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Rules Committee Print 116–26 Text of H.R. 3239, Humanitarian Standards for Individuals in Customs and Border Protection Custody Act

[Showing the text of H.R. 3239, as ordered reported by the Committee on the Judiciary]

1 SECTION 1. SHORT TITLE; TABLE OF CONTENTS.

- 2 (a) SHORT TITLE.—This Act may be cited as the
- 3 "Humanitarian Standards for Individuals in Customs and
- 4 Border Protection Custody Act".
- 5 (b) TABLE OF CONTENTS.—The table of contents of
- 6 this Act is as follows:
 - Sec. 1. Short title; table of contents.
 - Sec. 2. Initial health screening protocol.
 - Sec. 3. Water, sanitation and hygiene.
 - Sec. 4. Food and nutrition.
 - Sec. 5. Shelter.
 - Sec. 6. Coordination and Surge capacity.
 - Sec. 7. Training.
 - Sec. 8. Interfacility transfer of care.
 - Sec. 9. Planning and initial implementation.
 - Sec. 10. Contractor compliance.
 - Sec. 11. Inspections.
 - Sec. 12. GAO report.
 - Sec. 13. Rule of construction.
 - Sec. 14. Definitions.

7 SEC. 2. INITIAL HEALTH SCREENING PROTOCOL.

- 8 (a) IN GENERAL.—The Commissioner of U.S. Cus-
- 9 toms and Border Protection (referred to in this Act as
- 10 the "Commissioner"), in consultation with the Secretary

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of Health and Human Services, the Administrator of the 1 2 Health Resources and Services Administration, and non-3 governmental experts in the delivery of health care in hu-4 manitarian crises and in the delivery of health care to chil-5 dren, shall develop guidelines and protocols for the provision of health screenings and appropriate medical care for 6 7 individuals in the custody of U.S. Customs and Border Protection (referred to in this Act as "CBP"), as required 8 under this section. 9

10 (b) INITIAL SCREENING AND MEDICAL ASSESS-11 MENT.—The Commissioner shall ensure that any indi-12 vidual who is detained in the custody of CBP (referred 13 to in this Act as a "detainee") receives an initial in-person 14 screening by a licensed medical professional in accordance 15 with the standards described in subsection (c)—

16 (1) to assess and identify any illness, condition,
17 or age-appropriate mental or physical symptoms that
18 may have resulted from distressing or traumatic ex19 periences;

20 (2) to identify acute conditions and high-risk21 vulnerabilities; and

(3) to ensure that appropriate healthcare is
provided to individuals as needed, including pediatric, obstetric, and geriatric care.

1	(c) Standardization of Initial Screening and
2	Medical Assessment.—
3	(1) IN GENERAL.—The initial screening and
4	medical assessment shall include—
5	(A) an interview and the use of a stand-
6	ardized medical intake questionnaire or the
7	equivalent;
8	(B) screening of vital signs, including pulse
9	rate, body temperature, blood pressure, oxygen
10	saturation, and respiration rate;
11	(C) screening for blood glucose for known
12	or suspected diabetics;
13	(D) weight assessment of detainees under
14	12 years of age;
15	(E) a physical examination; and
16	(F) a risk-assessment and the development
17	of a plan for monitoring and care, when appro-
18	priate.
19	(2) PRESCRIPTION MEDICATION.—The medical
20	professional shall review any prescribed medication
21	that is in the detainee's possession or that was con-
22	fiscated by CBP upon arrival and determine if the
23	medication may be kept by the detainee for use dur-
24	ing detention, properly stored by CBP with appro-
25	priate access for use during detention, or maintained

with the detained individual's personal property. A
 detainee may not be denied the use of necessary and
 appropriate medication for the management of the
 detainee's illness.

5 (3) RULE OF CONSTRUCTION.—Nothing in this
6 subsection shall be construed as requiring detainees
7 to disclose their medical status or history.

8 (d) TIMING.—

9 (1) IN GENERAL.—Except as provided in para-10 graph (2), the initial screening and medical assess-11 ment described in subsections (b) and (c) shall take 12 place as soon as practicable, but not later than 12 13 hours after a detainee's arrival at a CBP facility.

14 (2) HIGH PRIORITY INDIVIDUALS.—The initial
15 screening and medical assessment described in sub16 sections (b) and (c) shall take place as soon as prac17 ticable, but not later than 6 hours after a detainee's
18 arrival at a CBP facility if the individual reasonably
19 self-identifies as having a medical condition that re20 quires prompt medical attention or is—

21 (A) exhibiting signs of acute or potentially
22 severe physical or mental illness, or otherwise
23 has an acute or chronic physical or mental dis24 ability or illness;

25 (B) pregnant;

1	(C) a child (with priority given, as appro-
2	priate, to the youngest children); or
3	(D) elderly.

4 (e) FURTHER CARE.—

5 (1) IN GENERAL.—If, as a result of the initial 6 health screening and medical assessment, the li-7 censed medical professional conducting the screening 8 or assessment determines that one or more of the 9 detainee's vital sign measurements are significantly 10 outside normal ranges in accordance with the Na-11 tional Emergency Services Education Standards, or 12 if the detainee is identified as high-risk or in need 13 of medical intervention, the detainee shall be pro-14 vided, as expeditiously as possible, with an in-person 15 or technology-facilitated medical consultation with a 16 licensed emergency care professional.

17 (2) RE-EVALUATION.—

(A) IN GENERAL.—Detainees described in
paragraph (1) shall be re-evaluated within 24
hours and monitored thereafter as determined
by an emergency care professional (and in the
care of a consultation provided to a child, with
a licensed emergency care professional with a
background in pediatric care).

1 (B) REEVALUATION PRIOR TO TRANSPOR-2 TATION.—In addition to the re-evaluations 3 under subparagraph (A), detainees shall have 4 all vital signs re-evaluated and be cleared as 5 safe to travel by a medical professional prior to 6 transportation.

7 (3) PYSCHOLOGICAL AND MENTAL CARE.—The
8 Commissioner shall ensure that detainees who have
9 experienced physical or sexual violence or who have
10 experienced events that may cause severe trauma or
11 toxic stress, are provided access to basic, humane,
12 and supportive psychological assistance.

13 (f)INTERPRETERS.—To that health ensure 14 screenings and medical care required under this section 15 are carried out in the best interests of the detainee, the 16 Commissioner shall ensure that language-appropriate in-17 terpretation services, including indigenous languages, are 18 provided to each detainee and that each detainee is in-19 formed of the availability of interpretation services.

20 (g) CHAPERONES.—To ensure that health screenings
21 and medical care required under this section are carried
22 out in the best interests of the detainee—

(1) the Commissioner shall establish guidelines
for and ensure the presence of chaperones for all detainees during medical screenings and examinations

consistent with relevant guidelines in the American
 Medical Association Code of Medical Ethics, and
 recommendations of the American Academy of Pedi atrics; and

5 (2) to the extent practicable, the physical exam-6 ination of a child shall always be performed in the 7 presence of a parent or legal guardian or in the 8 presence of the detainee's closest present adult rel-9 ative if a parent or legal guardian is unavailable.

10 (h) DOCUMENTATION.—The Commissioner shall en-11 sure that the health screenings and medical care required 12 under this section, along with any other medical evaluations and interventions for detainees, are documented in 13 accordance with commonly accepted standards in the 14 15 United States for medical record documentation. Such documentation shall be provided to any individual who re-16 17 ceived a health screening and subsequent medical treatment upon release from CBP custody. 18

(i) INFRASTRUCTURE AND EQUIPMENT.—The Commissioner or the Administrator of General Services shall
ensure that each location to which detainees are first
transported after an initial encounter with an agent or officer of CBP has the following:

24 (1) A private space that provides a comfortable25 and considerate atmosphere for the patient and that

ensures the patient's dignity and right to privacy
 during the health screening and medical assessment
 and any necessary follow-up care.

4 (2) All necessary and appropriate medical 5 equipment and facilities to conduct the health 6 screenings and follow-up care required under this 7 section, to treat trauma, to provide emergency care, 8 including resuscitation of individuals of all ages, and 9 to prevent the spread of communicable diseases.

10 (3) Basic over-the-counter medications appro-11 priate for all age groups.

(4) Appropriate transportation to medical facilities in the case of a medical emergency, or an oncall service with the ability to arrive at the CBP facility within 30 minutes.

16 (j) PERSONNEL.—The Commissioner or the Administrator of General Services shall ensure that each location 17 to which detainees are first transported after an initial en-18 19 counter has onsite at least one licensed medical profes-20 sional to conduct health screenings. Other personnel that 21 are or may be necessary for carrying out the functions 22 described in subsection (e), such as licensed emergency 23 care professionals, specialty physicians (including physi-24 cians specializing in pediatrics, family medicine, obstetrics and gynecology, geriatric medicine, internal medicine, and 25

infectious diseases), nurse practitioners, other nurses,
 physician assistants. licensed social workers, mental health
 professionals, public health professionals, dieticians, inter preters, and chaperones, shall be located on site to the
 extent practicable, or if not practicable, shall be available
 on call.

7 (k) ETHICAL GUIDELINES.—The Commissioner shall
8 ensure that all medical assessments and procedures con9 ducted pursuant to this section are conducted in accord10 ance with ethical guidelines in the applicable medical field,
11 and respect human dignity.

12 SEC. 3. WATER, SANITATION AND HYGIENE.

13 The Commissioner shall ensure that detainees have14 access to—

(1) not less than one gallon of drinking water
per person per day, and age-appropriate fluids as
needed;

(2) a private, safe, clean, and reliable permanent or portable toilet with proper waste disposal and a hand washing station, with not less than one
toilet available for every 12 male detainees, and 1
toilet for every 8 female detainees;

(3) a clean diaper changing facility, which includes proper waste disposal, a hand washing station, and unrestricted access to diapers;

(4) the opportunity to bathe daily in a perma nent or portable shower that is private and secure;
 and

4 (5) products for individuals of all age groups
5 and with disabilities to maintain basic personal hy6 giene, including soap, a toothbrush, toothpaste,
7 adult diapers, and feminine hygiene products, as well
8 as receptacles for the proper storage and disposal of
9 such products.

10 SEC. 4. FOOD AND NUTRITION.

11 The Commissioner shall ensure that detainees have12 access to—

13 (1) three meals per day including—

14 (A) in the case of an individual age 12 or
15 older, a diet that contains not less than 2,000
16 calories per day; and

17 (B) in the case of a child who is under the
18 age of 12, a diet that contains an appropriate
19 number of calories per day based on the child's
20 age and weight;

21 (2) accommodations for any dietary needs or22 restrictions; and

23 (3) access to food in a manner that follows applicable food safety standards.

1 SEC. 5. SHELTER.

2 The Commissioner shall ensure that each facility at3 which a detainee is detained meets the following require-4 ments:

5 (1) Except as provided in paragraph (2), males6 and females shall be detained separately.

7 (2) In the case of a minor child arriving in the 8 United States with an adult relative or legal guard-9 ian, such child shall be detained with such relative or legal guardian unless such an arrangement poses 10 11 safety or security concerns. In no case shall a minor 12 who is detained apart from an adult relative or legal 13 guardian as a result of such safety or security con-14 cerns be detained with other adults.

(3) In the case of an unaccompanied minor arriving in the United States without an adult relative
or legal guardian, such child shall be detained in an
age-appropriate facility and shall not be detained
with adults.

20 (4) A detainee with a temporary or permanent
21 disability shall be held in an accessible location and
22 in a manner that provides for his or her safety, com23 fort, and security, with accommodations provided as
24 needed.

(5) No detainee shall be placed in a room forany period of time if the detainee's placement would

1	exceed the maximum occupancy level as determined
2	by the appropriate building code, fire marshal, or
3	other authority.
4	(6) Each detainee shall be provided with tem-
5	perature appropriate clothing and bedding.
6	(7) The facility shall be well lit and well venti-
7	lated, with the humidity and temperature kept at
8	comfortable levels (between 68 and 74 degrees Fahr-
9	enheit).
10	(8) Detainees who are in custody for more than
11	48 hours shall have access to the outdoors for not
12	less than 1 hour during the daylight hours during
13	each 24-hour period.
14	(9) Detainees shall have the ability to practice
15	their religion or not to practice a religion, as appli-
16	cable.
17	(10) Detainees shall have access to lighting and
18	noise levels that are safe and conducive for sleeping
19	throughout the night between the hours of 10 p.m.
20	and 6 a.m.
21	(11) Officers, employees, and contracted per-
22	sonnel of CBP shall—
22	(Λ) follow modical standards for the isola

23 (A) follow medical standards for the isola24 tion and prevention of communicable diseases;
25 and

1	(B) ensure the physical and mental safety
2	of detainees who identify as lesbian, gay, bisex-
3	ual, transgender, and intersex.

4 (12) The facility shall have video-monitoring to
5 provide for the safety of the detained population and
6 to prevent sexual abuse and physical harm of vulner7 able detainees.

8 (13) The Commissioner shall ensure that lan-9 guage-appropriate "Detainee Bill of Rights", includ-10 ing indigenous languages, are posted or otherwise 11 made available in all areas where detainees are lo-12 cated. The "Detainee Bill of Rights" shall include 13 all rights afforded to the detainee under this Act.

14 (14) Video from video-monitoring must be pre15 served for 90 days and the detention facility must
16 maintain certified records that the video-monitoring
17 is properly working at all times.

18 SEC. 6. COORDINATION AND SURGE CAPACITY.

19 The Secretary of Homeland Security shall enter into 20 memoranda of understanding with appropriate Federal 21 agencies, such as the Department of Health and Human 22 Services, and applicable emergency government relief serv-23 ices, as well as contracts with health care, public health, 24 social work, and transportation professionals, for purposes of addressing surge capacity and ensuring compliance with
 this Act.

3 SEC. 7. TRAINING.

The Commissioner shall ensure that CBP personnel
assigned to each short-term custodial facility are professionally trained, including continuing education as the
Commissioner deems appropriate, in all subjects necessary
to ensure compliance with this Act, including—

9 (1) humanitarian response protocols and stand-10 ards;

(2) indicators of physical and mental illness,and medical distress in children and adults;

(3) indicators of child sexual exploitation and
effective responses to missing migrant children; and
(4) procedures to report incidents of suspected
child sexual abuse and exploitation directly to the
National Center for Missing and Exploited Children.

18 SEC. 8. INTERFACILITY TRANSFER OF CARE.

(a) TRANSFER.—When a detainee is discharged from
a medical facility or emergency department, the Commissioner shall ensure that responsibility of care is transferred from the medical facility or emergency department
to an accepting licensed health care provider of CBP.

24 (b) RESPONSIBILITIES OF ACCEPTING PROVIDERS.—
25 Such accepting licensed health care provider shall review

1 the medical facility or emergency department's evaluation,

2 diagnosis, treatment, management, and discharge care in3 structions to assess the safety of the discharge and trans4 fer and to provide necessary follow-up care.

5 SEC. 9. PLANNING AND INITIAL IMPLEMENTATION.

6 (a) PLANNING.—Not later than 60 days after the 7 date of enactment of this Act, the Secretary of Homeland 8 Security shall submit to Congress a detailed plan delin-9 eating the timeline, process, and challenges of carrying out 10 the requirements of this Act.

(b) IMPLEMENTATION.—The Secretary of Homeland
Security shall ensure that the requirements of this Act are
implemented not later than 6 months after the date of
enactment.

15 SEC. 10. CONTRACTOR COMPLIANCE.

16 The Secretary of Homeland Security shall ensure17 that all personnel contracted to carry out this Act do so18 in accordance with the requirements of this Act.

19 SEC. 11. INSPECTIONS.

20 (a) IN GENERAL.—The Inspector General of the De-21 partment of Homeland Security shall—

(1) conduct unannounced inspections of ports of
entry, border patrol stations, and detention facilities
administered by CBP or contractors of CBP; and

1	(2) submit to Congress, reports on the results
2	of such inspections as well as other reports of the
3	Inspector General related to custody operations.
4	(b) PARTICULAR ATTENTION.—In carrying out sub-
5	section (a), the Inspector General of the Department of
6	Homeland Security shall pay particular attention to—
7	(1) the degree of compliance by CBP with the
8	requirements of this Act;
9	(2) remedial actions taken by CBP; and
10	(3) the health needs of detainees.
11	(c) Access to Facilities.—The Commissioner may
12	not deny a Member of Congress entrance to any facility
13	or building used, owned, or operated by CBP.
14	SEC. 12. GAO REPORT.
15	(a) IN GENERAL.—The Comptroller General of the
16	United States shall—
17	(1) not later than 6 months after the date of
18	enactment of this Act, commence a study on imple-
19	mentation of, and compliance with, this Act; and
20	(2) not later than 1 year after the date of en-
21	actment of this Act, submit a report to Congress on
22	the results of such study.
23	(b) Issues to Be Studied.—The study required by
24	subsection (a) shall examine the management and over-
25	sight by CBP of ports of entry, border patrol stations, and

other detention facilities, including the extent to which 1 2 CBP and the Department of Homeland Security have ef-3 fective processes in place to comply with this Act. The 4 study shall also examine the extent to which CBP personnel, in carrying out this Act, make abusive, derisive, 5 profane, or harassing statements or gestures, or engage 6 7 in any other conduct evidencing hatred or invidious preju-8 dice to or about one person or group on account of race, 9 color, religion, national origin, sex, sexual orientation, age, 10 or disability, including on social media.

11 SEC. 13. RULE OF CONSTRUCTION.

12 Nothing in this Act shall be construed to authorize13 CBP to detain individuals for longer than 72 hours.

14 SEC. 14. DEFINITIONS.

15 In this Act:

16 (1) INTERPRETATION SERVICES.—The term
17 "interpretation services" includes translation serv18 ices that are performed either in-person or through
19 a telephone or video service.

20 (2) CHILD.—The term "child" has the meaning
21 given the term in section 101(b)(1) of the Immigra22 tion and Nationality Act (8 U.S.C. 1101(b)(1)).

23 (3) U.S. CUSTOMS AND BORDER PROTECTION
24 FACILITY.—The term "U.S. Customs and Border
25 Protection Facility" includes—

1	(A) U.S. Border Patrol stations;
2	(B) ports of entry;
3	(C) checkpoints;
4	(D) forward operating bases;
5	(E) secondary inspection areas; and
6	(F) short-term custody facilities.
7	(4) FORWARD OPERATING BASE.—The term
8	"forward operating base" means a permanent facil-
9	ity established by CBP in forward or remote loca-
10	tions, and designated as such by CBP.

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