

**Management Alert –
CBP Did Not Adequately
Protect Employees from
Possible Fentanyl Exposure**





OFFICE OF INSPECTOR GENERAL

Department of Homeland Security

Washington, DC 20528 / www.oig.dhs.gov

July 16, 2019

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

FROM: Jennifer L. Costello 
Acting Inspector General

SUBJECT: *Management Alert – CBP Did Not Adequately Protect
Employees from Possible Fentanyl Exposure*

For your action is our final *Management Alert – CBP Did Not Adequately Protect Employees from Possible Fentanyl Exposure*, the purpose of which is to notify you of an issue that requires immediate attention. Specifically, we are recommending that U.S. Customs and Border Protection (CBP) provide guidance, knowledge, and tools to handle and reverse overdoses from fentanyl and other opioids.

We have incorporated the formal comments provided by your office on the draft management alert and appended them verbatim. Your office concurred with the recommendation we made to improve safety of CBP personnel.

Based on the information provided in your response to the draft alert, we consider the recommendation open and resolved. Once your office has fully implemented the recommendation, please submit a formal closeout letter to us within 30 days so that we may close the recommendation. The memorandum should be accompanied by evidence of completion of agreed-upon corrective actions. Please send your response or closure request to OIGAuditsFollowup@oig.dhs.gov.

Consistent with our responsibility under the Inspector General Act, we will provide copies of our alert to congressional committees with oversight and appropriation responsibility over the Department of Homeland Security. We will post the alert on our website for public dissemination.

Please call me with any questions, or your staff may contact Sondra McCauley, Assistant Inspector General for Audits, at (202) 981-6000.



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Results in Brief

During our ongoing audit of Customs and Border Protection's (CBP) storage of seized drugs at permanent drug vaults we visited, we determined that CBP does not adequately protect its staff from the dangers of powerful synthetic opioids¹ such as fentanyl. Specifically, CBP has not always made medications designed to treat narcotic overdose available in case of accidental exposure. This occurred because CBP lacks an official policy requiring standard workplace practices for handling fentanyl and safeguarding personnel against exposure. In addition, CBP does not require mandatory training for its staff to provide an understanding of the hazards of fentanyl and methods to combat accidental exposure. As a result, CBP staff are at increased risk of injury or death in case of exposure.

Background

CBP plays a critical role in the Nation's efforts to interdict dangerous substances and prohibited items at U.S. ports of entry and keep these materials from harming the American public. An important part of CBP's mission is preventing individuals from importing illegal drugs such as opioids into the United States. CBP is experiencing a rise in seizures of synthetic opioids such as fentanyl that upon exposure can kill in minutes. Illicit fentanyl may be present in powder, tablet, or liquid forms, and is 80 to 100 times stronger than morphine and 30 to 50 times more potent than heroin.

Overdose from opioids such as fentanyl can cause death by slowing, and eventually stopping, a person's breathing. It only takes two milligrams of fentanyl to kill most individuals (see figure 1).

Figure 1. Lethal Dose of Fentanyl



Source: CBP graphic

¹ Examples of opioids include heroin, morphine, oxycodone, and fentanyl.



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When available, the drug naloxone, an opioid inhibitor, may be administered to treat known or suspected opioid overdoses. Naloxone can be injected in the muscle, vein, or skin or sprayed into the nose to restore breathing within 2 to 5 minutes and thereby prevent brain injury and death. The medication only works if a person has opioids in his or her system; it has no effect if opioids are absent. As such, naloxone has no potential for abuse.

Storage of Fentanyl

CBP's Office of Field Operations (OFO) Fines, Penalties, and Forfeitures Division (FPFD) stores, manages, and disposes seized property, including illicit drugs such as fentanyl. For more than 4 years, CBP staff have seized and stored fentanyl in its permanent vaults. As of April 2019, CBP had stored about 3,500 pounds of fentanyl — up from 70 pounds in 2015. OFO may store fentanyl in its permanent vaults for up to 60 days, or until an Assistant U.S. Attorney prosecutes the violator. In cases of prosecution, fentanyl may remain in OFO vaults for years. OFO Seized Property Specialists (SPS) operate the vaults and ensure property is securely and appropriately stored. SPSs adhere to CBP's *Seized Asset Management and Enforcement Procedures Handbook* (SAMEPH) for daily operations of the vaults, and the *Occupational Safety and Health Handbook* for safety standards.

CBP Lacks Necessary Precautions to Protect Its Staff

Necessary precautions to protect its staff from powerful synthetic opioids such as fentanyl were not in place at vaults we visited. According to the Office of National Drug Control Policy's *Fentanyl Safety Recommendations for First Responders*,² all first responders should follow standard safe work practices when they know or suspect fentanyl or its analogues to be present. Specifically, it suggests first responders administer naloxone according to a department's protocols in case of exposure to fentanyl. It further states that in some instances, multiple doses may be required.

Despite these recommendations, CBP has not always made naloxone available to treat its staff in cases of exposure to opioids. During our audit, we visited seven vaults that contained fentanyl. Two of the vaults did not have naloxone, and an officer at one of the vaults had never heard of it.

The other five vaults contained naloxone, but two of the five had it locked in boxes with codes (see figure 2). One of the two vaults containing naloxone also contained the largest recent seizure of fentanyl in CBP history.

² Website: <https://www.whitehouse.gov/ondcp/key-issues/fentanyl>



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Staff had taped a piece of paper bearing the code to this vault on the wall next to the lock-box. However, when asked to open the lock-box at the other vault, staff could not open it because they could not remember the code. If this had been an actual event of fentanyl exposure, the staff could have died because they did not have timely access to the naloxone to counteract the fentanyl.

OFO officials could not explain why OFO does not require naloxone to treat staff in case of potentially lethal exposure. Further, officials could not explain why they sometimes stored naloxone in lock-boxes at vaults, which were secure facilities. Such confusion can be attributed to CBP's lack of official policy on standard procedures for handling fentanyl. Specifically, OFO does not have guidance from CBP to ensure all OFO field offices have adequate and consistent procedures on how to handle fentanyl safely, and steps to take in case of accidental exposure. Although some offices within CBP have proactively established their own practices for handling fentanyl, the SAMEPH does not currently include specific procedures for managing the substance. OFO officials stated that because fentanyl is a newer drug, it is not included in the SAMEPH. CBP last updated the SAMEPH in July 2011.

Additionally, CBP does not require mandatory training for its staff to demonstrate an understanding of the risks of fentanyl and methods for combating accidental exposure. OFO personnel typically take some precautionary measures when seizing suspected fentanyl, such as:

- requiring all agents wear personal protective equipment including gloves, eye protection, masks, and coveralls;
- not disturbing packaging and sending fentanyl to a laboratory for testing; and
- double bagging, sealing, and clearly labeling seized property as "Suspected Fentanyl/Fentanyl Related Substance."

Some OFO officials also said they store fentanyl on vault floors to limit the possibility of accidental spills. However, OFO does not require formal instruction for its staff who typically come in contact with fentanyl in the workplace.

With the recent rise in fentanyl seizures, CBP staff now routinely handle fentanyl more than ever. However, without easy access to naloxone in case of exposure,

Figure 2. Naloxone Lock-Box



Source: OIG photo



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CBP is unnecessarily jeopardizing the lives, health, and safety of its staff. Without providing agency-wide guidance on safe handling of fentanyl, CBP has not set adequate expectations or priorities for protecting its workforce. CBP's lack of training on managing the lethal substance further increases the risk of injury or death to its employees from fentanyl exposure.

Recommendation

Recommendation 1: We recommend CBP Acting Commissioner revise its *Seized Asset Management and Enforcement Procedures Handbook* to include guidance for handling and storing opioids such as fentanyl. At a minimum, the revision should include:

1. a requirement that naloxone be available to all employees, at facilities, and in vehicles involved in seizure, transportation, and storage of fentanyl; and
2. training and expectations on administering naloxone.

Management Comments and OIG Analysis

CBP management provided written comments on a draft of this alert. We included a copy of CBP management comments in their entirety in appendix A. We also received technical comments that we incorporated in the alert as appropriate.

CBP Response to Recommendation 1: Concur. On June 24, 2019, CBP's Executive Assistant Commissioner for OFO issued a memorandum entitled: "Naloxone Distribution and Training for Seizure Vault Personnel." The memorandum directed that all:

1. OFO permanent vaults be equipped with Naloxone nasal spray kits and lock boxes, and
2. SPSs be trained on proper use of the Naloxone spray, an understanding of the hazards of fentanyl, and methods to combat accidental exposure.

The estimated completion date is September 30, 2019.

OIG Response: We consider these actions responsive to the recommendation, which is resolved and open. We will close this recommendation after CBP:

- Confirms the full and complete distribution of materials to all 62 vaults;
- Confirms personnel received training;
- Includes training at the Federal Law Enforcement Training Centers as part of the seized property basic course; and
- Updates the SAMEPH to include guidance for handling and storing opioid seizures.



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Appendix A

Objective, Scope, and Methodology

DHS OIG was established by the *Homeland Security Act of 2002*, Pub. L. No. 107-296, 116 Stat. 2135, which amended the *Inspector General Act of 1978*. We issued this management alert during an ongoing audit of CBP's storage of seized drugs in permanent vaults. The objective of our ongoing audit is to determine whether CBP is effectively transporting, storing, and destroying seized drugs.

To answer our objective, we interviewed officials from CBP headquarters. We also interviewed officials and visited vaults in OFO field offices in Dallas, Laredo, Roma, and El Paso, Texas; Nogales, Arizona; San Diego, California; and Philadelphia, Pennsylvania. We reviewed Federal, CBP, and OFO criteria related to vault storage; OFO process workflows and standard operating procedures; inventory data; and OFO policies, procedures, and other documentation.

We conducted our work under the *Inspector General Act of 1978*, as amended, Section 2.(2), "to promote economy, efficiency, and effectiveness in the administration of, and [] to prevent and detect fraud and abuse in, [DHS] programs and operations." This management alert focuses only on the safety of SPSs who encounter fentanyl and other dangerous opioids stored in OFO vaults.

Additional recommendations regarding this issue may be included in the final audit report resulting from our ongoing audit. Any corrective actions CBP takes in response to this management alert will be addressed in our full audit report.

Office of Audits major contributors to this management alert are Sean Pettersen, Director; Melissa Williams, Audit Manager; Alphonso Hines, Auditor-in-Charge; Lori Smith, Auditor; Patricia Epperly, Program Analyst; Jacob Farias, Program Analyst; Brandon Landry, Program Analyst; Levino Johnson, Program Analyst; Ralleisha Dean, Independent Reference Reviewer; Thomas Hamlin, Communications Analyst.



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Appendix B
CBP Comments to the Draft Alert

1300 Pennsylvania Avenue NW
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**U.S. Customs and
Border Protection**

July 10, 2019

MEMORANDUM FOR: Jennifer L. Costello
Acting Inspector General

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

SUBJECT: Management Response to Draft Management Alert: "CBP Did Not Adequately Protect Employees from Possible Fentanyl Exposure" (Project No. 18-101-AUD-DHS)

Thank you for the opportunity to review and comment on this draft management alert. U.S. Customs and Border Protection (CBP) appreciates the work of the Office of Inspector General (OIG) in planning and conducting its review and issuing this alert.

As America's unified border agency, CBP plays a critical role in combating the flow of dangerous synthetic opioids, particularly illicit fentanyl, into the United States and keeping them from reaching the American public. CBP seizures of fentanyl have significantly increased from approximately two pounds seized during fiscal year (FY) 2013 to 3,404 pounds seized during FY 2018. As noted in the OIG's draft report, as of April 2019, CBP has about 3,500 pounds of fentanyl stored in CBP seizure vaults.

We agree that fentanyl presents a significant safety threat to CBP personnel. Along these lines, CBP's Executive Assistant Commissioner for the Office of Field Operations (OFO) has provided explicit instructions to the field regarding the safe handling of fentanyl. In addition, during FY 2015 CBP initiated a program to train and equip personnel with Naloxone, a potentially life-saving drug for the treatment of opioid overdoses. As of June 2019, 4,562 CBP officers and others have received training in recognizing the signs and symptoms of an opioid overdoses, administering naloxone, and were certified as cardiopulmonary resuscitation instructors.

In addition, CBP has deployed 3,330 dual-dose Narcan Nasal Spray® kits (Naloxone) to the field and equipped its seizure vaults with safety equipment, such as gloves, masks, Tyvek suits, and eye wash stations. The Naloxone program has also been expanded to CBP's Laboratories and Scientific Services Directorate (LSSD) where all suspect

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substances are sent for identification. CBP was the first Federal law enforcement agency to implement a Naloxone program.

CBP's officers, agents, import and agriculture specialists, and LSSD personnel work tirelessly to secure our borders and interdict illegal substances that threaten all of our communities. CBP senior leadership is committed to remaining nimble and adapting to all threats, and ensuring that all CBP employees have the information and other resources needed to stay safe while protecting our fellow citizens.

The management alert contained one recommendation, with which CBP concurs. Attached, find our detailed response to the recommendation. Technical comments were previously provided under separate cover.

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

Attachment



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**Attachment: Management Response to the Recommendation Contained
in Draft Management Alert OIG-18-101-AUD-DHS**

The Office of Inspector General (OIG) recommended that CBP's Acting Commissioner:

Recommendation 1: Revise its "Seized Asset Management and Enforcement Procedures Handbook" to include guidance for handling and storing opioids such as fentanyl. At a minimum, the revision should include:

1. A requirement that naloxone be available to all employees, at facilities, and in vehicles involved in seizure, transportation, and storage of fentanyl; and
2. Training and expectations on administering naloxone.

Response: Concur. On June 24, 2019, CBP's Executive Assistant Commissioner for OFO issued a memorandum entitled: "Naloxone Distribution and Training for Seizure Vault Personnel," to all OFO Directors alerting them that due to the rise of opioid seizures (to include fentanyl), the health risks of exposure to CBP personnel had increased. The memorandum further directed that:

1. all OFO permanent vaults be equipped with Naloxone nasal spray kits and lock boxes, and
2. all Seized Property Specialists (SPS) be trained on the proper usage of the Naloxone spray and an understanding of fentanyl and methods to combat accidental exposure.

CBP OFO Fines, Penalties and Forfeitures Division (FPFD), Seized Property Branch (SPB) personnel, in collaboration with Field Readiness Division (FRD), Incident Management Branch (IMB) personnel completed the immediate distribution of Naloxone spray and lock boxes to OFO's 62 permanent vault locations on June 14, 2019. OFO Fines, Penalties and Forfeitures Officers will confirm the full and complete distribution of these materials to all vaults by close of business (COB) July 12, 2019.

CBP OFO FPFD SPB personnel, in collaboration with FRD IMB personnel will coordinate required training, which must be completed by all SPSs by COB August 30, 2019, and reported to the FPFD by COB September 6, 2019. Moving forward, new SPSs will receive this training at the Federal Law Enforcement Training Center as part of the Seized Property Basic Course.

Lastly, the "Seized Asset Management and Enforcement Procedures Handbook" will be updated to include guidance for handling and storing opioid seizures. The revision will



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also mandate that all permanent seizure vaults maintain Naloxone spray to treat CBP OFO personnel in case of exposure to seized opioids.

Estimated Completion Date: September 30, 2019.



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Appendix C
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