



ADMINISTRATION FOR  
**CHILDREN & FAMILIES**

Office of Refugee Resettlement | 330 C Street, S.W., Washington, DC 20201  
www.acf.hhs.gov/programs/orr

**NOTICE OF ADMINISTRATIVE REVIEW**

Dear **Mr./Ms. [INSERT Full Name OF Unaccompanied Child]:**

On **[DATE]**, you requested a reconsideration of your placement in a **[secure care provider, staff secure, Residential Treatment Center (RTC)]**. A panel of three senior level staff members from the Office of Refugee Resettlement (ORR), called the Placement Review Panel (PRP), will review the decision to place you in a restrictive setting. None of the panel members will have been involved in the original decision to place you or continue your placement at the current facility. The panel will determine whether there is enough information to support your continued placement at your current facility.<sup>1</sup>

Prior to proceeding with the PRP, please be aware of the following:

- You may have an attorney represent you and/or assist you with the PRP process.
- If you have not done so already, you should talk to an attorney (legal representative) and/or Child Advocate. If you do not have an attorney or child advocate, your Case Manager will refer you to a legal services provider to assist you.
- You and/or your representative (attorney or child advocate) will be provided a copy of your entire case file. In addition, you and/or your representative will be provided a copy of the written documents that the program and Federal Field Specialist (FFS) relied upon to decide your current placement. These documents are called the Evidentiary Record.
- You and/or your representative (attorney or child advocate) will have an opportunity to provide a written statement supporting your position.
- You and/or your representative (attorney or child advocate) can request an optional hearing, where you or your representative can make verbal statements, call witnesses, and ask questions.

There are two options for the PRP's review of your placement. One option is to ask the PRP to decide based only on the written documents (the Evidentiary Record and your Written Statement). The second option is for the PRP to review both the written documents (Evidentiary Record and your Written Statement) and to hold a hearing. Directions for both options are described below.

<sup>1</sup> You may review the ORR policies on placement in the ORR Unaccompanied Children Program Policy Guide, Section 1: Placement in ORR Care Provider Facilities, available at <https://www.acf.hhs.gov/orr/resource/children-entering-the-united-states-unaccompanied-section-1#1.1>.

THE PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13) STATEMENT OF PUBLIC BURDEN: The purpose of this information collection is to provide notice of receipt of a Placement Review Panel request and information on next steps to take when requesting a reconsideration of the UC's placement in a restrictive setting, and request information needed by ORR to conduct the placement review from the UC or their representative. Public reporting burden for this collection of information is estimated to average 0.83 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. This is a mandatory collection of information (Flores v. Reno Settlement Agreement, No. CV85-4544-RJK (C.D. Cal. 1996)). 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 0970-0554 and the expiration date is 04/30/2023. If you have any comments on this collection of information please contact UCPolicy@acf.hhs.gov.

### **Option One: Review of Written Documents Only**

In this option, the PRP decides solely on the written information provided by you, the program, and the FFS. We include copy of the program and FFS' Evidentiary Record for your and/or your representative's review. Please send your Written Statement to the PRP by **[DATE]**. You can send your Written Statement to the PRP by either asking your representative to email it to [uchearings@acf.hhs.gov](mailto:uchearings@acf.hhs.gov) or providing a copy to your Case Manager, who will email the document to the PRP on your behalf.

The panel will provide you with their decision within seven (7) days of receiving your Written Statement. The panel may deny your request by affirming the FFS' decision to maintain your current placement, remand your request to the FFS for further consideration, or grant your request by directing that you be transferred to a different level of care. The panel's decision will include a brief written explanation supporting their determination.

### **Option Two: Review of Written Documents and Participation in an Optional Hearing**

In addition to providing the written documents described above, you can request an optional hearing via video conference. The hearing enables you and/or your representative to provide testimony and ask question of witnesses before the panel. The FFS responsible for determining your continued placement at your current facility will be present and have an opportunity to offer evidence and question you or any witnesses present. You will also have an opportunity to ask the FFS questions. A decision will be provided by the panel within seven (7) days of the hearing.

If you would like a hearing, your representative should notify the PRP at the time that they send the written documents to [uchearings@acf.hhs.gov](mailto:uchearings@acf.hhs.gov). If you do not have a representative, ask your Case Manager to notify the PRP at the time that they provide your written documents to the PRP on your behalf.

### **Your Next Steps**

1. Send your Written Statement and decision whether to request a Hearing to [uchearings@acf.hhs.gov](mailto:uchearings@acf.hhs.gov) by **[DATE]**.
2. For those requesting a Hearing, please provide the information below.
  - a. The name, email address, and telephone number for the attorney or child advocate that will represent you.
  - b. Your preferred language
  - c. Whether you will need an interpreter (or if your representative will provide an interpreter for you).
  - d. The names and email addresses for the witnesses you plan to call at the hearing.
  - e. Whether you have any special needs.