



## COMMITTEE ON HOMELAND SECURITY

### *H.R. 3525, The U.S. Border Patrol Medical Screening Standards Act Rules Committee Print*

In December of 2018, Jakelin Caal Maquin and Felipe Alonzo-Gómez, tragically passed away while in the custody of the U.S. Border Patrol. Following their deaths, U.S. Customs and Border Protection (CBP) announced new medical screening procedures for children. Despite this, four more children passed away in federal custody. In sharp contrast, no child died in CBP custody for the entire decade preceding 2018. CBP border facilities must be better equipped to provide medical attention for individuals in its custody, particularly children.

One critical component is an initial health screening that can identify acute or pressing medical issues that need immediate or follow-up attention. In July 2019, the House considered H.R. 3239, the Humanitarian Standards for Individuals in Customs and Border Protection Custody Act, on the House Floor. This measure requires a licensed medical professional to conduct an in-person screening for all people apprehended by CBP. H.R. 3235 builds upon this legislation by directing the Department of Homeland Security (DHS) to research innovative approaches to address capability gaps for providing medical screenings at the border and mandates the implementation of an electronic health record system. Specifically, the bill requires:

- **Process Improvements.** The Department is required to research innovative approaches to address gaps in medical screenings at the border, particularly for children and other vulnerable populations. This research must be done in consultation with national medical professional associations who have expertise in emergency medicine, nursing, pediatric care, and other relevant medical skills. Upon completion of the research, DHS must submit a report to Congress that includes recommendations for improving medical screening, access to emergency care, and steps the Department plans to take in response.
- **Implementing an e-Health Record System.** Within 90 days of enactment, the DHS Chief Information Officer, in coordination with the Chief Medical Officer, must establish an electronic health record (EHR) system that can be accessed by all DHS components operating on our borders. The system will hold the medical records of individuals in the custody of such components and ensure that the valuable medical screening information will follow the children and adults as they are transferred to other DHS components.

The deaths that have occurred on our borders regrettably demonstrate that the current medical screening is not enough. Once consistent and comprehensive medical screening is established, there should be a process to evaluate the system and recommend improvements, particularly for children, pregnant women, and other medically fragile people. An EHR system will ensure that medical information will not get lost, help track when follow-up medical appointments are necessary, and prevent duplication of medical services due to lost or incomplete records. These additional steps will help safeguard against further deaths of children at our border.