Notification of Concern (Form A-7)

Section (PRS App)	Field (PRS App)	Field (PDF Form)	Section (PDF Form)	Modifications	Notes
Submission Details *Fields that appear in this section depend upon the user type*	Status *Draft* *Pending supervisor approval* *Approved by supervisor* *Certified and submitted*	n/a	n/a	Added	System-generated based on workflow
	Completed	Date of Report Submission	Released Child Information	Reworded; Changed field type	System-generated based on workflow (previously entered manually)
	PRS case manager	n/a	n/a	Added	Displayed conditionally based on user role, autopopulated based on workflow (pulled from user account information)
	Supervisor review	n/a	n/a	Added	System-generated based on workflow
	Supervisor	n/a	n/a	Added	Displayed conditionally based on user role, autopopulated based on workflow (pulled from user account information)
	Submitted	Date of Report Submission		View-only	System-generated based on workflow
	Verified By	n/a	n/a	Added	Autopopulated based on workflow (pulled from user account information)
	PRS Provider	n/a	n/a	Added	Displayed conditionally based on user role, autopopulated based on workflow (pulled from user account information)
	Subcontractor	n/a	n/a	Added	Displayed conditionally based on user role, autopopulated based on workflow (pulled from user account information)
	Reporter Information	Reporter Name	Released Child Information	Reworded	Displayed conditionally based on user role, autopopulates name, organization, email, and phone based on workflow
		Reporting Organization Type *Care Provider* *ORRNCC* *PRS Provider*			
		Reporter E-mail			
		Reporter Phone			
	Assessment Comments	n/a	n/a	Added	Appears in drawer after supervisor user clicks "Request edits" (replaces emailing comments to PRS case manager)
	Do you, [Current User Name] ([Current User Organization]), verify and submit this assessment to ORR?	n/a	n/a	Added	Appears in drawer after user clicks "Certify and submit" (replaces emailing final form to ORR)
Child Information	Child name	Child Name	Released Child Information	Changed field type	Autopopulated, not editable (previously entered manually)
	A#	A# (no spaces or dashes)	Released Child Information	Reworded; Changed field type	Autopopulated, not editable (previously entered manually)
	Also known as (AKA)	n/a	n/a	Added	Autopopulated (pulled from existing data in UC Portal approved under OMB 0970-0553), not editable
	Date of birth	Date of Birth	Released Child Information	Changed field type	Autopopulated (pulled from existing data in UC Portal approved under OMB 0970-0553), not editable (previously entered manually)
	Age	Age	Released Child Information	Changed field type	Autopopulated (pulled from existing data in UC Portal approved under OMB 0970-0553), not editable (previously entered manually)
	Gender	Gender	Released Child Information	Changed field type	Autopopulated (pulled from existing data in UC Portal approved under OMB 0970-0553), not editable (previously entered manually)
	Country of birth	Country of Birth	Released Child Information	Changed field type	Autopopulated (pulled from existing data in UC Portal approved under OMB 0970-0553), not editable (previously entered manually)
	Discharge date	Date of Discharge	Released Child Information	Reworded; Changed field type	Autopopulated (pulled from existing data in UC Portal approved under OMB 0970-0553), not editable (previously entered manually)
	Care provider facility	Care Provider Name	Released Child Information	Reworded; Changed field type	Autopopulated (pulled from existing data in UC Portal approved under OMB 0970-0553), not editable (previously entered manually)

	Phone number	n/a	n/a	Added	Autopopulated (pulled from existing data in UC Portal approved under OMB 0970-0553), not editable
Sponsor Information	Sponsor name	Sponsor Name	Sponsor Information	Changed field type	Autopopulated (pulled from existing data in UC Portal approved under OMB 0970-0553), not editable (previously entered manually)
	Sponsor category	Sponsor Category *Category 1* *Category 2A* *Category 2B* *Category 3*	Sponsor Information	Changed field type	Autopopulated (pulled from existing data in UC Portal approved under OMB 0970-0553), not editable (previously entered manually)
	Sponsor relationship to child	Relationship to Child	Sponsor Information	Reworded; Changed field type	Autopopulated (pulled from existing data in UC Portal approved under OMB 0970-0553), not editable (previously entered manually)
	Date of birth	n/a	n/a	Added	Autopopulated (pulled from existing data in UC Portal approved under OMB 0970-0553), not editable
	Gender	n/a	n/a	Added	Autopopulated (pulled from existing data in UC Portal approved under OMB 0970-0553), not editable
	Country of birth	n/a	n/a	Added	Autopopulated (pulled from existing data in UC Portal approved under OMB 0970-0553), not editable
	Address	Address	Sponsor Information	Changed field type	Autopopulated (pulled from existing data in UC Portal approved under OMB 0970-0553), not editable (previously entered manually)
	City	City	Sponsor Information	Changed field type	Autopopulated (pulled from existing data in UC Portal approved under OMB 0970-0553), not editable (previously entered manually)
	State *dropdown options for 50 states + DC*	State *dropdown options for 50 states + DC*	Sponsor Information	Changed field type	Autopopulated (pulled from existing data in UC Portal approved under OMB 0970-0553), not editable (previously entered manually)
	Zip code	Zip Code	Sponsor Information	Changed field type	Autopopulated (pulled from existing data in UC Portal approved under OMB 0970-0553), not editable (previously entered manually)
	Primary phone	n/a	n/a	Added	Autopopulated (pulled from existing data in UC Portal approved under OMB 0970-0553), not editable
	Backup phone number	n/a	n/a	Added	Autopopulated (pulled from existing data in UC Portal approved under OMB 0970-0553), not editable
	Do you plan to enter a flag in UC Portal? *Yes* *No*	Reporter Entered/Will Enter Sponsor Flag? *Yes* *No* Reporter Entered/Will Enter Address Flag? Yes No	Sponsor Information	Reworded; Merged fields	
	Date of event	Date of Event	Event Details	No change	
	Date reporting party informed of event	Date Reporting Party Informed of Event	Released Child Information	Changed location	
	Location of Event *Sponsor's home* *Foster or group home (not run by UC Bureau)* *Community* *Care provider facility* *Out-of-network placement* *Department of Homeland Security (DHS) custody* *Country of origin* *Journey to U.S.* *U.S. Interior (before entering DHS or ORR custody)*	Location of Event *Care Provider Facility* *Group Home* *Foster Home* *Community (field trip outside the foster home)* *Out-of-Network Placement* *DHS Custody* *Country of Origin* *Journey to U.S.* *U.S. Interior (not in DHS or ORR custody)*	Event Details	Changed dropdown options	

Event Details	***Only appears if user selects Foster or group home (not run by UC Bureau)***				
	Specify foster or group home program	n/a	n/a	Added	Displayed conditionally, follow-up question to Location of Event (currently entered in Summary of Incident field)
	Specify type of foster or group home *Unaccompanied Refugee Minors (URM) Program* *State-licensed* *Local social services agency* *Other*	n/a	n/a	Added	Displayed conditionally, follow-up question to Location of Event (currently entered in Summary of Incident field)
	Other type of foster or group home	n/a	n/a	Added	Displayed conditionally, follow-up question for additional details is user selects "other" for Specify type of foster or group home
	Only appears if user selects Community				
	Specify type of community location *Hospital or other medical facility* *School* *Religious institution* *Field Trip* *Off-site appointment* *Other*	n/a	n/a	Added	Displayed conditionally, follow-up question to Location of Event (currently entered in Summary of Incident field)
	Other type of community location	n/a	n/a	Added	Displayed conditionally, follow-up question for additional details is user selects "other" for Specify type of community location
	Only appears if user selects Care provider facility				
	Specify care provider facility	n/a	n/a	Added	Displayed conditionally, follow-up question to Location of Event (currently entered in Summary of Incident field)
	Specify type of care provider facility *Congregate care* *Group home* *Individual foster home*	n/a	n/a	Added	Displayed conditionally, follow-up question to Location of Event (currently entered in Summary of Incident field)
	Only appears is user select Congregate care Specify location in care provider facility *Dining facility* *Dormitory area* *Medical area* *Recreational area* *Restroom or shower* *School area* *Other*	Specify Location if Event Occurred: at Care Provider *Dining Facility* *Dormitory Area* *Field Trip* *Medical Facility* *Off-site Appointment* *Recreational Area* *Restroom or Shower* *School Area* *Other*	Event Details	Reworded; Changed dropdown options	Displayed conditionally, follow-up question to Location of Event
	Other location in care provider facility	n/a	n/a	Added	Displayed conditionally, follow-up question for additional details is user selects "other" for Specify location in care provider facility
	Only appears is user selects Out-of-network placement				
	Specify out-of-network facility	n/a	n/a	Added	Displayed conditionally, follow-up question to Location of Event (currently entered in Summary of Incident field)
	Only appears if user selects Department of Homeland Security (DHS) custody				
	Specify type of Department of Homeland Services (DHS) custody *Customs and Border Patrol (CBP) custody* *U.S. Immigration and Customs Enforcement (ICE) custody* *Unknown*	Specify Location if Event Occurred: in DHS Custody *CBP Custody* *ICE Custody* *Unknown*	Event Details	Reworded; Changed dropdown options	Displayed conditionally, follow-up question to Location of Event
	Synopsis of event	Synopsis of Event	Event Details	No change	
	Is the child living with their sponsor? *Yes* *No*	n/a	n/a	Added	Question allows app to dynamically display address on file when applicable
	Is the child still living at the address on file? *Yes* *No*	n/a	n/a	Added	Question allows app to dynamically display address on file when applicable

Placement	What changed? *With alternate caregiver (ACG) or non-sponsor* *Living independently* *Known runaway* *Returned to home country* *Location unknown* *Other*	n/a	n/a	Added	Displayed conditionally, follow-up question to Is the child living with their sponsor? and Is the child still living at the address on file?
	More information about unknown location	n/a	n/a	Added	Displayed conditionally, follow-up question to Is the child living with their sponsor? and Is the child still living at the address on file?
	Other change	n/a	n/a	Added	Displayed conditionally, follow-up question for additional details is user selects "other" for What changed?
	Who are they living with?				
	First Name	Caregiver Name	Primary Caregiver Information	Reworded; Split into two fields; Changed formatting	Displayed conditionally; displaying as card to improve user experience
	Last Name				
	Relationship to child	n/a	n/a	Added	Displayed conditionally; displaying as card to improve user experience, follow-up question to First Name and Last Name
	Phone number	n/a	n/a	Added	Displayed conditionally; displaying as card to improve user experience, follow-up question to First Name and Last Name
	Where are they living?				
	Address	Address	Primary Caregiver Information	Changed formatting	Displayed conditionally; displaying as card to improve user experience
	City	City	Primary Caregiver Information	Changed formatting	Displayed conditionally; displaying as card to improve user experience
	State *dropdown options for 50 states + DC*	State *dropdown options for 50 states + DC*	Primary Caregiver Information	Changed formatting	Displayed conditionally; displaying as card to improve user experience
	Zip code	Zip Code	Primary Caregiver Information	Changed formatting	Displayed conditionally; displaying as card to improve user experience
Incident Information	Notification of concern category	Notification of Concern Category	Incident Information	No change	No change to any category or subcategory checkbox options
	How was this child involved? *Victim* *Alleged Perpetrator* *Witness* *Reporter* *Other*	How was this child involved? *Victim* *Alleged Perpetrator* *Witness* *Reporter* *Other*	Incident Information	No change	
	Other way the child was involved	n/a	n/a	Added	Displayed conditionally, follow-up question for additional details is user selects "other" for How was this child involved?
Alleged Perpetrator(s)	Add alleged perpetrator	n/a	n/a	Added functionality	Button created new card with below fields; enable addition of multiple alleged perpetrators if more than one exists
	Full name of alleged perpetrator	n/a	n/a	Added	Displayed conditionally, follow-up question to Type of Alleged Perpetrator (currently entered in Summary of Incident field)
	Type of alleged perpetrator *Care provider staff* *HS/PRS provider staff* *Sponsor* *Released child or another UC* *Other child (non-UC)* *Non-staff adult* *Other*	Alleged Perpetrator *Program Staff* *UC or Released Child* *Other Child* *Non-Staff Adult* *Other*	Incident Information	Reworded; Changed dropdown options	Displayed conditionally
	Other type of alleged perpetrator	n/a	n/a	Added	Displayed conditionally, follow-up question for additional details is user selects "other" for Type of Alleged Perpetrator
	Remove	+ / -	Incident Information	Added functionality	Deletes card
Incident Summary and Response	Summary of incident	Summary of Incident	Incident Information	No change	
	PRS case manager response and intervention	Case Worker Response and Intervention	Incident Information	Reworded	

Agencies Contacted *Split Persons/Agencies Contacted table into two separate sections*	Add agency contacted	+ / -	Incident Information	Reworded	Button created new card with below fields
	Agency name	Agency or Person (Title)	Incident Information	Reworded	Displayed conditionally
	Type of agency *Local law enforcement* *CPS* *NCMEC* *Residential staff* *Other*	Type of Agency *Local Law Enforcement* *CPS* *NCMEC* *Residential Staff* *Other*	Incident Information	No change	Displayed conditionally
	Other type of agency	n/a	n/a	Added	Displayed conditionally, follow-up question for additional details is user selects "other" for Type of Agency
	Date reported	Date Reported	Incident Information	No change	Displayed conditionally
	Case number	Case Number	Incident Information	No change	Displayed conditionally
	State *dropdown options for 50 states + DC*	State *dropdown options for 50 states + DC*	Incident Information	No change	Displayed conditionally
	Phone number	Phone Number	Incident Information	No change	Displayed conditionally
	Email	n/a	n/a	Added	Displayed conditionally, follow-up question to Agency Name
	Remove	+ / -	Incident Information	Reworded	Deletes card
Persons Contacted *Split Persons/Agencies Contacted table into two separate sections*	Add person contacted	+ / -	Incident Information	Reworded	Button created new card with below fields
	Full name and title	Agency or Person (Title)	Incident Information	Reworded	Displayed conditionally
	Type of agency *Local law enforcement* *CPS* *NCMEC* *Residential staff* *Other*	Type of Agency *Local Law Enforcement* *CPS* *NCMEC* *Residential Staff* *Other*	Incident Information	No change	Displayed conditionally
	Other type of person	n/a	n/a	Added	Displayed conditionally, follow-up question for additional details is user selects "other" for Type of Agency
	Date reported	Date Reported	Incident Information	No change	Displayed conditionally
	Phone number	Phone Number	Incident Information	No change	Displayed conditionally
	Email	n/a	n/a	Added	Displayed conditionally, follow-up question to Full Name and Title
	Remove	+ / -	Incident Information	Reworded	Deletes card
Addendum	n/a	+ / -	Addendums	Removed	Instead of updating the PDF form and entering adding a description of the change in the Addendums table, users now have a separate interface to enter addendums. The interface includes the same workflow submission process as the initial form submission and only sections of form that can be updated. See Addendum tab in this workbook for details.
	Completed	Addendum Date	Addendums	Reworded	
	Addendum description	Addendum Description	Addendums	No change	

Notification of Concern (Form A-7) - Addendum

Instead of updating the PDF form and entering adding a description of the change in the Addendums table, users now have a separate interface to enter addendums. The interface includes the same workflow submission process as the initial form submission and only sections of form that can be updated.

Section (PRS App)	Field (PRS App)
Addendum	Addendum description
Submission Details *Fields that appear in this section depend upon the user type*	Status *Draft* *Pending supervisor approval* *Approved by supervisor* *Certified and submitted*
	Completed
	PRS case manager
	Supervisor review
	Supervisor
	Submitted
	Verified By
	PRS provider
	Subcontractor
	Reporter Information
	Assessment Comments
	Do you, [Current User Name] ([Current User Organization]), verify and submit this assessment to ORR?
	Is the child living with their sponsor? *Yes* *No*
	Is the child still living at the address on file? *Yes* *No*

Updates to Placement	What changed? *With alternate caregiver (ACG) or non-sponsor* *Living independently* *Known runaway* *Returned to home country* *Location unknown* *Other*
	More information about unknown location
	Other change
	Who are they living with?
	First Name
	Last Name
	Relationship to child
	Phone number
	Where are they living?
	Address
	City
	State *dropdown options for 50 states + DC*
	Zip code
Updates to Incident Information	Notification of concern category
	How was this child involved? *Victim* *Alleged Perpetrator* *Witness* *Reporter* *Other*
	Other way the child was involved
	Add agency contacted
	Agency name
	Type of agency *Local law enforcement* *CPS* *NCMEC* *Residential staff* *Other*

Additional Agencies Contacted *Split Persons/Agencies Contacted table into two separate sections*	Other type of agency
	Date reported
	Case number
	State *dropdown options for 50 states + DC*
	Phone number
	Email
	Remove
Additional Persons Contacted *Split Persons/Agencies Contacted table into two separate sections*	Add person contacted
	Full name and title
	Type of agency *Local law enforcement* *CPS* *NCMEC* *Residential staff* *Other*
	Other type of person
	Date reported
	Phone number
	Email
	Remove