# ORR Unaccompanied Children Program Training Feedback Survey

OMB Control Number: 0970-0401

Expiration Date: June 30, 2024

### **Survey Introduction**

The Office of Refugee Resettlement, Unaccompanied Children Program's (ORR/UC Program) Training & Technical Assistance (TTA) Center is conducting a comprehensive Training Needs Assessment (TNA) to identify learning gaps and needs of the ORR UC Care Provider network. This feedback survey is a key component of the TNA and is designed to collect input from individual care provider programs. One survey response is requested per care provider program. The purpose of this assessment is to gather information that will be used to support the design and development of a comprehensive Training Plan for ORR's UC Program. The survey should take approximately 20 minutes to complete, and participation is voluntary. Your responses will be private and anonymously shared with the TTA team and ORR's UC Program to inform development of a training plan. If you have any questions, please contact TTA Project Director Kathryn Kuennen at Kathryn.Kuennen@acf.hhs.gov.

# **Basic Program Demographic Information**

This survey is to assess the training needs of programs across the care provider network for ORR's Unaccompanied Children. <u>Please complete one survey per program/facility.</u>

- 1) What level of care is this program?
  - a. Shelter
  - b. Therapeutic Shelter
  - c. Therapeutic Group Home
  - d. Group Home
  - e. Residential Treatment Center
  - f. Transitional Foster Care
  - g. Long-Term Foster Care
  - h. Long-Term Group Home
  - i. Staff Secure
  - j. Therapeutic Staff Secure
  - k. Secure
  - I. Emergency Intake Site
  - m. Influx Care Facility
  - n. Home Study and Post Release Services
- 2) How many years has your program served ORR UC youth?
  - a. 0-2
  - b. 3-5
  - c. 6-10
  - d. 11-15
  - e. 15+

PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13) STATEMENT OF PUBLIC BURDEN: Through this information collection, ACF is gathering information to assess the training needs of the ORR UAC Care Provider network. Public reporting burden for this collection of information is estimated to average 20 minutes (0.33 hours) per respondent, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. This is a voluntary collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information subject to the requirements of the Paperwork Reduction Act of 1995, unless it displays a currently valid OMB control number. The OMB # is 0970-0401 and the expiration date is 06/30/2024. If you have any comments on this collection of information, please contact <a href="https://link.gov.nc/link.gov">UCPolicy@acf.hhs.gov</a>.

- 3) Does your program <u>specialize</u> in <u>or have a higher capacity to support</u> any of the following special populations (either on an on-going basis or as requested during influx periods by ORR)? (Select all that apply)
  - a. Parenting/Pregnant UC
  - b. Tender Age Children
  - c. Youth from countries/languages other than Central America
  - d. Youth with ongoing medical needs or who require daily medical interventions
  - e. Youth with behaviors (including aggression) that require staff intervention and/or increased supervision but do not require a change in placement
  - f. Youth with therapeutic needs or emotional regulation challenges (including self-harm), <u>not necessarily</u> requiring a diagnosis or change of placement
  - g. Youth with a mental health diagnosis and/or requiring a therapeutic milieu
  - h. Youth with developmental delays
- 4) What age range is your facility licensed to care for? (Select all that apply)
  - a. 0-11
  - b. 12
  - c. 13-17
  - d. Other (write in):
- 5) What is your ORR licensed bed capacity?
  - a. 1-50
  - b. 51-100
  - c. 101-250
  - d. 251-400
  - e. 400+
- 6) This program's funded capacity: \_\_\_\_Males: (how many) \_\_\_\_Females: (how many)

### **Technical Assistance and Training Center**

### **Training - Assessment of Current Materials**

- 7) How would you rate your level of satisfaction with the current availability of ORR training materials?
  - a. Very satisfied
  - b. Satisfied
  - c. Neither satisfied nor dissatisfied
  - d. Dissatisfied
  - e. Very dissatisfied
- 8) Do you utilize the GDIT trainings provided by ORR?
  - a. Yes
  - b. No
  - c. Unaware of GDIT trainings
- 9) If yes, how satisfied are you with the quality of training materials provided by GDIT?
  - a. Very satisfied
  - b. Satisfied
  - c. Neither satisfied nor dissatisfied
  - d. Dissatisfied

- e. Very dissatisfied
- 10) Did you utilize the TPS trainings for Case Management Staff?
  - a. Yes
  - b. No
  - c. Unaware of TPS trainings
- 11) If yes, how satisfied are you with the quality of training materials provided by TPS?
  - a. Very satisfied
  - b. Satisfied
  - c. Neither satisfied nor dissatisfied
  - d. Dissatisfied
  - e. Very dissatisfied
- 12) Who provides the majority of required training hours to staff in your program?
  - a. ORR
  - b. GDIT
  - c. TPS
  - d. On-site program management
  - e. On-site trainer
  - f. Agency-wide training department
  - g. Outside training provider

### Training - Needs and Suggestions

- 13) What training topics should the Training and Technical Assistance (TTA) Center prioritize (based on both the needs within your own program and from your observations of the needs across the ORR UC network)? (Select top 3)
  - a. Policies & Procedures
  - b. Legal Authorities (e.g., Flores Settlement Agreement, Saravia Settlement Agreement, Homeland
  - c. Security Act, Trafficking Victims Protection Reauthorization Act of 2008)
  - d. Prevention of sexual abuse (Interim Final Rule on the Standards to Prevent, Detect, and Respond to Sexual Abuse and Sexual Harassment Involving Unaccompanied Children, related policies and procedures, and completing the Assessment for Risk)
  - e. Safety assessments including identifying red flags during the sponsor assessment
  - f. The Family Reunification Packet and sponsor assessment process policies and procedures
  - g. Skills and knowledge of mental health and wellness needs of UC
  - h. Documentation/Writing skills
  - i. Supervisory/Management skills
  - j. Behavior management, including learning of different models of care, and de-escalation strategies
  - k. Staff boundaries
  - Cultural responsiveness with diverse ethnic populations, including Unaccompanied Afghan Minors
  - m. Specific mental health needs or behaviors (e.g., self-harm, suicide, depression, etc.)
  - n. Child Development Considerations and Models of Care (e.g., Tender Age)
  - o. Vicarious trauma and self-care strategies
  - p. Other:

- 14) Which departments, positions, and competencies should the TTA Center prioritize for training (based on both the needs within your own program and from your observations of the need across the ORR UC network)? (Select top 2)
  - a. Case Management
  - b. Clinical
  - c. Program Management
  - d. Milieu/YCW Floor Staff and Supervisors
  - e. Education
  - f. Medical
  - g. Other
- 15) Which training format(s) do you find most beneficial? (Select all that apply)
  - a. Webinars (virtual, instructor-led)
  - b. Virtual classroom training (instructor-led)
  - c. Presentations
  - d. Self-paced training materials
  - e. Interactive multimedia training
  - f. Video presentations
  - g. Simulations, role playing, gaming

#### **Technical Assistance**

- 16) Where do you go to get your questions answered about policy updates, procedural changes, or new ORR guidance? (Select all that apply)
  - a. Guidance documents located on the ORR website or UC Portal (e.g., ORR Policy Guide, UC MAP, Field Guidance)
  - b. Emails distributed by ORR
  - c. UC Policy Mailbox (ucpolicy@acf.hhs.gov)
  - d. FFS
  - e. CFS
  - f. CC
  - g. Other:
- 17) How likely would you be to utilize a resource where you had access to input from subject matter experts on training, internal policy writing, onboarding needs, promising practices across the network, and other technical assistance needs?
  - a. Very likely
  - b. Likely
  - c. Neither likely nor unlikely
  - d. Unlikely
  - e. Very unlikely
- 18) How likely would you be to participate in ORR peer network opportunities, including Learning Circles? These opportunities will connect you with other ORR UC care providers and promote the sharing of experiences and strategies on a variety of topics.
  - a. Very likely
  - b. Likely
  - c. Neither likely nor unlikely
  - d. Unlikely
  - e. Very unlikely

# **Departmental Training Needs**

### Case Management Department

- 19) How many CMs and CM Supervisors in your program have <u>2+ years</u> of experience in this role?
  - a. Greater than 50%
  - b. Less than 50%
  - c. Fairly even split of CM staff with 2+ years of experience
- 20) Which of the following knowledge base areas would be helpful for CMs to receive additional training on? (Select all that apply)
  - a. Understanding the levels of care in the UC care provider network; when it is appropriate to recommend a step up or down
  - b. ORR policies and procedures, how to ensure changes are tracked, learned, and followed
  - c. Learning where and how to validate information, documents, and statements
  - d. Understanding the CM role in the reunification process
  - e. When to seek support and assistance from external stakeholders (including FFS, CC, and CFS)
  - f. Other (please specify):
- 21) Which CM skills or competencies would be helpful for ORR to provide additional trainings on? (Select all that apply)
  - a. Sponsor and minor interview techniques, including family members in home country
  - b. Youth and sponsor engagement to ensure the UC and sponsor assessments are complete and thorough, investigating inconsistencies in stories
  - C. Identifying safety concerns and red flags such as: fraud identification and concerns, unrelated/Cat 3 sponsors, address verification, and UC relationship verification processes
  - d. Documentation/Writing skills
  - e. Serious Incident Report requirements
  - f. Records management
  - g. Creating safety plans with the minor and sponsor
  - h. Coordinating with ORR stakeholders, care providers, CCs, and consulates to make a timely reunification
  - i. Performing background checks
  - j. Validating identity documents through necessary government entities
  - k. Requesting home studies and post-release services
  - Self-care strategies
- 22) What are the most critical training needs of CM Supervisors? (Select all that apply)
  - a. Supporting CMs and tracking cases to ensure quality case processing and submissions without affecting timeliness of the case
  - b. Generalized management/supervisory skills
  - c. Staffing cases with CMs to ensure they capture the most critical information
  - d. Teaching documentation to CMs to ensure it is thorough, easily readable, and succinct
  - e. Supporting CMs in identifying red flags and other safety concerns
  - f. Working effectively with ORR stakeholders
  - g. Identifying and conducting targeted trainings based on CM needs
  - h. Other:

### Clinical Department

- 23) How many Clinicians and Clinical Supervisors in your program have <u>2+ years</u> of experience in this role?
  - a. Greater than 50%
  - b. Less than 50%
  - c. Fairly even split of clinical staff with 2+ years of experience
- 24) Which of the following knowledge base areas would be helpful for Clinicians to receive additional training on? (Select all that apply)
  - a. Understanding the Clinician role in the UC Program
  - b. Vicarious trauma
  - c. Documentation/Writing skills
  - d. Records management
  - e. Developmental considerations of working tender age UC (under 13 years)
  - f. Understanding compound trauma and cognitive delays
  - g. Building clinical recommendations and resources in preparation of release
  - h. Clinical boundaries with UC in residential care
  - i. Other:
- 25) Which Clinician skills or competencies would be helpful for ORR to provide additional trainings on? (Select all that apply)
  - a. Conducting effective risk assessments, trafficking assessments, and depression scales
  - b. Triaging cases for effective placement and case planning
  - c. Crises services, including suicide assessment
  - d. Documentation/Writing skills
  - e. Significant Incident Reporting
  - f. Cognitive behavioral therapy techniques, including grounding and mindfulness techniques, psychoeducation
  - g. Building a therapeutic relationship with UC, including designing a therapeutic space
  - h. De-escalation and self-regulation skills for youth with externalizing behaviors such as aggression
  - i. Group counseling with UC
  - j. Family counseling with UC and sponsors and/or family in home country
  - k. Self-care strategies
  - I. Other:
- 26) What are the most critical training needs of Clinical Supervisors? (Select all that apply)
  - a. Staffing cases with Clinicians to ensure they are addressing needs of each UC
  - b. Working effectively with the Milieu and other departments to ensure the roles of the Clinical department are understood
  - c. Providing a supportive, therapeutic relationship with Clinicians
  - d. Learning models, skills and techniques found effective in other similar environments
  - e. Generalized management/supervisory skills
  - f. Other:

### Milieu Department

- 27) How many Milieu staff in your program have 2+ years of experience in this role?
  - a. Greater than 50%

- b. Less than 50%
- c. Fairly even split of Milieu staff with 2+ years of experience
- 28) What do you find to be the greatest knowledge-based training need for YCW staff? (Select all that apply)
  - a. ORR policies and procedures
  - b. Line of sight and effective transitions
  - c. Trauma knowledge and basic mental health, wellness, and adjustment of UCs
  - d. Learning cultural considerations of UC youth, including the journey
  - e. Documentation writing, SIR training
  - f. Boundaries of YCWs, learning the role of the YCW
  - g. Child development and child welfare knowledge
  - h. Learning to identify own trauma responses in the milieu, self-care
  - i. Behavioral management models and strategies for self-regulation
  - j. Other:
- 29) Which YCW skills or competencies would be helpful for ORR to provide additional trainings on? (Select all that apply)
  - a. De-escalation techniques and skills in responding to a variety of critical situations
  - b. Implementing behavioral management strategies, including alternatives to point/level systems such as collaborative problem solving
  - c. Mindfulness and grounding techniques
  - d. Running effective community meetings
  - e. Planning and organization of recreational and vocational activities
  - f. Cultural responsiveness and intercultural communication when working with UC from different religious, linguistic, and ethnic backgrounds (such as Unaccompanied Afghan Minors)
  - g. Safety needs of UC residential programs
  - h. Planning effective outings
  - i. Self-care strategies
  - i. Other
- 30) What are the most critical training needs of Milieu Supervisors? (Select all that apply)
  - a. Management training
  - b. Child welfare training
  - c. Documentation / writing skills
  - d. Serious Incident Report requirements
  - e. Effective collaboration strategies and communication techniques across departments within the program, including program leadership
  - f. Behavioral Management training and de-escalation strategies
  - g. Learning models, skills and techniques found effective in other similar environments, including safety, medical services, education, recreation, outings
  - h. Other:
- 31) What other departments in your program could use additional training support? (Select all that apply)
  - a. Medical
  - b. Education
  - c. Recreation

- d. Management/Administration
- e. Other (write in)
- f. None
- 32) Is there anything else we should consider regarding departmental/program training needs? (Write in)

# **Behavior Management**

- 33) What Behavior Management model(s) does the program(s) you oversee utilize? (Select all that apply)
  - a. Point/Level system
  - b. Trauma-based organizational models
  - c. Group/Peer models
  - d. Therapeutic models
  - e. Other:
- 34) Does your program frequently accept youth who are stepped down from a higher level of care?
  - a. Yes
  - b. No
  - c. N/A
- 35) Does your program have restrictions (aside from what is required for your level of care) regarding accepting youth with certain behaviors or risks?
  - a. Yes
  - b. No
- 36) If yes, what restrictions do you have?
  - a. Youth with previous disruptive or aggressive behaviors in care facilities
  - b. Youth who are identified escape risks
  - c. Youth with extensive medical needs
  - d. Youth exhibiting behavioral health behaviors (i.e., self-harm, suicidal ideations, anxiety)
  - e. Youth with mental health diagnoses
  - f. Other:
  - g. N/A
- 37) What outcomes of a behavior management system should programs prioritize? (Select top 2)
  - a. Youth engagement and skill building towards self-regulation
  - b. Lower milieu incident rates (ex: runaways, aggression, self-harm, property damage)
  - c. Shorter length-of-stay, faster rate of step-down
  - d. Addressing mental health and trauma
  - e. Safety of youth in the program
  - f. Peer engagement towards community-building
- 38) How effective is your program in meeting those outcomes, as prioritized in the previous question?
  - a. Very effective
  - b. Somewhat effective
  - c. Unsure/neutral
  - d. Not so effective
  - e. Not at all effective

- 39) Would your program benefit from additional training in behavioral management?
  - a. Yes
  - b. No
  - c. Unsure
- 40) Would your program benefit from learning about other behavioral management models?
  - a. Yes
  - b. No
  - c. Unsure
- 41) Taking into consideration questions asked about training and technical assistance needs during this survey, please share any other comments related to what you believe the ORR TTA Center should prioritize: (Write in)