ORR/UCP LTFC Master Case File Checklist - OPEN/CLOSED (Updated: 09/28/2020)

Reviewer:		Date:			Release Category:
UAC Name:		A#:			Release Category.
Nationality:		DOB:			Case Manager:
Admitted Date:		Gend	er:		Clinician:
Date of Release:		Langu	iage(s):		Transfer from:
Foster Parent Name:		Religi	on:		
	Orange Fill = Flores Minimum Requirement	Gray	Fill = Im	portant Docume	nt
		CF	Portal	Date	Notes
Admission Documents					
Initial Intakes Assessme	ent (within 24 hours)				
		╙	<u>_</u> L_		
	on Form (signed by care provider within 24 hours.)	\Box			
	nours) (Recommendation only: Babies every 6 months; All other UA ty and Cash (Signed within 24 hours. Inventory should include	\Box	╻□		
clothing/cash kept by p	y and cash (signed within 24 hours, inventory should include incorporation and clothing/cash returned to UAC. Log should be updated and property during his/her stay)				
Clothing and Supplies o					
Other Admission Forms	s (insert below)	屵屵			
	- \	ЩЦ			
Orientation Document	s (48 hours, translated into UAC language)				
	Orientation (Signed. Note in English indicating purpose of				
document. Should inclu	ude: Foster Family Rules. Should cover program rules and policies,				
grievance procedures, evacuation procedures	information on boundaries, abuse and neglect, and emergency and .)				
Documentation that ar completed	Orientation on Sexual Abuse and Sexual Harassment has been				
• 48 hours					
• Refresher every 90 o	· ·				
	AC Received <i>Program</i> Pamphlet (Pamphlet should include care to SA/SH, UAC's Right and Responsibilities related to SA/SH, how nd consular personnel)		н		
Documentation that U0	C Received ORR Pamphlet on Sexual Abuse and Harassment	П	н		
Other Orientation Forn	ns (Insert below)	Гπ	1		
Legal Information					
initialed within 24 hour 5/10/13, 2/14/13, 10/2	eceiving the Legal Resource Guide at admission (Signed and rs. Current Version: 4/4/19. Previous Versions: 9/20/16, 2/9/15, 22/12. List for CA - Current Version: 07/28/16.)				
Birth Certificate	2. forming A consider (United and admitted and become) / constitution	\perp	'-□	! 	
medical/mental health	Referring Agencies (Uploaded within 24 hours) (e.g. DHS docs, //safety concern docs, criminal/juvenile records)				
	ffice for Immigration Review)	$\perp \square$			
	inal History Records (if applicable) f Appearance) (If UAC is represented by a lawyer. Note: Most UAC	$+$ \square			
in LTFC will have a lawy					
Authorization for Relea	se of Records (if applicable)	+			
	v 11 /	- L			
Medical Documents					
Authorization for Medi 24 hours)	cal, Dental, and Mental Health Care (signed by care provider within				
	al Medical Exam (unless the minor obtained a medical exam within				
	e under the care of another ORR-funded care provider, and there is iving the medical exam; Current Version - expiration: 05/31/22. ration: 11/30/18)				
Immunization Records					
	(s) (Initial within 60-90 days of admission into ORR care; Effective				
	ental Exam, regardless of final outcome, should be recorded in the ndation every 6 months thereafter)				
Prescriptions (including	Prescription log.)	П			

TB Screening Results (if diagnosed with latent TB (LTBI), check if there is a letter in the case file at discharge. Current Version - expiration: 05/31/22. Previous Version - expiration: 11/30/18)				
Communicable Diseases	_	_		
Records of Office Visits/ER Visits/Hospital, Surgery (Medical information should be uploaded in respective section of Health tab; mental health reports should be uploaded under "Historical Medical Record" under CM tab and related documentation should be uploaded under "UAC Documents.")				
Diagnosis List	\perp_{\Box}			
Copies of Referrals for Medical Services	l Hi			
Progress Notes Related to Medical Health Services (if applicable)				
UAC Request for Emergency and Non-Emergency Health Care Services (Care providers must respond to non-emergency requests within 24 to 48 hours, excluding weekends and holidays.)				
Assessments	_			
Risk Assessment				
		-		
Within 72 hours				
Updated every 90 days				
UAC Assessment (Effective: 12/16/16 - Within 5 days, should not be updated after day 5)				
Effective 3/23/16 - Medical Sections no longer need to be completed. If there is a significant condition/illness, program can write "refer to medical". Effective 12/06/16 - Programs are no longer required to complete the Sponsor Assessment sections for sponsors who are identified on 12/6/16 and going forward.)				
UAC Case Review (Initial completed within 30 calendar days in care) Effective 3/23/16 -				
Medical Sections no longer need to be completed. If there is a significant condition/illness, program can write "refer to medical". Effective 12/06/16 - Programs are no longer required to complete the Sponsor Assessment sections for sponsors who are identified on 12/6/16 forward.				
 Continuously updated until 90 calendar days after admission if required or relevant information that was unknown during the assessment is later received or additional information is obtained from the UAC or other sources (e.g. KYRs) OR 				
Subsequently every 90 calendar days <u>OR</u>				
Substantial changes or Additional Information is received	<mark>╄</mark> ┾┵	- - ,		
Sponsor Assessment (If applicable; (Current version: 6/24/19; Effective: 12/6/16 - Within 5		-		
Required or relevant information that was unknown during the time of the	누님			
Additional information is obtained from the sponsor, UAC, UAC's family, home	┢	-		
In Care Plans				
Individual Service Plan (Effective: 12/6/16 - Within 5 days.				
individual Service Flair (Effective: 12/0/10 - Within 5 days.				
Individual Service Plan Update		_		
• Every 90 days in care OR				
Any time there is a substantive change in UAC's case information	┷╙			
Any time there is a substantive change in OAC's case information				
Know Your Rights (KYRs) Presentation (Should be conducted within 7-10 days of admission into ORR care. If UAC is a transfer, KYRS only required at first care provider.) The program is responsible for documenting KYRs in the UAC Assessment, UAC Case Review, and ISP;				
however, they are not responsible for providing the service and should not be written up				
if the LSP does not provide the service within the required timeframe.				
Independent Living Skills Plan				
Recreation and Leisure Time Plan/Log (Given that UAC are with foster families for longer periods of time, recreational activity log can be a "plan" instead of a log) (Effective				
3/20/20 - avoid community outings due to Covid-19.)				
Acculturation and Adaptation Services Plan				
Religious Services Plan/Log	П			
Individualized Safety Plan (if appropriate)	ΤΉ			
Educational Services				
Summary of Educational Assessment (within local school timeframe)				
Educational Plan ("Plan" should include information on UAC class placement, curriculum/course descriptions, and Records (academic reports, progress notes)).		H	ı	
Individualized Education Plan (IEP), if applicable		.님		
	$\perp \sqcup$	\perp \sqcup		
Class Attendance (Effective 1/2/19)	\Box	\Box		
Opportunities for Vocational Education	LΠ			
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Case Management				

Case Manager Progress Notes (1 meeting per month, preferably in person)			
case Manager Progress Notes (Timeeting per month, preferably in person)			
Quality of Case Manager Notes	11		
UAC Long Term Foster Care Travel Requests (Submitted at least 10 days prior to trip			
Record of Placement Changes (Effective 1/2/19)	FF		
Logs:			
Phone Log (Only required if there is a safety concern)			
Visitor Log	' '	_	
Stipend Log (Only if stipends are mandated by state licensing)	L□		
Clinical Services			
Clinical Progress Notes - Individual Counseling (Per signed LTFC addendum to Cooperative			
Agreement, the provider will alternatively complete individual counseling as needed by			
qualified mental health professional.) Recommendation: Clinician should still check in			
periodically with UAC to see if UAC changes mind about counseling services.) Quality of Clinical Notes			
Progress Notes Related to Mental Health Services (if applicable)	-Д,		
	$\sqcup\sqcup$		
Group Counseling Notes or Record (Recommendation. Per signed LTFC addendum to Cooperative Agreement, the provider is not required to conduct two group counseling		4	
sessions per week.)	ΙП		
Sessions per week.)	_		
Incident Reports			
SIRS (time sensitive)		1	
() () () () () () () () () ()			
Internal Incidents			
Grievances			
Discharge			
Family Reunification Packet (Sponsor must sign the Family Reunification Application			
agreeing to the terms of the Sponsor Care Agreement. Current Version: 1/31/20) Previous		788	
Version: 06/27/19			
Post-18 Planning (Recommendation: If applicable, start at least six months prior to UAC 18th birthday, should include potential placement, case history, medical/mental health			
concerns, behavior, legal status and family reunification options.)	П		
concerns, behavior, regar status and rannily rediffication options.			
Acknowledgement of receiving the Legal Resource Guide at Discharge (Signed and		4	
initialed. Current Version: 4/4/19. Prior Versions: 9/20/16, 2/9/15, 5/10/13, 2/14/13,			
10/22/12. List for CA - Current Version: 07/26/16)			
Log of Property returned and distributed while in care at Discharge			
Log of Froporty Fotolinou and allow batton frime in our of the brothange			
Release Request (FFS must approve the release)			
		oxdot	
Discharge Notification			
Verification of Release Form (Effective: 6/5/15 - not complete unless document has a			
date)	П		
Log/checklist including all documents provided to UAC at discharge Checklist should	⊢—		
include:			
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DHS and Immigration case related documents (i.e. Form I-862, trafficking eligibility letter, I-360 approval notice, asylum letter etc.)			
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Verification of Release			
Birth Certificate			
Original, notarized Letter of Designation for Care of a Minor (if applicable)			
Educational assessments and records	├₩╶		
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Sponsor Care Agreement (if applicable)			
Name and contact information of medical, mental health, and dental care providers	LŪ	التور	
Change of venue/change of address forms			
Post-release safety plan as needed	-Ш		
Zika Letter and Fact Sheet (Effective: 06/14/16)	$-\Box$		
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ORR National Call Center Flyers and Wallet Cards			
CDC Covid-19 Fact Sheet and Symptoms Sheet (Effective: 3/13/20)	П		
Discharge Checklist - Medical Records	TT'		
Letter to Sponsor for UAC with latent TB or TB Exposure (ONLY for UAC who are diagnosed	├╙ -		
with LTBI or TB exposure)			
		-	
Copy of Order of Removal (if applicable)			
Copy of Order of Removal (if applicable) Copy of Trafficking Eligibility Letter (if applicable)			
Copy of Trafficking Eligibility Letter (if applicable)			
Copy of Trafficking Eligibility Letter (if applicable) Transfer to another ORR Care Provider (Non-Influx Site)			
Copy of Trafficking Eligibility Letter (if applicable) Transfer to another ORR Care Provider (Non-Influx Site) All Family Reunification Forms and Supporting Documentation			
Copy of Trafficking Eligibility Letter (if applicable) Transfer to another ORR Care Provider (Non-Influx Site)			
Copy of Trafficking Eligibility Letter (if applicable) Transfer to another ORR Care Provider (Non-Influx Site) All Family Reunification Forms and Supporting Documentation Care Provider Family Reunification Checklist			

Post-Discharge Post-Discharge	
Safety & Well Being Follow-up Call (Effective 3/14/16: all call attempts must be made within 7 days following the 30-day mark of the UAC's release)	
Health Follow-Up Call (Effective 4/6/20: Must follow up with sponsor for 14 days after release date; document if UAC is experiencing acute respiratory symptoms)	
Orange Fill = Flores Minimum Requiremen	nt; Gray Fill = Important Document
Comments:	
Trends/Patterns:	

	ndividual Clinical Services (pg)
Date	ndividual Clinical Services (pg Duration:	Notes:

	Commonts

	Comments
*Check that recreation activities are varied.	

Clinical Group Services (ng)				
Date	Clinical Group Services (pg) Duration:	Notes:		
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Community	Group Meetings - "VCW Led G	Groups" (na)
Date	Group Meetings - "YCW Led C Duration:	Notes:
	20.000.0	

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Coop Management (ng)		
Date	Case Management (pg) Duration:	Notes:
Date	Duration:	NULES:

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Pecrestion - LMA (ng)		
Date	Recreation - LMA (pg) Duration:	Notes:
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Activities Leigure (ng)		
Date	Activities - Leisure (pg) Duration:	Notes:
Butc	Burution:	ivotes.

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	Policious Sorvices (na)	
Date	Religious Services (pg) Duration:	Notes:
Date	Duration.	NULCS.

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Dhono Log (ng)		
Date	Phone Log (pg) Duration:	Notes:
Date	Duration.	Notes.

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