

Descriptive Study of the URM Program: Survey for Private Custody Child Welfare Administrators

Landing page: Consent information

MEF Associates and its partner, Child Trends, have been contracted by the Administration for Children and Families (ACF) in the U.S. Department of Health and Human Services to conduct a research study to better understand the range of child welfare services and benefits provided through the Unaccompanied Refugee Minors (URM) program. The following is information to help you decide if you want to respond to the survey.

We invite you to complete a voluntary web-based survey. We expect you will need to collaborate with 1-2 other people in your office to complete the survey, and expect each person's participation will take about 30 minutes. The survey asks questions about your child welfare agency's roles and responsibilities regarding the URM program, and the relationship between your agency and the URM program provider in your area.

Risks associated with participation include potential loss of privacy. Information you provide will **not** be shared with other child welfare administrators or URM programs, but the researchers **will** share program-level responses with ACF and the Office of Refugee Resettlement. Your responses will not be shared beyond ACF or the research team. Study reports will describe findings in general terms and will not include names or any other identifiable information. However, because of the relatively small number of organizations participating in the study, there is a possibility that a response could be correctly linked to you. You will not benefit personally from being involved in the study, but we hope this study can help improve services for URM youth.

You can choose to stop the survey at any point, and you can skip any questions you do not wish to answer. If after completing the survey you no longer wish to participate, you may contact the study team (contact information below) to have your organization's responses removed from the study.

If you have any comments or concerns about this study, you can contact Sam Elkin, Study Director, at 703-838-2722. If you have questions or concerns about your participation in the study or your rights as a research participant, you may also contact the Child Trends Institutional Review Board at 1-855-288-3506 or irbparticipant@childtrends.org.

If you would like to keep a copy of this consent information, you may click here to download it as a pdf. [LINK]

Do you agree to participate?

- I AGREE to participate
- I DO NOT AGREE to participate

The Paperwork Reduction Act Statement: This collection of information is voluntary and will be used to document features of the Unaccompanied Refugee Minors Program and the provision of services to youth served by that program. Public reporting burden for this collection of information is estimated to average 40 minutes per response, including time for reviewing instructions, gathering and maintaining the data needed, collaboration, reviewing the collection of information, and completing the survey. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this collection is XXXX-XXXX and it expires XX/XX/XXXX.

Second page: Instructions

Navigating through the survey

- You may take this survey on any device, including cell phones or tablets. However, there are open text fields that may require long responses, therefore we recommend taking the survey on a computer.
- If you need to consult with others for responses to questions or want to complete the survey as a team, you can share the link (which is unique to your organization) with others. You also can download a Word version of the survey so that you can print it and fill it out as a group, then enter your responses all at one time. To download the Word version, click here: [LINK]
- As you work through the survey, your responses are automatically saved after each page is completed (after each time you hit 'NEXT'). You may change a response by clicking on the **BACK** button at the bottom of the page (not your browser's 'back' button). Use the **NEXT** button to advance to the next page.
- At any time, you may click on the **SAVE & CONTINUE LATER** button (at the bottom of the screen) if you wish to temporarily pause the survey and return to it at a later time. An auto-generated email will be sent to you. This may go to your spam folder- be sure to check there if you do not receive the email.
- When you have completed the survey, please click on the **SUBMIT** button at the end of the survey. You may submit the survey even if there are some questions that you choose not to answer. Once you submit the survey, you will not be able to return to it without contacting us.
- If you have any technical issues, you may call or email Maia O'Meara of Child Trends at momeara@childtrends.org or 240-223-9274 (Monday – Friday 9:00 am – 5:00 pm ET).

Third page: Survey begins

While [NAME OF URM PROGRAM PROVIDER(S) IN STATE] may have multiple programs for children/youth, we are interested specifically in your agency's role with the program for URM youth. If you are unable to answer any of the questions, please indicate so instead of leaving them blank.

[For states where there is more than one URM program provider, add the following]

Since there is more than one URM program provider in your state, please indicate in your responses if they vary by program provider, and how.

Background information

Please describe your current position and role/responsibilities at [NAME OF AGENCY].

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How long have you held that position and been with [NAME OF AGENCY]?

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Survey Questions

1. In general, how would you describe [NAME OF AGENCY]'s responsibility with the URM program(s) at [NAME OF URM PROGRAM PROVIDER(S) IN STATE]? *For example, licensing the program as a child placing agency, or providing services or out-of-home care placements for URM youth.*
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2. Specifically, what role does [NAME OF AGENCY] play in monitoring URM youth/cases in terms of safety and permanency? *For example, do you conduct case reviews or audits for URM youth? Are they entered into or flagged in your administrative data system? Is there a designated staff person responsible for overseeing URM youth?*
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3. Specifically, what role does [NAME OF AGENCY] play in monitoring foster families for URM youth licensed by [NAME OF URM PROGRAM PROVIDER(S) IN STATE]? *For example, do you conduct case reviews or audits of foster families for URM youth? Is there a designated staff person responsible for overseeing URM placements?*
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4. Are the requirements or processes for licensing a URM program provider as a child placing agency in your state different from those for domestic foster care providers? If yes, please explain.
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5. How would you characterize the relationship between [NAME OF AGENCY] and [NAME OF URM PROGRAM PROVIDER(S)]? *For example, how closely, on what topics, and how frequently do you collaborate (if at all), with [NAME OF URM PROGRAM PROVIDER(S)] regarding the URM program?*
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6. Does your state/county child welfare agency data system (e.g., CCWIS/SACWIS system) include a flag or other identifier that allows you to know which individuals in the systems have refugee status or other status that makes them eligible for the URM program.
 - Yes
 - No
 - Don't know
7. Is there anything else you would like to tell us about [NAME OF AGENCY]'s involvement with the URM program that we did not cover in the questions above?
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