Department of Health and Human Services

Office of Inspector General

Issue Brief

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Insights from OIG's Work on the Office of Refugee Resettlement's Efforts to Care for Unaccompanied Children

Why OIG Did This Review

- This issue brief provides insights from the Office of Inspector General's (OIG's) oversight of the Unaccompanied Children Program, which is administered by the Office of Refugee Resettlement (ORR) within the Department of Health and Human Services (HHS) Administration for Children and Families (ACF).
- These insights represent overarching lessons gleaned from OIG's body of oversight work during 2008 to 2024—rather than a new assessment of ORR's important efforts to ensure the health and safety of children in HHS custody—which ACF can use to guide its current and future operation of the Unaccompanied Children Program.

Key Insights



Preparing to take unaccompanied children into custody

Effective interagency coordination and adequate bed capacity are critical for ORR's readiness to assume custody for a variable number of children over time.



Protecting children in HHS custody from harm

Proper employee screening and training; tracking significant safety incidents; and coordination with law enforcement are essential to protecting children in HHS custody.



Addressing children's medical and mental health needs

Thorough intake assessments, effective case management, and an adequate number of qualified staff can ensure that ORR is able to provide prompt services to children.



Supporting the release of children to safe sponsors

Effective processes for vetting sponsors and timely post-release followup are important to reduce the risk of children being released to and remaining in unsafe environments.

Related OIG Resources

- The <u>Unaccompanied Children Featured Topics webpage</u> provides a complete list of OIG's oversight reports on the Unaccompanied Children Program.
- The OIG Recommendations Tracker provides details and statuses of OIG recommendations to ACF.
- The OIG Work Plan details OIG's ongoing audits and evaluations of ORR and other HHS programs.

INSIGHTS

This issue brief presents overarching lessons gleaned from OIG's body of oversight work since 2008, rather than a new assessment of ORR's important efforts to ensure the health and safety of children in HHS custody. This issue brief updates information provided to ACF in 2021 to incorporate new insights from recent OIG work, including audits, evaluations, and the experiences of OIG's law enforcement experts who routinely coordinate with ORR and facilities.

OIG intends that this issue brief serve as a succinct, high-level overview of OIG's work that can inform the ongoing efforts to ensure the health and safety of children in HHS custody. As such, we present themes that remain relevant, acknowledging that ORR has taken numerous actions to improve its operation of the Unaccompanied Children Program in relation to specific OIG recommendations.



Preparing to take unaccompanied children into HHS custody

Coordinating transfers from DHS and interagency communication

- To ensure the timely, seamless transfer of children from the Department of Homeland Security (DHS) to HHS, formal interagency agreements between HHS and DHS must provide clarity on both departments' roles and responsibilities. The agreements should include requirements for the transport, transfer, custody, and care of unaccompanied children, as well as structures for resolving issues and sharing information. (OEI-09-16-00260, OEI-07-06-00290)
- Effective coordination—both within HHS and between HHS and other Federal agencies—can help to ensure that ORR receives all information pertinent to its ability to provide care for unaccompanied children when policy changes occur. (OEI-BL-20-00670, OEI-BL-18-00510)

Making initial placements and transfers between ORR-funded facilities

- Fully staffing facilities with intake specialists can help to ensure that ORR is able to make an initial placement within 24 hours of each referral and complete an Intakes Placement Checklist for each child to identify special needs or concerns. (A-06-20-07002)
- Maintaining all required child-transfer documentation in ORR's case management system can enable ORR to provide effective oversight of transfers from one facility to another and to help ensure that facilities have sufficient information to meet children's needs. (A-06-20-07002)

 Maintaining a complete list of emergency contacts to notify when a child's location changes due to an emergency evacuation can help to ensure that facilities are able to protect children in emergencies. (A-04-20-02025)

Planning for sufficient bed capacity

- Better projections of bed capacity needs based on historical referral data and information from other Federal departments can help ORR do the following: respond to surges; ensure that emergency or influx facilities have beds and staff in place; maintain sufficient bed capacity; and ensure that children can be transferred from DHS to ORR facilities within the 72-hour legal limit. (OEI-07-21-00251, A-12-20-20001, OEI-BL-18-00510)
- Maintaining adequate bed capacity in specialized facilities—such as facilities that
 provide higher levels of security or mental health care—can help prevent safety
 issues from occurring in nonspecialized facilities. (A-06-20-07002, OEI-09-18-00431)
- Effective oversight of the Unaccompanied Children Program should include planning for population shifts that result from seasonal and policy changes.
 (OEI-BL-18-00510, A-12-20-20001)

Managing emergency or influx facilities

- When ORR opens new facilities that are not State-licensed, two actions that it can
 take to help avoid placing children at risk are (1) ensuring that facilities receive
 background check results for staff prior to hiring them and (2) limiting the extent to
 which waivers are allowed for the background check requirements. (A-06-21-07003,
 A-12-19-20001, A-12-19-20000)
- When facilities such as emergency or influx facilities must be rapidly staffed, hiring
 experienced case managers and adequately training staff are important for ensuring
 that case management is conducted in accordance with ORR policy and with
 consideration for children's safety and well-being. (OEI-07-21-00251)



Protecting children from harm

Hiring, screening, and retaining facility employees

Two actions that can help protect children are ORR and its facilities (1) ensuring that
all employees meet minimum requirements for background checks—including preemployment background screening; FBI fingerprint checks; and child abuse and
neglect checks—and (2) properly documenting in employee personnel files that these
checks were conducted. (A-06-21-07003, A-12-19-20001, A-12-19-20000)

- Conducting timely background checks for staff, including contractors, and ensuring that facility employees do not have direct access to children while checks are pending can help to ensure child safety. (A-06-21-07003, A-12-19-20001)
- Consistently maintaining a sufficient number of adequately trained facility staff, including youth care workers, mental health clinicians, and experienced case managers, can help to ensure the health and safety of children in facilities. In particular, ORR should work with facilities to maintain a sufficient number of youth care workers to meet ORR-mandated staff-to-child ratios because they are key to preventing, detecting, and reporting safety incidents. (OEI-07-21-00251, OEI-09-18-00430, A-12-19-20001, OEI-09-16-00260)
- Technical assistance from ORR to facilities that addresses the topics of recruiting and retaining qualified staff, stress management, whistleblower protections, and other staffing issues can help ensure that facility staff can respond to children's health and safety needs. (OEI-07-21-00251, OEI-09-18-00431)

Ensuring facility safety and security

- Proactive safety and security planning at facilities, including procedures for restricting access to facilities and children, can help prevent potential child safety incidents, especially at temporary facilities. (A-06-21-07003, OEI-05-19-00210)
- Facility compliance with State licensing-agency requirements (e.g., requirements regarding fire safety, facility cleanliness, securing hazardous materials, maintaining first-aid supplies, etc.) is critical to ensuring a safe living environment for children.
 (A-06-17-07005, A-02-16-02007, A-02-16-02013, A-06-17-07007)
- Clear and specific guidance from ORR regarding facility safety checklists and physical security requirements, as well as periodic reviews by ORR of a facility's physical security checklist, can help to protect children from potential harm. (OEI-05-19-00210, A-06-17-07005, A-02-16-02007)

Reporting and tracking significant incidents

- Maintaining a significant incident reporting system that captures necessary
 information—such as a facility's response to a safety incident—in an easy-to-analyze
 manner can enable ORR to provide efficient and effective oversight and proactively
 spot trends in incident reports, in order to identify opportunities to better safeguard
 minors. (OEI-09-18-00430)
- Providing facility employees with clear guidance and training on reporting safety incidents can help ORR to receive information regarding specific safety incidents happening at facilities and can ensure appropriate followup action to protect children. (OEI-09-18-00430)

 Training facility staff in whistleblower protections and guarding against potential retaliation for whistleblower reports can enable staff to raise concerns about child well-being and child safety. (OEI-07-21-00251)

Coordinating with law enforcement

- Working with local and other law enforcement to address jurisdiction issues prior to opening facilities can help clarify which law enforcement agency responds to child safety incidents. (OIG law enforcement experts)
- Coordinating with local and other law enforcement agencies can help to prevent safety and security issues at ORR-funded facilities and ensure adequate emergency response and necessary investigative support. (OIG law enforcement experts)
- Alerting the public and prospective sponsors to fraud schemes involving unaccompanied children can help to protect vulnerable families from bad actors.
 (OIG Fraud Alert: Fraud Scheme Targeting Families of Unaccompanied Children)



Addressing children's medical and mental health

Providing medical and mental health services

- Conducting thorough intake assessments when children enter facilities is critical to help identify immediate medical or mental health concerns; current medications; and any concerns about the child's personal safety. (A-03-16-00250)
- Completing medical exams within the required time and maintaining case files with complete documentation are steps that facilities can take to help ensure that children receive necessary services and are placed in facilities that can offer appropriate care. (A-06-20-07002, A-03-16-00250, A-06-17-07005, OEI-07-06-00290)
- Promptly addressing children's mental health needs is essential—not only for the child's well-being, but also to minimize the risk that the child may negatively influence or harm others. (OEI-09-18-00431)
- Establishing clear policies and procedures on addressing communicable diseases can help protect children's health, especially during a public health event. (A-06-21-07002, A-04-20-02031)

Hiring and training staff to provide health services for children

• Ensuring that facilities have enough mental health clinicians to maintain the ORR-mandated ratio of mental health clinicians to children can enable staff to devote more attention to children's needs. (OEI-09-18-00431, A-12-19-20001)

- Training on how to address trauma is an important supplement for mental health clinicians because the level of trauma that many unaccompanied children experience is greater than what many mental health clinicians would typically encounter in other settings. (OEI-09-18-00431)
- Maintaining telehealth capability can help facilities fill gaps in providing medical and mental health care and help ensure that children receive timely assessments and services. (A-04-20-02031, OEI-09-18-00431)



Supporting the release of children to safe sponsors

Maintaining systems and processes to screen potential sponsors

- Ensuring that potential sponsors are thoroughly vetted, including conducting background checks, other safety checks, and mandatory home studies, can help ensure that children are released to safe environments. (OEI-07-21-00250, A-09-16-01005, A-04-16-03566)
- Ensuring that ORR's case management system allows staff to capture; access; and reliably search and track required documentation, child welfare outcomes, and sponsorship history for sponsor screening can prevent the release of children to unsafe environments by enabling staff to effectively vet sponsors. (OEI-07-21-00250, OEI-07-21-00251)
- Reconciling and verifying data between facility and ORR data systems, and between HHS and DHS data systems, can support sponsor placement and children's release from ORR custody. (OEI-BL-18-00510, A-06-17-07005, A-06-17-07007)
- Communicating ORR operational guidance and policy changes quickly and accurately, in a searchable location with clear issuance and effective dates, helps to ensure that facility staff can easily find current guidance on practices for sponsor screening and other policies. (OEI-07-21-00251, OEI-BL-18-00510)
- Efficiently identifying and vetting potential sponsors shortens the time in which children remain in ORR custody and can help to prevent unnecessarily long stays that may worsen mental health issues for children in care. (OEI-07-21-00251, OEI-09-18-00431)

Following up with children after release to sponsors

 Contacting unaccompanied children after they have been released to sponsors can help connect children and their sponsors to post-release services, such as locating legal representation, enrolling children in school, and obtaining health care. (OEI-07-21-00250, OEI-09-16-00260)

- Ensuring that information obtained after a child's release is accurately captured in sponsors' records maintained in ORR's case management system can provide ORR with important information about sponsorship history and suitability, which can be used in future placement decisions. (OEI-07-21-00250)
- Conducting followup calls after the child's release to a sponsor can allow ORR to identify and report serious safety concerns to law enforcement and child protective services, when appropriate. (OEI-07-21-00250, OEI-09-16-00260)
- Implementing an effective monitoring mechanism within ORR's case management system to identify children who do not receive timely followup calls after their release can help reliably track case managers' interactions with children. (OEI-07-21-00250)

Impact of ORR's Data Systems on Its Operations

Many insights across the four themes discussed above relate to the data systems that facilitate and document essential operations for the Unaccompanied Children Program. In OIG's oversight work, cross-cutting challenges related to data systems and information management arose in the following contexts:

- Information sharing between DHS and HHS and maintaining child-transfer documentation;
- Maintaining documentation of timely employee background checks;
- Protecting children's safety by reporting and tracking safety incidents and followup at facilities;
- Documenting intake assessments and children's physical and mental health needs in ORR's case management system;
- Capturing accurate information in sponsors' records to allow thorough and timely screening of potential sponsors and oversight; and
- Documenting information obtained during followup calls after children are released from ORR custody.

Having functional data and administrative systems and training staff on how to use them effectively are critical to ensuring that ORR can track children's medical information and needs, manage the services that children receive, screen potential sponsors, and document followup conducted after a child's release from ORR custody. Further, employing best practices for cybersecurity and ensuring compliance with Federal data security requirements can protect ORR systems and children's information.

APPENDIX

About the Unaccompanied Children Program

ORR, a program office of ACF within HHS, manages the Unaccompanied Children Program. While a child is in HHS custody, ORR is responsible for providing shelter and care that is in the child's best interest.

Unaccompanied children

- Are most often taken into Federal custody by border patrol officers with DHS;
- Are under 18 years of age;
- Do not have lawful immigration status in the United States; and
- Do not have a parent or legal guardian in the United States who is available to provide care and physical custody.

Assuming custody for unaccompanied children. Most unaccompanied children come into HHS custody because they are apprehended by border patrol officers with DHS. Children who are in Federal custody, including DHS custody, must be transferred to ORR within 72 hours from the determination that the child is unaccompanied unless there are exceptional circumstances. A child remains in ORR custody until an appropriate sponsor in the United States who can assume custody is identified; the child turns 18 years old and ages out of the Unaccompanied Children Program; or the child's immigration status is resolved.

Caring for children in custody. Federal law requires ORR to make safe and timely placements for children in the least restrictive setting that is in the best interest of the child. To that end, ORR funds a network of facilities that furnish temporary care for children until they are released to a sponsor or otherwise leave HHS custody. Most children are cared for through standard ORR facilities, which include shelter care, secure care, staff-secure care, residential treatment centers, or long-term foster care. These facilities are required to provide services for children, including housing, food, medical care, mental health services, educational services, case management, and recreational activities. Additionally, ORR relies on emergency or influx facilities during periods of increased transfers from DHS.

Screening potential sponsors. Before releasing children into the custody of sponsors, ORR is responsible for establishing the safety and suitability of potential sponsors. Children's sponsors can include (in order of preference for placement): parents, legal guardians, adult immediate relatives, and other individuals designated by the child's parents. Typically, the process for screening potential sponsors begins with a case manager identifying and contacting a potential sponsor. The potential sponsor must complete and submit an application with documentation to verify their identity, their address, their relationship to the child, and the identities of any

household members. Before a release decision is made, the case manager must document a Sponsor Assessment in the child's file, conduct safety checks (e.g., address and background checks), and determine whether a home study is also needed to evaluate the sponsor's suitability.

Thirty days after the release of an unaccompanied child to a sponsor, an ORR care provider conducts a Safety and Well-Being Follow Up Call with both the sponsor and the child to help ensure the continued safety of the child. The care provider must document in the child's case file the outcome of the followup call, including if the care provider is unable to contact the sponsor or child after reasonable efforts have been exhausted.

Additional Information

For more details about ORR processes and the Unaccompanied Children Program, see the following resources at www.acf.hhs.gov/orr:

- About the Unaccompanied Children Program
- ORR Unaccompanied Children Program Policy Guide
- Key Documents on the Unaccompanied Children Program

STANDARDS AND CONTACT

Standards

OIG conducted the audits referenced in this brief in accordance with the Generally Accepted Government Auditing Standards issued by the U.S. Government Accountability Office and conducted the evaluations in accordance with the Quality Standards for Inspection and Evaluation issued by the Council of the Inspectors General on Integrity and Efficiency.

Contact

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