**OFFICE OF REFUGEE RESETTLEMENT**

**unaccompanied Children Program**

HOME STUDY (HS) AND POst Release services (PRS) Monitoring site VISIT GUIDE

NOTE: ORR kindly requests the Program Director complete and return to the ORR/UCP UAC Monitor.

**\*\*For all attachments included in responses sent via email, please password protect documents containing personal identifying information.\*\***

**PROGRAM MANAGEMENT**

1. Describe how the organizational structure ensures effective implementation of home study and post release services.
2. Describe your relationships with:
* ORR headquarters staff
* ORR field staff
* DHS
1. Please describe relationships and communication with community stakeholders. (*i.e. monthly or quarterly stakeholder meetings, taskforce meetings, etc.)*
2. Describe your agency’s supervisory oversight of:
* Case assignments
* Caseworker staff
* Service delivery

**CHILD PROTECTION**

1. Describe your agency’s caseload assignment and ratio requirements for each caseworker.

1. Describe your agency’s policies and procedures for:
* Ensuring and maintaining UAC safety and security (*including prevention of sexual abuse, sexual harassment, and maltreatment*)
* Responding when a child or staff reports maltreatment
* Timely notification of abuse, neglect, abandonment, sexual abuse, harassment, and other forms of inappropriate behavior.

\*Please attach any documentation or state licensing requirements as needed.

**HS and PRS SERVICES**

1. When providing Post Release Services, please describe how your agency addresses the topics listed below for both the UAC and/or Sponsor. How does the agency conduct psychoeducation for each of these needs? Please describe any challenges or barriers your agency has to assisting UAC and/or Sponsors with specific needs.

|  |  |
| --- | --- |
| **Service Area** | ***Description******\*Indicate N/A for not applicable, when necessary*** |
| **Support and/or Education provided to minors and sponsor(s) in the following areas:** |
| **Service Areas** | **Sponsor(s)** | **Minors** |
| **Legal Representation** |  |  |
| **School Enrollment and Attendance** |  |  |
| **Legal Guardianship** |  |  |
| **Medical Services** |  |  |
| **Mental Health Services** |  |  |
| **Social Services** |  |  |
| **Attendance of Legal Proceedings** |  |  |
| **Family Stabilization/Counseling** |  |  |
| **Substance Abuse** |  |  |
| **Gang Prevention** |  |  |
| **Other Services, as needed** |  |  |

1. Describe how caseworkers assesses the overall household safety of the sponsor family when conducting in home HS or PRS visits.

**CASEWORK**

1. Describe the efforts made when trying to locate/engage difficult sponsor families.
2. Provide the name(s) of the lead caseworker(s) (*if applicable*) and list their responsibilities.
3. How is contact with the sponsor and the UAC documented?
4. \*\***If you have sub-recipients,** what is the agency’s process for selecting and assigning HS and PRS referrals to sub-recipients?
5. \*\***If you have sub-recipients**, how does agency staff gather information about local referrals and community resource in specific service areas?

**OTHER SERVICES**

1. What is the agency’s process when a minor runs away from their sponsor? Please describe. How do you decide whether to flag the sponsor in these situations?
2. Describe the policy and procedures regarding trafficking concerns with sponsors and UACs. Provide examples of trafficking concerns identified in the past 12 months.

**QUALITY ASSURANCE/INTERNAL MONITORING**

|  |
| --- |
| 1. Describe how your agency meets ORR requirements for the areas listed below. Please explain how agency staff assess the quality of these areas. Include how often these program areas are monitored and the actions taken when noncompliance is detected.
* Case files
* Home Study Reports
* Post Release Service Reports
* Sponsor assessment
* Conducting sponsor, UAC, and household member interviews
* Personnel files
* Child health and safety policies
* Sexual Abuse Prevention
* Staff trainings
 |

1. Where are open and closed files kept? Who has access to them? Who is responsible for maintaining case files?
2. Please provide a complete listing of PRS cases where services were not in place within the ORR required timeframes.
3. Please provide a complete listing of home studies that lasted more than ten days during the last fiscal year.

**BACKGROUND CHECKS**

1. Provide detailed summary explaining background checks that are completed on staff prior to hire and direct access to UAC.
2. Provide detailed summary explaining background reinvestigation checks that are completed after initial background check clearance for staff. How often?
3. Provide detailed explanation of the documentation in the HR file confirming that the FBI fingerprint check and the child abuse/neglect check have been completed for all staff.
4. Explain how the program determines if subject has resided in another state during five year period prior to hire or start date.
5. Provide the following documentation in ‘password’ protected attachment:
	* 1. list of all staff hired in last two calendar years:
			1. name
			2. position
			3. start date
			4. date PASS FBI fingerprint check
			5. date PASS CA/N check
			6. resident of state for last five years *(yes or no)*
			7. Please note any issues with checks; if staff resided in another state (*indicate when CA/N check PASSED for that state*). Provide an explanation if it was not a ‘PASS’ prior to hire/start date.

To expedite the monitoring process, please e-mail the completed *Monitoring Site Visit Guide* as well as copies of the following materials to [insert e-mail]

1. Geographical areas served;
2. Recent organizational chart of agency staff and full staff list;
3. Community partnerships with stakeholders;
4. List of trainings that all personnel receive annually and, if applicable, explain/specify how these trainings correspond with ORR required trainings;
5. Written HS and PRS policies and procedures, if applicable;
6. The complete file for three recently conducted home studies (*last 90 days*);
7. List of home study cases from fiscal year 20XX (*previous quarter*) with basic UAC biographical information, date of referral, name of ORR referring care provider, date home study completed, the recommendation provided by the agency (negative or positive) and any additional information;
8. Quality assurance procedures and internal monitoring resources for HS and PRS grantees.

**\*\*For agency’s who have sub-recipients:**

1. Recent agency’s headquarter organizational chart and full staff list;
2. Sub-recipient’s HS/PRS policies and procedures (*if different from primary agency*);
3. HS/PRS sub-recipient quality assurance procedures and internal monitoring resources (*if different from primary agency*);Monitoring reports for all HS/PRS sub-recipient providers monitored in fiscal year 20XX and any relevant follow-up;
4. Primary grantee’s HS/PRS desk and on-site monitoring tools (*checklists, questionnaires, internal reports, etc.*);
5. Primary grantee’s home study service provider monitoring schedule from the previous fiscal year and planned monitoring schedule, if available, for fiscal year 20XX.