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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  |  |  |  | | --- | --- | --- | --- | --- | | **Main Case Status Page*****Located on the Case File Landing Page*** | | | | | | **UAC Basic Information** | | | | | | Photo of Child | **First Name:** | *(Auto populate)* | **AKA:** | *(Auto populate)* | | **Last Name:** | *(Auto populate)* | **Status:** | *(Auto populate)* | | **Date of Birth:** | *(Auto populate)* | **Admitted Date:** | *(Auto populate)* | | **A#:** | *(Auto populate)* | **Length of Stay:** | *System Generated* | | **Country of Birth:** | *(Auto populate)* | **Current Program:** | *(Auto populate)* | | **Sex:** | *(Auto populate)* | **Portal ID:** | *(Auto populate)* | | **Physical Location of the Child:** | | *(Auto populate –* [*Source UC Portal Discharge Tab)*](#LocatioOfChildAppendix) | | |
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| **>| Go to Intakes**  **>| Go to Admission**  **>| Go to Child-Level Event**  **>| Go to Health**  **>| Go to Assessments**  **>| Go to Discharge** |
| **UAC Case Status** |

|  |  |  |  |  |  |  |  |  |
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| **Child Assessments** | | | | | | | | |
| **Initial Intakes Assessment** | | **Last Updated:** | | | *(Auto populate)* | | | |
| **Assessment For Risk** | | **Last Updated:** | | | *(Auto populate)* | | | |
| **UAC Assessment** | | **Last Updated:** | | | *(Auto populate)* | | | |
| **Medical** | | | | | | | | |
| **Initial Medical Exam** | | **Date Evaluated:** | | | *(Auto populate)* | | | |
| **TB Screening** | | **Outcome:** | | | *(Auto populate)* | | | |
| **Immunizations (IME Only)** | | **Last Updated:** | | | *(Auto populate)* | | | |
| **Home Study and Post-Release Service Cases** | | | | | | | | |
| **Home Study** | **Type of Home Study:** | | *(Auto populate)* | **Date Referred:** | | *(Auto populate)* | **Date Accepted:** | *(Auto populate)* |
| **Post Release Services** | **Type of PRS:** | | *(Auto populate)* | **Date Referred:** | | *(Auto populate)* | **Date Accepted:** | *(Auto populate)* |

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Act of 1995, unless it displays a currently valid 0MB control number. If you have any comments on this collection of information please contact UACPolicy@acf.hhs.gov.

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| **Family Reunification** | | | | |
| **Sponsor** | *(Auto Populate NAME)* | | | |
| **Sponsor Assessment** | **Date Completed:** | <Pop up Calendar> | | |
| **Family Reunification Application Sent to Sponsor** | **Date Sent:** | <Pop up Calendar> | **Date Received:** | <Pop up Calendar> |
| **Authorization For Release of Information (ARI)** | **Date Received:** | <Pop up Calendar> **c N/A** | | |
| **Proof of Sponsor Identity** | **Date Completed:** | <Pop up Calendar> | | |
| **Proof of Sponsor Address** | **Date Completed:** | <Pop up Calendar> | | |
| **Proof of Relationship Between UAC and Sponsor** | **Date Completed:** | <Pop up Calendar> | | |
| **Concurrent Planning: Additional Potential Sponsors**   |  |  | | --- | --- | | **Potential Sponsor Name:**  *(Auto populate)* | **Relationship to child:**  *(Auto populate)* | |  | **Sponsor Category:**  *(Auto populate)* | | | | | |
|  | | | | |
| **Household Members**   |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | | *(Auto Populate NAME)* | | | | | | | | **Authorization For Release of Information (ARI)        Date Received:                 c N/A**  *<Popup Calendar>* |  |  |  |  |  |  | | | | | |
|  | | | | |
| **Alternate Adult Caregiver** | | | | |
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| |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | | *(Auto Populate NAME)* | | | | | | | | **Authorization For Release of Information (ARI)        Date Received:                 c N/A**  *<Popup Calendar>* |  |  |  |  |  |  | | | | | |

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| **Background Checks** |
| [**Sponsor**](https://uacportalstaging.acf.hhs.gov/CaseStatus.aspx)**/** [**Adult Household Members & Alternate Adult Caregiver**](https://uacportalstaging.acf.hhs.gov/CaseStatus.aspx)  *(Auto populate)*  **Sponsor/ Alternate Adult Caregiver Name:**  **Background Checks**   |  |  |  |  | | --- | --- | --- | --- | | **Type** | **Date Requested** | **Date Results Received** | **Results**  **Results Options:** Clear; Appears Clear; Not Clear; Referred to FFS | | **Internet Criminal** | *(Auto populate)* | *(Auto populate)* | *(Auto populate)* | | **Sex Abuse History** | *(Auto populate)* | *(Auto populate)* | *(Auto populate)* | | **CA/N** | *(Auto populate)* | *(Auto populate)* | *(Auto populate)* | | **FBI Criminal History** | *(Auto populate)* | *(Auto populate)* | *(Auto populate)* |   **FBI Criminal History Fingerprinting Details**   |  |  |  | | --- | --- | --- | | Method of Fingerprinting: | **<Dropdown Menu>** (-- Select Method --  *FieldPrint;  ORR Digital Site;  Paper Fingerprint Card;* ) |  | |  | | | | |  |  |  | | --- | --- | --- | | **<OPTION 1 POP-UP> FieldPrint** | | | | First available FieldPrint fingerprint appointment\* | Date available: | *<Popup Calendar>* | | Accepted FieldPrint fingerprint appointment | Date of appointment: | *<Popup Calendar>* | | | | |  | | | | |  |  |  | | --- | --- | --- | | **<OPTION 2 Pop-Up> ORR Digital Site** | | | | First available ORR Digital Site fingerprint appointment\* | Date available: | *<Popup Calendar>* | | Accepted ORR Digital Site fingerprint appointment | Date of appointment: | *<Popup Calendar>* | | ID sent to ORR Digital Site | Date sent: | *<Popup Calendar>* | | ARI sent to ORR Digital Site | Date sent: | *<Popup Calendar>* | | | | |  | | | | |  |  |  | | --- | --- | --- | | **<OPTION 3 POP-UP> Paper Fingerprint Card** | | | | Fingerprint cards sent to adult by case manager | Date sent: | *<Popup Calendar>* | | Complete fingerprint cards received by PSC | Date received: | *<Popup Calendar>* | | | | | **>|Save** | | | |

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| **Legal** | | |
| **Know Your Rights Presentation:** | **Date Completed:** | *(Auto populate)* |
| **Legal Screening:** | **Date Completed:** | *(Auto populate)* |

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| **Release Recommendations** | | | | |
| **Case Manager Release Request:** | **Last Updated:** | *(Auto populate)* | | |
| **Case Coordination Release Request:** | **Last Updated:** | *(Auto populate)* | | |
| **ORR Release Request Decision:** | **Last Updated:** | *(Auto populate)* | **Release Approved:** | *(Auto populate)* |

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| **Case Manager Information** |
| **c Update my Information** |
| **Primary Case Manager Information** |
| |  |  |  |  | | --- | --- | --- | --- | | **Primary Case Manager Name:**  *(Auto populate)* |  | **Assigned on:** | *(System Generated)* | | **Primary Case Manager Email Address:**  *(Auto populate)* |  | | | | **Primary Case Manager Phone Number:**  *(Auto populate)* |  | | | | **Primary Case Manager Organization:**  *(Auto populate)* |  | | | |
| **Back-up Case Manager**   |  |  |  |  | | --- | --- | --- | --- | | **Back-up Case Manager Name:**  *(Auto populate)* |  | **Assigned on:** | *(System Generated)* | | **Back-up Case Manager Email Address:**  *(Auto populate)* |  | | | | **Back-up Case Manager Phone Number:**  *(Auto populate)* |  | | | | **Back-up Case Manager Organization:**  *(Auto populate)* |  | | |   **Previous Case Manager Information** |
| |  |  |  |  | | --- | --- | --- | --- | | **Previous Case Manager Name:**  *(Auto populate)* |  | **Assigned on:** | *(System Generated)* | | **Previous Case Manager Email Address:**  *(Auto populate)* |  | | | | **Previous Case Manager Phone Number:**  *(Auto populate)* |  | | | | **Case Manager Organization:**  **Previous**  *(Auto populate)* |  | | |   **ALTERNATIVE: // There is no Previous Case Manager associated with the UAC//** |

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| **Unification Specialist Information** | | | | | |
| **c Update my Information** | | | | | |
| **Primary Unification Specialist Information** | | | | | |
| **Primary Unification Specialist Name** | *(Auto Populate)* | | **Assigned On** | | *(Auto Populate)* |
| **Primary Unification Specialist Email Address:** | | | *(Auto Populate)* | | |
| **Primary Unification Specialist Phone Number:** | | | *(Auto Populate)* | | |
| **Primary Unification Specialist Organization:** | | | *(Auto Populate)* | | |
| **Previous Unification Specialist** | | | | | |
| **Previous Unification Specialist Name** | *(Auto Populate)* | **Assigned On** | | *(Auto Populate)* | |
| **Previous Unification Specialist Email Address:** | | *(Auto Populate)* | | | |
| **Previous Unification Specialist Phone Number:** | | *(Auto Populate)* | | | |
| **Previous Unification Specialist Organization:** | | *(Auto Populate)* | | | |

## **Location of Child Appendix**

***Located on the UAC Portal Discharge Tab***

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| --- | --- | --- | --- | --- |
| **UAC Basic Information** | | | | |
| Photo of Child | **First Name:** | *(Auto Populate)* | **AKA:** | *(Auto Populate)* |
| **Last Name:** | *(Auto Populate)* | **Status:** | *(Auto Populate)* |
| **Date of Birth:** | *(Auto Populate)* | **Admitted Date:** | *(Auto Populate)* |
| **A#:** | *(Auto Populate)* | **Length of Stay:** | *System Generated* |
| **Country of Birth:** | *(Auto Populate)* | **Current Program:** | ***<Dropdown Menu>*** |
| **Sex:** | *(Auto Populate)* | **Portal ID:** | *(Auto Populate)* |
| **>| Go to Health**  **>| Go to Child-Level Event**  **>| Go to Intakes**  **>| Go to Admission**  **>| Go to Case Mgt.** | | | | |

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| **Assessments** | | |
| {+/-} | **Current Location of the Child**     |  |  |  |  | | --- | --- | --- | --- | | **Location Type** | **Name** | **Address** | **Last Updated** | | **<Dropdown Menu>** (-Select One-*Post Release Address Update[[1]](#footnote-3); Program[[2]](#footnote-4); Reported Missing Post Release[[3]](#footnote-5))* | **AUTOPOPULATE** *WHEN LOCATION TYPE = “PROGRAM”* | **AUTOPOPULATE** *WHEN LOCATION TYPE = “PROGRAM”* | **AUTOPOPULATE** | | |
| {+/-} | **Location History** *(AUTOPOPULATE WITH EACH NEW CURRENT LOCATION OF THE CHILD ENTRY)*   |  |  |  |  | | --- | --- | --- | --- | | **Location Type** | **Name** | **Address** | **Last Updated** | | **AUTOPOPULATE** | **AUTOPOPULATE** | **AUTOPOPULATE** | **AUTOPOPLATE** | | **>| Print** |
| {+/-} | **Transfer Request** | **>| Add New** |
| {+/-} | **Release Request** | **>| Add New** |
| {+/-} | **Discharge Notification** | **>| Add New** |
|  | **Program Exit** | **>| Add New** |
| {+/-} | **Trigger Reports** | |

### CONDITIONAL LOGIC: Additional Fields - Post Release Address Update

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| --- | --- | --- | --- |
| **Update Current Location of Child** | | | |
| **Location Type:** | **<Dropdown Menu> (SELECTED: *Post Release Address Update*)** | **Living with Sponsor?** | **c Yes c No[[4]](#footnote-6)**   |  |  | | --- | --- | | *(CONDITIONAL LOGIC IF “NO”)* | | | **Living with a caregiver?** | **c Yes[[5]](#footnote-7) c No**   |  |  |  | | --- | --- | --- | | *(CONDITIONAL LOGIC IF “YES”)* | | | | **Primary Caregiver Type:** | **<Dropdown Menu>** (-Select Type- *Assigned Alternate Caregiver[[6]](#footnote-8) /AUTOPOPULATE NAME/; Other Family Member; Family Friend; UAC’s Domestic Partner; Sponsor’s Domestic Partner; Unknown; Other[[7]](#footnote-9))*   |  | | --- | | *(Open Text for” Other”)* | | | | **Primary Caregiver Name:** | *(Open Text)* | *(Open Text)* | | | **Address Known?** | **c Yes[[8]](#footnote-10) c No**   |  |  | | --- | --- | | *(CONDITIONAL LOGIC IF “YES”)* | | | **Search for an Address:** | **<Search Field>** *(Open Text)* | | **Current Address Line 1:** | *(Open Text)* | | **Current Address Line 2:** | *(Open Text)* | | **City:** | *(Open Text)* | | **State:** | **<Dropdown Menu>** (-Select One-[*See Reference Table 1*](#RefTable1USStates)*)* | | **Zip Code:** | *(Open Text)* | | **Country:** | **<Dropdown Menu>** (-Select One-[*See Reference Table 2*](#RefTable2Countries)*)* | | | **Notes:** | *(Open Text)* | |

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| **Reference Table 1: U.S. States and Territories** |
| *Alabama; Alaska; Arizona; Arkansas; American Samoa; California; Colorado; Connecticut; Delaware; District of Columbia; Florida; Georgia; Guam; Hawaii; Idaho; Illinois; Indiana; Iowa; Kansas; Kentucky; Louisiana; Maine; Maryland; Massachusetts; Michigan; Minnesota; Mississippi; Missouri; Montana; Nebraska; Nevada; New Hampshire; New Jersey; New Mexico; New York; North Carolina; North Dakota; Northern Mariana Islands; Ohio; Oklahoma; Oregon; Pennsylvania; Puerto Rico; Rhode Island; South Carolina; South Dakota; Tennessee; Texas; Trust Territories; Utah; Vermont; Virginia; U.S. Virgin Islands; Washington; West Virginia; Wisconsin; Wyoming* |

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| **Reference Table 2: Countries** |
| *Afghanistan; Aland Islands; Albania; Algeria; American Samoa; Andorra; Angola; Anguilla; Antarctica; Antigua and Barbuda; Arabian Peninsula; Argentina; Armenia; Aruba; Australia; Austria; Azerbaijan; Bahamas; Bahrain; Bangladesh; Barbados; Belarus; Belgium; Belize; Benin; Bermuda; Bhutan; Bolivia; Bonaire, Sint Eustatius and Saba; Bosnia and Herzegovina; Botswana; Bouvet Island; Brazil; British Virgin Islands; Brunei; Bulgaria; Burkina Faso; Burundi; Cambodia; Cameroon; Canada; Cape Verde; Cayman Islands; Central African Republic; Chad; Chile; China; Chinese Taipei; Christmas Island; Cocos Islands; Colombia; Comoro Islands; Congo; Cook Islands; Costa Rica; Cote D'Ivoire; Croatia; Cuba; Curaçao; Cyprus; Czech Republic; Czechoslovakia; Dem Rep Of The Congo; Denmark; Djibouti; Dominica; Dominican Republic; East Timor; Ecuador; Egypt; El Salvador; Equatorial Guinea; Eritrea; Estonia; Ethiopia; Falkland Islands; Faroe Islands; Fiji; Finland; France; French Guiana; French Polynesia; French Southern And Antarctic; Gabon; Gambia; Georgia; Germany; Ghana; Gibraltar; Greece; Greenland; Grenada; Guadeloupe; Guam; Guatemala; Guernsey; Guinea; Guinea-Bissau; Guyana; Haiti; Heard Island and McDonald Islands; Holy See; Honduras; Hong Kong; Hungary; Iceland; India; Indonesia; Iran; Iraq; Ireland; Isle of Man; Israel; Italy; Ivory Coast; Jamaica; Japan; Jersey; Jordan; Kazakhstan; Kenya; Kiribati; Korea; Kosovo; Kuwait; Kyrgyzstan; Laos; Latvia; Lebanon; Lesotho; Liberia; Libya; Liechtenstein; Lithuania; Luxembourg; Macao; Macedonia; Madagascar; Malawi; Malaysia; Maldives; Mali; Malta; Mariana Islands; Northern Maritime; Marshall Islands; Martinique; Mauritania; Mauritius; Mayotte; Mexico; Micronesia; Moldova; Monaco; Mongolia; Montenegro; Montserrat; Morocco; Mozambique; Myanmar; Namibia; Nauru; Nepal; Netherlands; Netherlands Antilles; New Caledonia; New Zealand; Nicaragua; Niger; Nigeria; Niue; Norfolk Island; North Korea; Norway; Oman; Pakistan; Palau; Palestinian Territory, Occupied; Panama; Papua New Guinea; Paraguay; Peru; Philippines; Pitcairn Islands; Poland; Portugal; Puerto Rico; Qatar; Reunion; Romania; Russia; Rwanda; ST. Pierre And Miquelon; Saint Barthelemy; Saint Kitts and Nevis; Saint Lucia; Saint Martin (French part); Saint Vincent And the Grenadines; Samoa; San Marino; Sao Tome and Principe; Saudi Arabia; Senegal; Serbia; Seychelles; Sierra Leone; Singapore; Sint Maarten (Dutch part); Slovakia; Slovenia; Solomon Islands; Somalia; South Africa; South Georgia and the South Sandwich Islands; South Korea; South Sudan; Spain; Sri Lanka; St. Helena; Sudan; Suriname; Svalbard and Jan Mayen; Swaziland; Sweden; Switzerland; Syria; Taiwan; Tajikistan; Tanzania; Thailand; Togo; Tokelau; Tonga; Trinidad and Tobago; Tunisia; Turkey; Turkmenistan; Turks And Caicos Islands; Tuvalu; USSR; Uganda; Ukraine; United Arab Emirates; United Kingdom; United States of America; Unknown; Uruguay; Uzbekistan; Vanuatu; Venezuela; Vietnam; Virgin Islands, U.S.; Wallis And Futuna Islands; West Bank; Western Sahara; Western Samoa; Yemen; Yugoslavia; Zambia; Zimbabwe* |

1. Conditional Logic: “Post Release Address Update” triggers additional fields [↑](#footnote-ref-3)
2. Conditional Logic: Address will auto-populate (see above) [↑](#footnote-ref-4)
3. Conditional Logic: No address Fields populate [↑](#footnote-ref-5)
4. Conditional Logic: Living with Sponsor “No” triggers additional fields [↑](#footnote-ref-6)
5. Conditional Logic: Living with a Primary Caregiver “Yes” triggers additional fields [↑](#footnote-ref-7)
6. Conditional Logic: Primary Caregiver Type “Assigned Alternate Caregiver” will auto populate Primary Caregiver Name and Address Fields; address fields are editable if updates required. [↑](#footnote-ref-8)
7. Conditional Logic: Primary Caregiver Type “Other” triggers additional field [↑](#footnote-ref-9)
8. Conditional Logic: Address Known “Yes” will trigger additional fields. [↑](#footnote-ref-10)