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Office of Information and Regulatory Affairs (OIRA)
Office of Management and Budget (OMB)

From: Kirsten Buckley
Unaccompanied Children Bureau
Administration for Children and Families (ACF)

Date: October 4, 2024

Subject: NonSubstantive Change Request – Medical Assessment Form and Dental Assessment Form (OMB #0970-0466) and Mental Health Assessment Form and Public Health Investigation Form: Non-TB Illness, and Public Health Investigation Form: Active TB (OMB #0970-0509)

This memo requests approval of nonsubstantive changes to two approved information collection, Medical Assessment Form and Dental Assessment Form (OMB #0970-0466) and Mental Health Assessment Form and Public Health Investigation Form: Non-TB Illness, and Public Health Investigation Form: Active TB (OMB #0970-0509).

Background

The following two Administration for Children and Families (ACF) Office of Refugee Resettlement (ORR) information collections capture health data on children in ORR care:

- Medical Assessment Form and Dental Assessment Form
- Mental Health Assessment Form and Public Health Investigation Form: Active TB, and Public Health Investigation Form: Non-TB Illness.

ORR has recently identified a specific need to share data collected on ORR's health assessment forms that falls outside of the stated limitations with the Department of Homeland Security (DHS). The need to communicate with DHS occurs when a newly referred child arrives at an ORR facility ill or requires emergent/urgent healthcare services shortly after placement and ORR was not notified in advance. For DHS to investigate the event, ORR must share confidential and sensitive health information including the child's alien number, name, signs/symptoms, diagnoses, and date of diagnosis. Prior to sharing mental health information with DHS, ORR will request consent from the child. The goal of this data sharing effort is to identify areas of potential improvement in delivery of healthcare services and continuity of care for children transferred from DHS to HHS custody.

Currently, there is specific language in the Supporting Statements describing limitations on data sharing that limits ORR's ability to fulfill this need. ORR has discussed the need to update this language with OMB and as a result ORR published a notice in the *Federal Register* (89 FR 54829) on July 2, 2024 announcing a 30-day period for the public to comment on the proposed changes. No comments were received, and we are now submitting the updated Supporting Statement A for final review and approval.

Overview of Requested Changes

This request is to update Supporting Statement A to allow ORR to share relevant health data captured on ORR's information collections with DHS for investigative purposes when it has been reported that a newly referred unaccompanied child has arrived ill into ORR custody or required emergent/urgent healthcare shortly after placement and ORR was not notified in advance.

The yellow highlighted text in the language below has been added to the sections 10 and 11 of the currently approved Supporting Statements for both information collections. The blue highlighted text has only been added to OMB #0970-0509:

- **Section 10:**

"ORR established a system of records to ensure the level of confidentiality pursuant to the Privacy Act. 5 U.S.C. 552a. ORR's system of records notice was titled "09-80-0321 ORR Division of Children's Services Records" and published on July 18, 2016, at 81 FR 46682.

Deidentified data is shared with stakeholders (e.g., Department of Health and Human Services leadership, Congress, the CDC) on an ad hoc basis several times a year. Examples of shared data include immunization rates, COVID-19 case numbers, and the number of children in isolation. Confidential information is shared with relevant stakeholders for public health purposes (e.g., contact investigations of reportable infectious diseases) and with the Department of Homeland Security (DHS) when a newly referred child arrives at an ORR facility ill or requires emergent/urgent healthcare services shortly after placement and ORR was not notified in advance. For DHS to investigate the event, ORR must share confidential and sensitive health information including the child's alien number, name, signs/symptoms, diagnoses, and date of diagnosis. Prior to sharing mental health information with DHS, ORR will request consent from the child. The goal of this data sharing effort is to identify areas of potential improvement in delivery of healthcare services and continuity of care for children transferred from DHS to HHS custody.

- **Section 11:**

"ORR collects sensitive health information on medical and social history, signs/symptoms, mental health status, lab results and diagnoses to monitor, counsel, and treat children as directed by the Flores Settlement Agreement. Health evaluations are performed in an opt-out manner where questions are asked, but children have the right to refuse to respond. Recorded information becomes part of the child's health record and is viewable only to care provider program staff who are directly responsible for the child, ORR field-based program managers, and ORR federal staff. Sensitive health information may be shared with DHS for investigative purposes when a newly referred child arrives at an ORR facility ill or requires emergent/urgent healthcare services shortly after placement and ORR was not notified in advance. Children are provided with copies of their health records at the time of discharge from ORR custody with the

expectation that collected information will be shared with their new healthcare providers."

Time Sensitivities

To ensure appropriate continuity of care of children in federal custody, ORR must begin sharing data with the DHS as soon as possible.