to the contract states that LSGS shall provide a comprehensive staffing report that details key statistics to include: a narrative describing the status of recruitment; vetting and staffing efforts; and verification of whether the contractor is maintaining a 95 percent adherence to provider and support schedules at contracted locations.

ii. Conducting Initial Detainee Health Interviews

Medical Personnel Did Not Document Initial Detainee Health Interviews

According to the LSGS Medical Services Contract Statement of Work (SOW), the contractor is required to utilize the CBP electronic medical record (EMR) system to document medical encounter information and data. In circumstances when the CBP EMR is not available, the contractor should maintain paper records of medical encounter information and data. CBP will provide all necessary forms and electronic software systems to the contractor to complete this task, including all data input related to frontline medical tasks such as conducting health interviews, medical assessments, medical encounters, enhanced medical monitoring, referral, follow-up, public health/infectious disease support, and medical exit summary tasks. In addition, LSGS Policy CBP 003, CBP Medical Record Management Standard Operating Procedure (SOP), dated April 11, 2022, reiterates these documentation requirements.

OIDO observed contract medical personnel at CPC-W complete a scripted, 13-question verbal health interview upon detainee arrival and prior to detainees entering the facility. These 13 questions are derived from the CBP Form 2500: Alien Health Interview (*See Appendix B*). At the time of the OIDO inspection, LSGS did not document responses in the CBP EMR, because this section of the CBP EMR had not been developed. In the interim, when LSGS medical staff received positive responses, LSGS reported that this information was relayed to a processing agent for input into the electronic CBP Form 2500 available in USBP's e3 Detention Module (e3DM).¹⁵ Any subsequent medical assessments or medical encounters were captured by LSGS personnel in the EMR in accordance with CBP Directive 2210-004 Enhanced Medical Support Efforts and LSGS Health Evaluation SOP dated April 8, 2022.

LSGS personnel stated that they were not required to document this intake information because that function was not available in the EMR. During OIDO's discussions with CBP Office of the Chief Medical Officer (OCMO) personnel, they reported that the CBP EMR would be rolling out in a phased approach starting April 1, 2023. The rollout of the electronic version of the CBP 2500 in the CBP EMR will provide a mechanism for contract medical personnel to accurately record responses received first-hand from detainees when they have identified a medical issue or concern without LSGS staff having to relay positive responses to a CBP Officer or USBP Agent to input into e3DM. This may reduce the risk of inaccurate information being reflected in a CBP system of record.

OIDO notes that on November 21, 2022, CBP issued a modification to its medical services contract with LSGS. The modification required the service provider to input all paper medical information and data produced under the contract on or after December 2, 2022, into the CBP EMR. This additional contract requirement will help ensure that all detainee medical records produced under the contract are successfully incorporated into CBP's electronic system for safe-keeping and future reference, as needed. OIDO finds these corrective actions sufficient to address the compliance deficiency.

¹⁵ USBP's e3 Detention Module is an internal system that captures all custodial actions and transportation for all detainees.

Medical Personnel Did Not Provide for Detainee Privacy During Initial Health Interviews

TEDS section 4.10 provides that a detainee's private health and medical information must be protected and shared with only personnel with a legitimate need to know. During its inspection, OIDO observed that medical personnel at CPC-W did not separate detainees for the initial health interviews and conducted the interviews in a group setting, including the portion of the screening when detainees were asked to lift their shirts for skin checks. Although OIDO did not observe the process for new arrivals at VHT, PRS, and CPC-E, OIDO interviewed contract medical personnel and determined that similar processes existed and were conducted for initial health interviews and visual inspections and assessments for skin conditions (i.e., scabies and lice) in the sally ports of VHT, PRS, and CPC-E. As a result, detainees do not have a reasonable degree of privacy during any part of the initial health interview and skin assessment.

After OIDO's inspection, BBT outlined their practice for conducting separate screenings based on gender. BBT's reported practice is to process separated groupings of single adult males, single adult females, family units, and unaccompanied children. These identified groups are then rotated through the initial health interview with processing procedures that provide a reasonable degree of privacy. The Assistant Chief at the facility advised any positive responses to the initial screening or medical issues are addressed privately. OIDO finds these corrective actions sufficient to address the compliance deficiency.

Medical Personnel Did Not Perform Hand Hygiene While Conducting Skin Checks and Assessments During Detainee Initial Health Interviews

LSGS Policy No. 006, Infectious Disease Response and Reporting, dated May 12, 2021, requires standard precautions for all patient care, instructing contract medical personnel to perform hand hygiene. The Centers for Disease Control and Prevention defines hand hygiene as cleaning your hands by using either handwashing (washing hands with soap and water), antiseptic hand wash, antiseptic hand rub (i.e., alcohol-based hand sanitizer including foam or gel), or surgical hand antisepsis.¹⁶

During its inspection at CPC-W, OIDO observed that medical personnel did not perform hand hygiene between detainee assessments while checking for lice and scabies and other notable skin conditions. OIDO notes the DPM suggested an on-the-spot correction, stating that after the OIDO inspection, LSGS would re-educate their staff on the importance of infection control. In addition, following the inspection, OCMO noted that LSGS would be reminded to educate their staff on the importance of infection control. OIDO finds these corrective actions sufficient to address the compliance deficiency.

iii. Administrative Oversight and Local Policy Alignment

Regional and Local LSGS Management's Lack of Access to Electronic Medical Records Hindered Their Ability to Conduct Oversight

The position descriptions in the LSGS medical services contract SOW for the LSGS Project Manager (PM) and Deputy Project Managers (DPM) state: "the Sector Program Manager provides senior management expertise and oversight for the U.S. Customs and Border Protection, U.S.

¹⁶ See [Healthcare Providers | Hand Hygiene | CDC](#).

Border Patrol Station First Aid Units, and medical services contract.” In addition, the DPM position states: “the Sector Deputy Program Manager provides day-to-day oversight and management of contract activities...”

OIDO interviewed the assigned BBT PM and DPM, who stated they did not have access to the CBP EMR, a common issue across LSGS-operated medical units. The PM and DPM reported that most PMs and DPMs were not medical personnel and did not need CBP EMR access, despite having administrative oversight of personnel assigned to their area of responsibility. A staff member of CBP’s OCMO explained that initially EMR access was scheduled to be provided to LSGS’ PMs and DPMs. However, LSGS wanted to restrict this access to its supervising physicians, who provide indirect oversight remotely (e.g., the supervising physician for BBT was in Rio Grande Valley, Texas).

Nonetheless, because the PM and DPM were unable to independently review electronic detainee medical records, they were hindered in their ability to provide immediate oversight of medical operations and staff performance. In addition, when not on-site, a PM or DPM would have to refer any inquiries regarding medical care services received from on-site agents to local contract medical personnel who might be otherwise occupied providing direct care.

Local Pregnancy Decision-Making Tool for Pregnancy Assessment Did Not Align with U.S. Customs and Border Protection and Loyal Source Government Services Policy

The CBP Policy Statement and Required Actions Regarding Pregnant, Postpartum, Nursing Individuals and Infants in Custody, dated November 23, 2021, section E provides:

At CBP facilities with onsite medical support on the Southwest Border, CBP offers a medical assessment to any reported or identified pregnant person, regardless of whether a medical issue of concern has been identified. If the offer is accepted, the pregnant person receives a medical assessment and further disposition, as appropriate, according to existing CBP policies and procedures.¹⁷

In addition, the LSGS Health Evaluation SOP, dated April 8, 2022, section (5)(a)(ii) also provides, in part: “[a]ny patient in the 1st or 2nd trimester of pregnancy, will be offered a medical assessment. If they decline the medical assessment, they continue their processing with the CBP.”

OIDO reviewed the undated LSGS Pregnancy Decision Matrix in the local LSGS policy binder at CPC-W, PRS, and CPC-E. The matrix indicated that evaluation of pregnant women was required in the first or second trimester only if there was a complication, which did not align with CBP policy that requires a medical assessment to be offered to any reported or identified pregnant person, regardless of whether a medical issue of concern has been identified. Therefore, the process outlined in the local decision matrix did not clearly indicate that all pregnant women should be offered an assessment. The advanced practice providers did understand and could recite the requirement, but the LSGS matrix should be rewritten to avoid any potential confusion.

During an exit conference conducted on August 5, 2022, CBP’s OCMO stated that they will remind LSGS to update their policy binders with an LSGS Pregnancy Decision Matrix that aligns

¹⁷ See [Policy Statement and Required Actions Regarding Pregnant, Postpartum, Nursing Individuals, and Infants in Custody | U.S. Customs and Border Protection \(cbp.gov\)](#).

with CBP policy. OIDO requests a copy of the LSGS updated Pregnancy Decision Matrix for review.

Conclusion

OIDO's inspections led to several findings. BBT facilities were generally compliant with TEDS Standards, the Personal Effects IOP, and medical contract terms. However, OIDO did find a [REDACTED] issue at one facility. Further, OIDO noted a few areas of non-compliance around labeling, [REDACTED] and communicating with detainees about personal property. In addition, OIDO found deficiencies in staffing levels by the medical service provider as well as areas of non-compliance in the conduct of initial detainee health interviews, including limited documentation, lack of detainee privacy, and poor infection control practices. Finally, OIDO noted concerns related to administrative oversight of medical care and discrepancies in CBP versus local policies for pregnant women.

As noted above, BBT acknowledged and took corrective action following the inspections to address compliance deficiencies related to documentation of and infection control practices during initial detainee health interviews. OIDO deems these corrective actions sufficient and does not make further recommendation below. In addition, as it relates to medical understaffing, OIDO notes that it found similar concerns at many facilities under the medical services contract and has made recommendations regarding this issue in its full report on the issue.¹⁸ Therefore, OIDO does not make further recommendation on this issue below.

Complying with TEDS, policies and procedures, and contract terms is essential to ensuring the health, safety, and rights of detainees. CBP must ensure that BBT facilities comply with the detention standards and contract terms and take meaningful corrective action to address deficiencies.

Recommendations

Recommendation 1:

[REDACTED]

Recommendation 2:

[REDACTED]

Recommendation 3: CBP should evaluate its internal mechanism or process to ensure LSGS updates all policy binders with the most current guidance to align with contractual obligations and CBP policy and procedures and provide OIDO with its recommendations for adherence.

Recommendation 4: CBP should evaluate whether to allow EMR access to contract PMs and DPMs for ongoing administrative oversight, which will allow the respective PM or DPM to

¹⁸ See, [OIDO Review-CBP Medical Support Contract for the Southwest Border and Tucson](#), (June 16, 2023).

address any CBP inquiry regarding medical services.

Response from Component and OIDO Analysis

CBP officials concurred with the four recommendations and provided corrective actions to address the issues raised in OIDO's evaluation of facility conditions, detainee property, and contracted medical services. OIDO considers recommendations 1 and 4 addressed and closed; recommendation 2 unaddressed and open; and recommendation 3 addressed and open. Below is a summary of CBP's response and OIDO's analysis thereof. CBP's full response is available in **Appendix C**.

Component Response to Recommendation 1:

[Redacted]

OIDO Analysis: OIDO finds these actions to be responsive to the recommendation and considers this recommendation addressed and closed.

Component Response to Recommendation 2:

[Redacted]

OIDO Analysis:

[Redacted]

Component Response to Recommendation 3: Concur. The Office of the Chief Medical Officer (OCMO) will work with LSGS to update binders in medical units to ensure that they have current guidance that aligns with contractual obligations and CBP policy and procedures. Estimated Completion Date (ECD): September 30, 2023.

OIDO Analysis: OIDO finds these actions to be responsive to the recommendation and considers the recommendation addressed and open. OIDO acknowledges CBP's concurrence and efforts to ensure that LSGS has updated binders in medical units and current guidance that aligns with contractual obligations and CBP policy and procedures. OIDO will close this recommendation

when OIDO receives verification from CBP that LSGS has updated binders in medical units and that LSGS's current guidance aligns with contractual obligations and CBP policy and procedures.

Component Response to Recommendation 4:

[Redacted]

OIDO Analysis: OIDO finds the action to be responsive to the recommendations and considers this recommendation addressed and closed.

[Redacted]

In light of this information, OIDO will continue to collaborate with OCMO to improve oversight of the EMR through a multi-layered approach. The ability to monitor day-to-day performance metrics, conduct chart reviews, and ensure medical quality management compliance improves health care outcomes, fosters a culture of patient safety, and improves efficiency.

Appendix A: Sample Prohibited Items Poster from the Personal Effects Internal Operating Procedure

Attachment 3

SAMPLE PROHIBITED ITEMS POSTER



Appendix B: CBP Form 2500: Alien Initial Health Interview Questionnaire



DEPARTMENT OF HOMELAND SECURITY
U.S. Customs and Border Protection

ALIEN INITIAL HEALTH INTERVIEW QUESTIONNAIRE

ALIEN INFORMATION			
Alien's Name (Last, First, MI)			A-Number (if any)
Age	Date of Birth	Gender	Country of Citizenship
Agent/Officer Name (Last, First, MI)			Event Number
Agent/Officer: Are you able to communicate with the Alien? <input type="checkbox"/> Yes <input type="checkbox"/> No			Date Completed
ALIEN HEALTH BACKGROUND			
	ALIEN RESPONSE		AGENT/OFFICER OBSERVATION
	Yes	No	Additional detail as appropriate
1. Do you have a history of or current medical or mental health issues?	<input type="checkbox"/>	<input type="checkbox"/>	
2. Are you taking any prescription medications? If yes, do you have it with you?	<input type="checkbox"/>	<input type="checkbox"/>	
3. Do you have any allergies? (e.g. food, medicine)	<input type="checkbox"/>	<input type="checkbox"/>	
4. Are you a drug user?	<input type="checkbox"/>	<input type="checkbox"/>	
FEMALES ONLY			
5. Are you pregnant? If yes, how many months?	<input type="checkbox"/>	<input type="checkbox"/>	
6. Are you nursing?	<input type="checkbox"/>	<input type="checkbox"/>	
ALIEN HEALTH INTERVIEW			
If answered or observed "Yes" to any of the health interview questions below, then refer for a medical assessment.	ALIEN RESPONSE		AGENT/OFFICER OBSERVATION
	Yes	No	Additional detail as appropriate
7. Are you currently ill or injured or do you have significant pain?	<input type="checkbox"/>	<input type="checkbox"/>	
8. Do you have a skin rash?	<input type="checkbox"/>	<input type="checkbox"/>	
9. Do you have a contagious disease?	<input type="checkbox"/>	<input type="checkbox"/>	
10. Are you thinking about hurting yourself or others?	<input type="checkbox"/>	<input type="checkbox"/>	
11. Do you feel feverish or do you feel that you have a fever?	<input type="checkbox"/>	<input type="checkbox"/>	
12. Do you have a cough or difficulty breathing?	<input type="checkbox"/>	<input type="checkbox"/>	
13. Do you have nausea, vomiting, or diarrhea?	<input type="checkbox"/>	<input type="checkbox"/>	
ADDITIONAL AGENT/OFFICER OBSERVATIONS			
Are there any other observations or concerns? Examples are: disorientation, bruising/bleeding, yellow eyes/skin, environment-related illness (heat stroke, hypothermia, severe dehydration)			
MEDICAL ASSESSMENT REFERRAL			
Was the alien referred for a Medical Assessment? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Appendix C: Component Response

1300 Pennsylvania Avenue, NW
Washington, DC 20229




**U.S. Customs and
Border Protection**

July 14, 2023

MEMORANDUM FOR: David Gersten
(A) Immigration Detention Ombudsman
Department of Homeland Security

FROM: Henry A. Moak, Jr.
Senior Component Accountable Official
U.S. Customs and Border Protection

SUBJECT: Management Response to Draft Report: U.S. Border Patrol
Facilities - Big Bend Sector May 24-25 and July 26-27, 2022
(22-001051)

7/14/2023

X _____
Signed by: HENRY A. MOAK JR

Thank you for the opportunity to comment on this draft report. U.S. Customs and Border Protection (CBP) appreciates the work of the Office of the Immigration Detention Ombudsman (OIDO) in planning and conducting its review and issuing this report.

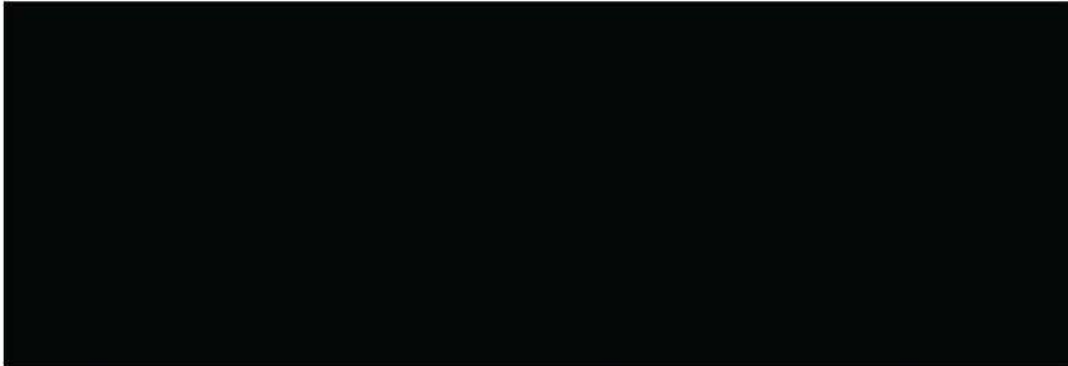
CBP takes its role in providing care and ensuring the health, safety, security, and welfare, of each adult and child in its custody very seriously. Within CBP, U.S. Border Patrol (USBP) personnel at the Big Bend Sector (BBT) employ various mechanisms, at multiple levels, to monitor and provide appropriate care of individuals in short-term custody and help ensure that personnel are adhering to the October 2015 National Standards on Transportation, Escort, Detention, and Search (TEDS) and CBP's Enhanced Medical Directive.

Presidio agents obtain a subject's criminal and immigration history to determine if a subject is eligible for a Title 42 expulsion. Any subject requiring Title 8 processing is directed to a Central Processing Center (CPC). Each of these facilities comply with the USBP Personal Effects Internal Operating Procedures (IOP). Further, BBT has internal personal property procedures that were provided to OIDO during their inspection that detail the personal property procedures agents adhere to when transporting a noncitizen from the field to the CPCs. OIDO acknowledged that these procedures were in alignment with CBP and USBP requirements.

██
██████████ Subjects at the PRS are transferred to the Central Processing Center East (CPC-E) where their property is correctly logged, tagged, and the 6051S is completed. The subjects in question in the report were evaluated at PRS solely to determine if they were

Management Response to Draft Report: U.S. Border Patrol Facilities - Big Bend Sector (22-001051)

eligible for Title 42 expulsion; if not, they were transferred to CPC-E. As OIDO acknowledged in their report, property is properly addressed at CPC-E.



The draft report contains four recommendations, with which CBP concurs. CBP previously provided technical comments addressing accuracy, contextual, and other issues, under separate cover for OIDO's consideration.

Again, thank you for the opportunity to review and comment on this draft report. Please feel free to contact me if you have any questions. We look forward to working with you again in the future.

Attachment



Management Response to Draft Report: U.S. Border Patrol Facilities - Big Bend Sector
(22-001051)

**Attachment: Management Response to Recommendations
Contained in (22-001051)**

OIDO recommended:

[Redacted]

[Redacted]

[Redacted]

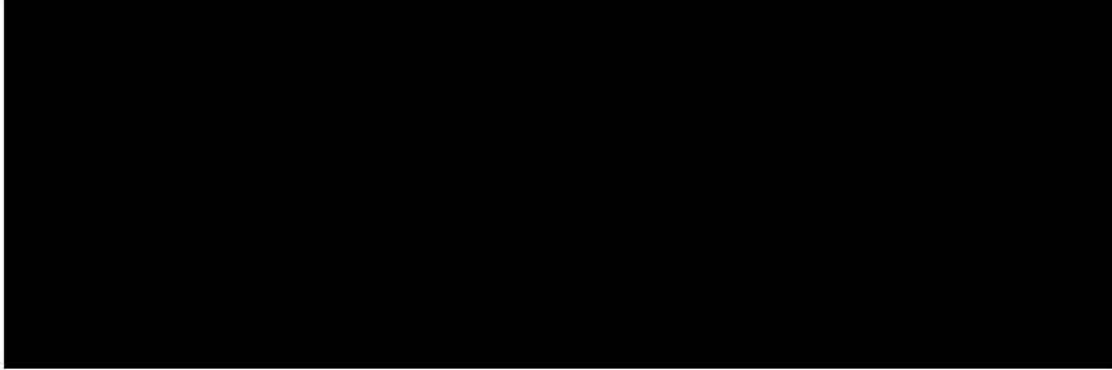
[Redacted]

Recommendation 3: CBP should evaluate its internal mechanism or process to ensure LSGS updates all policy binders with the most current guidance to align with contractual obligations and CBP policy and procedures and provide OIDO with its recommendations for adherence.

Response: Concur. The Office of the Chief Medical Officer (OCMO) will work with LSGS to update binders in medical units to ensure that they have current guidance that aligns with contractual obligations and CBP policy and procedures. Estimated Completion Date (ECD): September 30, 2023.

Management Response to Draft Report: U.S. Border Patrol Facilities - Big Bend Sector
(22-001051)

Recommendation 4: CBP should evaluate whether to allow electronic medical record (EMR) access to contract project managers (PM) and deputy project managers (DPM) for ongoing administrative oversight, which will allow the respective PM or DPM to address any CBP inquiry regarding medical services.



Additional Information and Copies

To view any of our other reports,
please visit:
www.dhs.gov/OIDO.

For further information or questions, please contact the Office
of the Immigration Detention Ombudsman at:
detentionombudsman@hq.dhs.gov.

