

# ORR-4 Outcomes Report Form Instructions

## Unaccompanied Refugee Minors (URM) Program

### Office of Refugee Resettlement

#### What is the ORR-4 Report?

- An annual progress and outcome report for minors and youth in the URM Program.
- Provides information on education, personal functioning of youth, and family reunification.
- Provides information on transition to adulthood services and outcomes similar to information tracked on other foster youth and former foster youth, via the National Youth in Transition Database.
- Aids the Office of Refugee Resettlement (ORR) to assess the youths' progress toward adulthood. Also meets reporting requirements of the Immigration and Nationality Act (8 U.S.C. 1522(d)).
- Assists ORR in understanding program effectiveness and broader planning for the URM Program.

**Note 1:** Failure to provide these reports may result in delay, suspension, or termination of grant support.

**Note 2:** "URM," "minor," or "youth" in the ORR-4 Report Form and Instructions refers to both children under the age of 18 and youth over the age of 18 who are receiving or have received placement, services, and/or benefits funded by ORR.

#### Who completes and submits the ORR-4 Report?

- The URM provider completes the report form in the URM module of ORR's Refugee Arrivals Data System (RADS).
- Once the report form is completed, the URM provider submits it to the State Agency.
- The State Agency then reviews the report and submits it to ORR.

#### How is the ORR-4 Report structured? There are seven sections in the report form.

- Section I: Report Action
- Section II: Identifying Data
- Section III: Education and Personal Functioning of the Youth
- Section IV: Family Reunification
- Section V: Transition to Adulthood Services
- Section VI: Outcomes
- Section VII: Report Submission Authority

#### What are the types of ORR-4 Reports and when are they due?

- Annual Outcomes Report: completed for current URM clients who are receiving ORR-funded services.
- Follow-up Annual Report: completed for former URM clients who are 17 to 21 years old and who terminated all ORR-funded services and benefits after the age of 17.
- Both types of ORR-4 Reports are due annually on the anniversary of the initial placement date, up until the youth's 21st birthday.

PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13) STATEMENT OF PUBLIC BURDEN: Through this information collection, the Administration for Children and Families (ACF) is gathering data on youth served through the Unaccompanied Refugee Minors Program including their location, status, and progress. Public reporting burden for this collection of information is estimated to average .5 hours for respondents from state agencies, 1 hour for respondents from provider agencies, and .5 hours for youth participants, 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 (8 U.S.C. 1522(d)). 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 Office of Management and Budget (OMB) control number. The OMB # is 0970-0034 and the expiration date is 11/30/2026. If you have any comments on this collection of information, please contact Anne Mullooly at [Anne.Mullooly@acf.hhs.gov](mailto:Anne.Mullooly@acf.hhs.gov).

#### How do I begin a new ORR-4 Report in RADS?

- Log in to the URM database using your registered User ID and Password.
  - o If you do not have a registered User ID and Password, please contact your state agency.

- Under the URM menu, navigate to Cases, then select “Search.” Search for the case using youth’s identifying criteria. ORR suggests searching by either Alien Number or Case ID, as there are often youth with the same or similar names in the database.
- Click “Edit,” then select “ORR-4” at the bottom. Finally, select “New ORR-4 Form.”
- Begin at Section I: Report Action. Follow instructions below.

#### **Reminders:**

- Consult the instructions when you are unsure of what information is to be reported. The instructions can be found under the dropdown menu on the “Help” tab in RADS.
- If a change is needed to the data on the URM Child Information screen, contact ORR at [urmdatabase@acf.hhs.gov](mailto:urmdatabase@acf.hhs.gov).
- RADS uses controls and auto-population functions. Review data for accuracy prior to submitting to ORR.

## **SECTION I: REPORT ACTION**

Select the type of report:

1. Annual Outcomes Report. This report is submitted for all current clients that are receiving ORR-funded placement, services, and/or benefits. For URMs who are younger than 17, Sections I, II, III, IV, and VII are required. Sections V and VI are also required for URMs ages 17-21.
2. Follow-up Annual Report. This report is only for former URM clients who are 17 to 21 years old and who have terminated all ORR-funded services/benefits after age 17. Only Sections VI and VII are required.

Date data was collected: Enter the month, day, and year that the outcome data was collected from the youth for Section VI. The age will auto-populate based on the youth’s date of birth.

## **SECTION II: IDENTIFYING DATA**

Date of Birth and Sex will auto-populate from the ORR-3 Initial Placement Report.

## **SECTION III: EDUCATION and PERSONAL FUNCTIONING of the YOUTH**

1. Education Information
  - a. Most Recent Education and Grade Level, if applicable.
    - *Regular Mainstream School*
      - o Includes public, private, and charter schools.
      - o Select the most recent education level completed by the youth that was assigned by the school.
      - o Example: For a youth currently in the 11<sup>th</sup> grade, “10<sup>th</sup> grade” is the most recent grade level completed.
    - *Alternative to High School*
      - o An educational establishment with non-mainstream curriculum and methods for students working towards a high school equivalent credential.
      - o Select the most recent education level completed by the youth that was assigned by the educational entity.
      - o *Dual-credit program:* Select if youth is working on high school completion while also enrolled as a community college student.

**Note:** If the youth completed mainstream or alternative high school in the reporting period and is now enrolled in a vocational or post-secondary educational program, do not complete the most recent education level completed. Rather, select from the remaining options in this section to report on the youth’s most recent education in the reporting period.

- *GED program:* Select if the youth was enrolled, even if not completed yet.
  - o General Educational Development, or GED, is offered either in person or online to obtain a certificate that indicates a level of knowledge equivalent to a high school graduate.
- *Trade/Vocational program:* Select if the youth was enrolled, even if not completed yet.
  - o A specific skill, vocation, or technique-building program that offers a certificate when a youth completes the program.

- o Examples include electrician, massage therapy, culinary arts, cosmetology, auto mechanics, building trades, nursing, computer technician, and other current or emerging employment sectors.
- *Job Corps/Job Corps equivalent*: Select if the youth was enrolled, even if not completed yet.
  - o Job Corps is a free or low-cost residential education and job training program for young adults ages 16–24.
  - o Job Corps typically offers career planning, on-the-job training, job placement, residential housing, food service, driver's education, health and dental care, a basic living allowance, and clothing allowance.
- *Post-secondary education*: Select if youth has a high school diploma or GED certificate and has taken classes at a 2- or 4-year College or University.
- *Not in school*: Select if youth was not in school in the reporting period.

**Note:** Provide additional information about the youth's education/grade level in the text box, if necessary.

b. Youth is receiving English Language Learner (ELL) support.

- Check the appropriate box: "Yes" or "No."
- ELL can be provided by public schools, religious organizations, colleges, after-school programs, or private tutors.

2. Caseworker/Provider Assessment

Assess the youth's functioning in the following domains, using the 5-point scale provided. Provide explanation on any impediments to the youth's progressive development in the areas, or actions detailed in the youth's plan to support improvement in these areas.

**Scale:** 1 for poor, 2 for below average, 3 for average, 4 for above average, 5 for excellent.

**Assessment domains:**

- *English Language Skill*
- *Education* (other than English)
- *Social Adjustment*
  - o Youth's ability and skills to cope with standards and values of American society.
- *Health Condition*
  - o Includes both medical and dental health.
- *Mental Health*
  - o Youth's cognitive, behavioral, and emotional wellbeing that affect their daily life, relationships, and functioning.
- *Preservation of Ethnic and Religious Heritage*
  - o Youth's preserving, valuing, and expressing of their culture, language, ethnic activities, or holidays.
- *Readiness to Live Independently*
  - o Youth's ability and skills to provide for their needs and manage all aspects of their lives (e.g., school, job, finances, interpersonal relationships, self-care).

**Note:** While URM youth come from a wide variety of cultural and educational backgrounds, assessment of URM youth should be based on the age-appropriate functioning level of their peers in the general population/community. ORR acknowledges the subjective nature of this assessment but is interested in tracking how youth functioning progresses throughout their duration of care in the URM program. **For additional guidance and examples on assessing youth functioning, please see Addendum at the end of these Instructions.**

## SECTION IV: FAMILY REUNIFICATION

1. The youth has a permanency plan. Indicate whether the youth has a permanency plan by selecting "Yes" or "No." Youth may not have a permanency plan if over the age of 18, or if emancipated from foster care and receiving only ORR-funded services or benefits. If response was "Yes", proceed to 1.a.
  - a. The youth's most recent primary permanency goal. Select primary permanency goal from the following options. When there are concurrent permanency goals, report only **primary** goal.
    - *Adoption*
    - *Guardianship*
    - *Reunification*
    - *Another Planned Permanent Living Arrangement (APPLA)*

- *Permanent Placement with Fit and Willing Relative (PPFWR)*<sup>1</sup>
2. Family reunification efforts in the reporting period
    - a. Parents or relatives in the U.S. have been (re-)assessed for reunification. Indicate whether parents or relatives in the U.S. have been assessed, in the reporting period, for reunification by selecting “Yes” or “No.”
    - b. There have been significant developments in reunification efforts. Indicate if there have been significant developments, in the reporting period, in family reunification efforts with parents or relatives in the U.S., by selecting “Yes” or “No.” Describe efforts and significant developments in the reporting period.
      - Do not report on reunification efforts by the UC program, but report reunification assessment only after the youth has entered the URM program.
    - c. There has been a decision to not reunify the youth with a parent or relative. Indicate if there has been a decision, in the reporting period, to not reunify a youth with a parent or relative in the U.S., who has been assessed for reunification, by selecting “Yes” or “No.” If “Yes,” explain any decisions for not reunifying youth. If the youth has no relatives in the U.S. or relatives in the U.S. were not assessed as permanency resources in the past 12 months, select “No.”
      - When providing information on relationships, please be specific if possible; for example, aunt, grandfather, cousin. If the relationship is not clear to the youth and URM provider agency, indicate ‘female family member,’ or ‘male family member.’
  3. There have been family tracing efforts with parents or relatives in other countries for the purpose of reunification. Indicate if there have been family tracing efforts with parents or relatives in other countries for the purpose of reunification, by selecting “Yes” or “No.” If “Yes,” please describe tracing efforts.
    - Include contact with siblings or relatives who are adults and could potentially serve as caregivers.

## SECTION V: TRANSITION TO ADULTHOOD SERVICES

This section must be completed for youth who are in care and are ages 17 or older. This section should be completed based on the URM provider agency’s knowledge of services provided to the youth during the reporting period.

1. Youth’s residence: Enter the address of the youth’s residence.
2. Service Types: Select “Yes” or “No” reflective of youth receipt of each of the following services, a - q.
  - a. *Youth remains in foster care*
    - Indicate whether the youth was in foster care under the placement and care responsibility of the state, county, or URM provider agency.
    - Placement includes but is not limited to foster family homes, therapeutic foster homes, group homes, supervised-independent living, and residential treatment facilities.
  - b. *Post-adjudication juvenile probation*
    - Indicate whether the youth was found guilty by a judge of committing a delinquent act and is/was receiving post-adjudication juvenile probation services.
  - c. *Special education*
    - Services specifically designed to meet the unique needs of a child with a disability.
  - d. *Independent living needs assessment*
    - A systematic procedure to identify a youth’s basic skills, emotional and social capabilities, strengths, and needs to match the youth with appropriate independent living services.
    - May also address knowledge of basic living skills, job readiness, money management abilities, decision-making skills, goal setting, task completion, and transitional living needs.
  - e. *Academic support*
    - Includes services designed to help a youth complete high school or obtain a General Educational Development (GED).
    - Examples: academic counseling; preparation for a GED, including assistance in applying for or studying for a GED exam; tutoring; study skills training; literacy training; and help accessing educational resources.
  - f. *Post-secondary educational support*
    - Includes services designed to help a youth enter or complete post-secondary education.

<sup>1</sup> On rare occasions, if a youth is placed permanently with a fit and willing relative in the U.S.

- Examples: classes for test preparation; counseling about college; information about financial aid and scholarships; help completing college or loan applications; or tutoring while in college.
- g. *Career preparation*
  - Includes services that focus on developing a youth's ability to find, apply for, and retain appropriate employment.
  - Examples:
    - o Vocational and career assessment (e.g., career exploration and planning, guidance in setting and assessing vocational and career interests and skills, and help in matching interests and abilities with vocational goals)
    - o Job seeking and job placement support (e.g., identifying potential employers, writing resumes, completing job applications, developing interview skills, job shadowing, receiving job referrals, using career resource libraries, understanding employee benefits coverage, and securing work permits)
    - o Retention support and job coaching (e.g., learning how to work with employers and other employees, understanding workplace values such as timeliness and appearance, and understanding authority and customer relationships)
- h. *Employment programs/vocational training*
  - Includes apprenticeships, internships, occupational/trade programs, or summer employment programs.
  - Examples: electrician, massage therapy, culinary arts, cosmetology, auto mechanics, building trades, nursing, computer technician, and other current or emerging employment sectors.
  - Does not include summer or after-school jobs secured by the youth alone.
- i. *Budget & financial management*
  - Includes training and practice in the following areas: living within a budget; opening and using a checking and savings account; balancing a checkbook; developing consumer awareness and smart shopping skills; accessing information about credit, loans, and taxes; and filling out tax forms.
- j. *Housing education & home management training*
  - Housing education includes assistance or training in locating and maintaining housing (e.g., filling out a rental application and acquiring a lease, handling security deposits and utilities, understanding practices for keeping a healthy and safe home, understanding tenants' rights and responsibilities, and handling landlord complaints).
  - Home management includes instruction in food preparation, laundry, housekeeping, living cooperatively, meal planning, grocery shopping, and basic maintenance and repairs.
- k. *Health education & risk prevention*
  - Includes information about mental health and self-care, hygiene, nutrition, fitness and exercise, personal safety and situational awareness, emergency preparedness, and first aid; medical and dental care benefits, health care resources and insurance, prenatal care and maintaining personal medical records; education and information about sexual development and sexuality, pregnancy prevention and family planning, and prevention of sexually transmitted diseases and AIDS; substance abuse prevention and intervention.
  - Does not include the youth's actual receipt of direct medical care or substance abuse treatment.
- l. *Family support & healthy marriage education*
  - Includes education and information about safe and stable families, healthy marriages, spousal communication, parenting, responsible fatherhood, childcare skills, teen parenting, and domestic and family violence prevention.
- m. *Mentoring*
  - Refers to when youth has been matched with a screened and trained adult for a one-on-one relationship that involves the two meeting on a regular basis.
  - Can be short-term, but it may also support the development of a long-term relationship.
  - While youth often are connected to adult role models through school, work, or family, this service category only includes a mentor relationship that has been facilitated, paid for, or provided by the state or URM provider agency.
- n. *Supervised independent living*
  - May not be supervised 24 hours a day, but an agency or adult is responsible and accountable for the youth's wellbeing and safety.

- May continue to receive case management services.
- May be given increased responsibilities to manage own living arrangement (e.g., paying bills, assuming leases, working with a landlord).
- o. *Room & board financial assistance*
  - Includes payment that is paid for or provided by the state or URM provider agency for room and board, including rent deposits, utilities, and other assistance.
- p. *Education financial assistance*
  - Includes assistance that is paid for or provided by the state or URM provider agency for education or training.
  - Examples: allowances to purchase textbooks, uniforms, computers, and other educational supplies; tuition assistance; scholarships; payment for educational preparation and support services (e.g., tutoring); payment for GED and other educational tests; and vouchers for vocational education.
- q. *Other financial assistance*
  - Includes any other payments that are not mentioned above and made or provided by the state or URM provider agency to help the youth live independently. List type of financial assistance.

## SECTION VI: OUTCOMES

The questions in this section are designed to collection information on current and former URM clients ages 17 and older. This includes youth receiving placement services (e.g., foster care), youth receiving ORR-funded services/benefits only (e.g., Education and Training Vouchers), and youth who terminated from the program after age 17 and are no longer receiving any ORR-funded services/benefits. Responses are not based on the URM provider's assessment of the youth's outcomes. Rather, responses should be based on the perception and self-report of the youth when surveyed by the URM provider staff. To assist in accurate data collection, URM providers may tweak the questions in their conversations with youth based on how services and benefits are labeled or defined in their respective states. If the provider, based on their knowledge, believes the youth did not answer correctly or misunderstood the question, the provider may consider asking a follow-up clarifying question.

1. Outcomes reporting status. Select the most appropriate option that represents the youth's participation, or lack thereof, in the outcome data collection.
  - a. *Youth participated*. The youth participated in the outcome data collection, either fully or partially.
  - b. *Youth declined*. The youth was successfully located and invited to participate but declined to take part in the outcome data collection.
  - c. *Incapacitated*. The youth has a permanent or temporary mental or physical condition that prevented them from participating in the outcome data collection.
  - d. *Incarcerated*. The youth was unable to participate in the outcome data collection because of their incarceration.
  - e. *Runaway/missing*. The youth is known to have run away or is missing from their foster care placement.
  - f. *Unable to locate or invite*. The state or URM provider agency could not locate a youth who is not in foster care or otherwise invite such a youth's participation.
  - g. *Death*. The youth died prior to their participation in the outcome data collection.
2. Date of outcome data collection. Date will auto-populate from Section I.
3. Foster care status. Indicate whether the youth is in foster care under the placement and care responsibility of the state, county, or URM provider agency by selecting "Yes" or "No." Includes, but is not limited to, placement in foster family homes, group homes, and residential treatment facilities.

For items 4-26, select "Yes" if given outcome description is applicable, based on the youth's self-report. Otherwise, select "No." Additionally, select "Declined" if the youth declined to participate in the outcome data collection, or "Don't Know" (items 21-26 only) when the youth did not know an answer.

4. Current full-time employment
  - Select "Yes" if the youth is employed at least 35 hours per week in one or multiple jobs as of the date of the outcome data collection.
5. Current part-time employment

- Select “Yes” if the youth is employed between 1 and 34 hours per week in one or multiple jobs as of the date of the outcome data collection.
6. Employment-related skills
    - Select “Yes” if the youth completed an apprenticeship, internship, or other on-the-job training, either paid or unpaid, in the past year.
    - The experience must help the youth acquire employment-related skills, e.g., specific trade skills such as carpentry or auto mechanics, or office skills such as word processing or use of office equipment.
  7. Social Security
    - Select “Yes” if the youth is receiving Supplemental Security Income (SSI) or Social Security Disability Insurance (SSDI), either directly or as a dependent beneficiary as of the date of the outcome data collection.
    - SSI payments are made to eligible low-income persons with disabilities.
    - SSDI payments are made to persons with a certain amount of work history who become disabled.
  8. Educational aid
    - Select “Yes” if the youth is using a scholarship, voucher (including Education or Training Vouchers pursuant to section 477(h)(2) of the Social Security Act), grant, stipend, student loan, or other type of educational financial aid to cover educational expenses as of the date of the outcome data collection.
    - Scholarships, grants, and stipends are funds awarded for spending on expenses related to gaining an education.
    - Student loan is a government-guaranteed, low-interest loan for students in post-secondary education.
  9. Public financial assistance
    - Select “Yes” if the youth is receiving ongoing cash welfare payments from the government to cover some of their basic needs, as of the date of the outcome data collection.
    - Does not include government payments or subsidies for specific purposes, such as unemployment insurance, childcare subsidies, education assistance, food stamps, or housing assistance.
  10. Public food assistance
    - Select “Yes” if the youth is receiving assistance in any form (e.g., government-sponsored checks, coupons, or debit cards) to buy eligible food at authorized stores, as of the date of the outcome data collection.
    - Includes public food assistance through the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) and Supplemental Nutrition Assistance Program (SNAP).
  11. Public housing assistance
    - Select “Yes” if the youth is living in government-funded public housing or receiving a government-funded housing voucher to pay for part of their housing costs, as of the date of the outcome data collection.
    - Does not include room and board payments funded through the State Chafee Program.
  12. Other financial support
    - Select “Yes” if youth is receiving any other periodic and/or significant financial resources or support from another source not listed in the elements described in elements 8-11 of this section, as of the date of outcome data collection.
    - Includes payments from a spouse or family member (biological, foster, or adoptive), child support that the youth receives, or funds from a legal settlement.
    - Does not include occasional gifts, such as birthday or graduation checks or small donations of food or personal incidentals, childcare subsidies, child support for a youth’s child, or other financial support that does not benefit the youth directly in supporting himself or herself.
  13. Highest educational certification received. Select only ONE from the following options:
    - a. A *GED* is a certificate a student receives if they have passed a high school equivalency test.
    - b. A *high school diploma* is a diploma awarded for the completion of high school. This can include just high school completion, as well.
    - c. A *vocational certificate* is a document stating that a person has received education or training that qualifies them for a particular job, e.g., auto mechanics or cosmetology.
    - d. A *vocational license* is a document that indicates that the state or local government recognizes an individual as a qualified professional in a particular trade or business.
    - e. An *associate’s degree* is generally a 2-year degree from a community college.
    - f. A *bachelor’s degree* is a 4-year degree from a college or university.
    - g. A *higher degree* indicates a graduate degree, such as a master’s degree or a Juris Doctor (J.D.).

h. *None of the above* means that the youth has not received any of the above educational certifications.

14. Current enrollment and attendance

- Select “Yes” if the youth is currently enrolled in and attending high school, GED classes, or post-secondary vocational training or college, as of the date of the outcome data collection.
- A youth is still considered enrolled in and attending school if the youth would otherwise be enrolled in and attending a school that is currently out of session (e.g., summer break.)

15. Connection to adult

- Select “Yes” if, as of the date of the outcome data collection, the youth knows an adult who they can go to for advice or guidance when there is a decision to make or a problem to solve, or for companionship when celebrating personal achievements.
- The adult must be easily accessible to the youth either by telephone or in person. This can include but is not limited to adult relatives, parents, or foster parents. The definition excludes spouses, partners, boyfriends or girlfriends, and current caseworkers.

16. Homelessness

- Select “Yes” if the youth had no regular or adequate place to live, in the past year.
- Examples: lived in a car or on the street or staying in a homeless or other temporary shelter.

17. Substance abuse referral

- Select “Yes” if the youth was referred for an alcohol or drug abuse assessment or counseling.
- Includes either a self-referral or referral by a social worker, school staff, physician, mental health worker, foster parent, or another adult.

18. Incarceration

- Select “Yes” if the youth was confined in a jail, prison, correctional facility, or juvenile or community detention facility in connection with allegedly committing a crime (misdemeanor or felony), in the past year.

19. Children

- Select “Yes” if the youth has given birth herself, or the youth has fathered any children who were born.
- This refers to biological parenthood only.

20. Marriage at child's birth

- Select “Yes” if the youth was married at the time of the child's birth.
- Do not include Common Law Marriages or customary marriages, which did not result in documentation of the marriage recognized by the state or country of residence at the time of the marriage.

21. Medicaid

- Select “Yes” if the youth is enrolled in Medicaid, a medical assistance program supported by the Federal and State government under title XIX of the Social Security Act, as of the date of the outcome data collection.

22. Other health insurance coverage

- Select “Yes” if the youth has a third-party payer (other than Medicaid) for all or part of the costs of medical care, mental health care, and/or prescription drugs.
- Includes group coverage offered by employers, schools or associations, an individual health plan, self-employed plans, inclusion in a parent's insurance plan, or ORR-funded medical coverage.
- Does not include medical or drug discount cards or plans.

23. Health insurance type: Medical

- Select “Yes” if the youth has health insurance coverage in the element described in 22 of this section, which pays for all or part of the costs for medical care services.

24. Health insurance type: Mental health

- Select “Yes” if the youth has health insurance coverage as described in 22 of this section, which pays for all or part of the costs for mental health services, such as counseling or therapy.

25. Health insurance type: Prescription drugs

- Select “Yes” if the youth has health insurance coverage as described in 22 of this section, which pays for all or part of the costs of prescription drugs.

26. Health insurance type: Other

- Select “Yes” if the youth has health insurance coverage as described in 22 of this section that pays for part of or all costs of other medical services, e.g., dental or vision. Enter the other type of coverage in the blank provided.

## SECTION VII: REPORT SUBMISSION AUTHORITY

Agency names will auto-populate from the first page of the report form.

1. Provider Agency
  - Provide the name, title, phone number, and email address of the person preparing the report and the date the report was prepared. Include a secondary contact at the provider agency.
  - Do not backdate submission date.
2. State/URD Agency
  - Provide the name, title, phone number, and email address of the state official submitting the report, and the date the report was submitted to ORR.
  - Do not backdate submission date.
  - When returning reports for revisions, it is important to clearly identify the issue and explain corrective measures.
3. ORR: Provide the name, title, and approval date. Enter any comments on the approval or denial of the report.

### ADDENDUM: Guidance for Caseworker/Provider Assessment of Youth Functioning for Section III.2.

Below are example criteria that can be used to help guide the ratings a caseworker selects. These are just examples to help provide some consistency; the examples should not be used as explicit criteria where youth must “check off” each element.

	Poor	Below Average	Average	Above Average	Excellent
<b>English Language Skill</b>	<p>Client has no English skills.</p> <p>Client is not enrolled in ESL classes.</p> <p>Client requires interpretation.</p>	<p>Client has limited English conversational, reading and/or writing skills.</p> <p>Client is enrolled in ESL classes or other language instruction.</p> <p>Client requires interpretation for most interactions.</p>	<p>Client speaks conversational with reading and writing skills.</p> <p>Client no longer requires ESL classes.</p> <p>Client requires interpretation for specialized services (e.g. medical and legal).</p>	<p>Client communicates effectively in English through speaking, reading, and writing.</p> <p>Client requires interpretation rarely, utilizes interpreter or technology resources when the need arises.</p>	<p>Client is fully proficient in English.</p> <p>Client can read and write in English.</p> <p>Client does not require interpretation.</p>
<b>Education (other than English)</b>	<p>Client has no prior educational experiences or has a gap of several years in education.</p> <p>Client is not enrolled in school or refuses to attend school.</p>	<p>Client has gaps in prior educational experiences.</p> <p>Client unable to complete age-appropriate coursework without significant support.</p> <p>Client enrolled in school, has poor attendance.</p>	<p>Client completes age-appropriate coursework, receives age-appropriate supports such as tutoring.</p> <p>Client is enrolled and consistently attends school.</p> <p>Client is passing classes and advancing in their education.</p>	<p>Client completes age-appropriate coursework, with minimal or no educational supports.</p> <p>Client is enrolled and has consistent attendance at school.</p> <p>Client has passing or good grades, has a plan for future education or career goals.</p>	<p>Client excels in classes with age-appropriate peers.</p> <p>Client does not require educational supports, such as tutoring.</p> <p>Client receives good to excellent grades. Has completed, or is on track to complete, a high school education. Has a plan for future education or career goals.</p>
<b>Health Condition</b>	<p>Client has untreated or unaddressed medical needs.</p>	<p>Client is inconsistent in managing health needs.</p>	<p>Client has a medical condition, with proper treatment received.</p>	<p>Client reports mostly good health.</p> <p>Client does not have any new health</p>	<p>Client has no medical conditions and is in good health.</p> <p>Client has medical</p>

	Poor	Below Average	Average	Above Average	Excellent
	Client not receiving needed medical care for a chronic condition(s).	Client has a present illness or physical health concern that is not stable.	Client is stable in managing chronic health condition(s) with support.	concerns.  Client is stable in managing chronic conditions with minimal support.	conditions that are well managed independently.
<b>Mental Health</b>	Client has mental health conditions unaddressed or untreated.	Client has identified mental health concerns, bouts of instability, and/or refusing treatment.	Client presents as mostly stable and mostly uses age-appropriate emotional regulation skills.	Client does not report, or does not demonstrate, behaviors indicating mental health concerns.	Client does not report, or does not demonstrate, behaviors indicating mental health concerns.
	Client demonstrates patterns of instability including plans to harm self or others.	Client reports some ideation of harming self or others, but denies plan, intent, or means.	Client is aware of mental health needs and is receiving regular treatment or support.	Client is receiving treatment and effectively managing mental health needs with support.	Client has mental health conditions that are well managed independently.
<b>Social Adjustment</b>	Client demonstrates major challenges adjusting to life in the U.S., including adjusting to a different value system, and engaging with their community.	Client is inconsistent in adjusting to life in the U.S. and engaging with their community.	Client regularly demonstrates that they are adjusting to the U.S. and engaging in their community.	Client frequently demonstrates that they are adjusting to the U.S. and engaging in their community.	Client has fully adjusted to life in the U.S. and is an active member of the community.
	Client demonstrates no knowledge of coping skills.	Client has knowledge of coping skills but does not apply them.	Client demonstrates knowledge of coping skills and applies them with age-appropriate consistency.	Client has coping skills that they consistently apply.	Client has many coping skills that they consistently use independently.
	Client has no social connections including with peers, caregivers, or other trusted adults.	Client has limited social connections with peers, caregivers, or other trusted adults.	Client has regular social connects with peers, caregivers, or other trusted adults.	Client has close connections to peers, caregivers, or other trusted adults.	Client has strong, long-term connections to peers, caregivers, or other trusted adults.
<b>Preservation of Ethnic and Religious Heritage</b>	Client is not connected to their ethnic or religious community.	Client is minimally connected to their ethnic or religious community.	Client is connected to their ethnic or religious community.	Client has strong connections to their ethnic or religious community.	Client has strong connections to their ethnic or religious community and demonstrates a healthy sense of pride in their heritage.
	Client does not participate in ethnic or religious community activities to retain a connection to their heritage.	Client does not regularly participate in ethnic, or religious community activities to preserve a connection to their heritage.	Client regularly participates in ethnic or religious community activities to preserve a connection to their heritage.	Client frequently participates in ethnic or religious community activities to preserve a connection to their heritage.	Client frequently participates in ethnic or religious community activities and encourages peers and others in the community to remain connected to their heritage.
	Client has no social connections to others from a similar background in the community.	Client has limited social connections to others from a similar background in the community.	Client has regular social connections to others from a similar background in the community.	Client has close peer, mentor, or social connections to others from a similar background in the community.	Client has strong, long-term peer, mentor, or social connections to others from a similar background in the community.
<b>Readiness to</b>	Client is far less	Client has fewer	Client	Client demonstrates	Client lives

	Poor	Below Average	Average	Above Average	Excellent
<b>Live Independently</b>	<p>prepared to live independently than their peers (of similar age) in the community.</p> <p>Client lacks necessary understanding of basic U.S. laws and customs.</p> <p>Client is unable to complete age-appropriate daily living tasks without support</p>	<p>independent living skills that their peers (of similar age) in the community.</p> <p>Client has a basic understanding of U.S. laws and customs.</p> <p>Client is able to care for most of their own age-appropriate daily living tasks with appropriate support though may need significant support with more advanced skills</p>	<p>demonstrates a level of readiness to live independently after age 18, that is at a similar level as their peers (of similar age) in the community.</p> <p>Client is familiar with U.S. laws and customs.</p> <p>Client is able to care for their own age-appropriate daily living tasks. Based on age, some support may be needed with advanced skills.</p>	<p>readiness to live independently after age 18, that is at a more advanced level than their peers (of similar age) in the community.</p> <p>Client utilizes their understanding of U.S. laws and customs to navigate the community.</p> <p>Client cares for their own age-appropriate daily living tasks with minimal support.</p>	<p>independently in the community or demonstrates readiness to live independently.</p> <p>Client successfully navigates U.S. systems on their own.</p> <p>Client cares for all their own age-appropriate daily living tasks independently.</p>