

**Request for Approval under the clearance of the “Generic for ACF Program
Office Monitoring Activities” Office of Management and Budget (OMB)
Control Number: 0970-0558**

TITLE OF INFORMATION COLLECTION: Office of Refugee Resettlement (ORR) Care Provider Healthcare Delivery Report (HDR)

PURPOSE: The *ORR Care Provider HDR* is necessary for ORR to track the ability of care providers to facilitate delivery of healthcare services in accordance with ORR policies and procedures. The *ORR Care Provider HDR* will capture information on the care provider’s established care network (e.g., specialists, lab services), the delivery of routine healthcare services (e.g., location and hours of care, provision of the initial medical exam (IME)), the care providers ability to comply with ORR health-related requirements (e.g., interpretation services for health encounters, onsite services for children with special healthcare needs), and systems access (e.g., active accounts for tracking and entering health data). **No identifying information will be captured.**

This data collection will allow ORR to determine 1) if new care providers have established the appropriate healthcare resources prior to the placement of children, 2) if current care providers are maintaining their healthcare resources, and 3) which care providers have access to unique services that may benefit children with special healthcare needs.

The *ORR Care Provider HDR* will be digitized and incorporated into ORR’s web-based Program Ops Hub (POH) application. Care providers will be expected to complete the form during the onboarding process with ORR’s Unaccompanied Alien Children Bureau Division of Health (DoH) and update it when a change in service occurs that is expected to affect healthcare delivery for more than 7 days. The application will generate a notification to DoH if a disruption in service is reported in any of the key requirements (e.g., loss of the primary healthcare provider, extended vaccine shortage, inability to perform initial medical exams within 2 business days). DoH will follow-up on each notification and help the care provider resolve the issue or, if the issue cannot be easily resolved and the deficiency places the safety and well-being of children at risk, DoH will consult with other ORR staff to determine if children should no longer be placed with, or removed from, the care provider.

This information collection aligns with the overarching generic for monitoring activities, which specifically states that ACF will collect the information for:

- monitoring of compliance with federal practice, guidelines and requirements,
- quick understanding of and remediation to national, regional, and/or site-specific issues,
- provision of support as needed,
- accurate assessment of the efficiency and efficacy of recipient activities
- documentation of promising practice, innovative services, and program strengths

The proposed uses of the data also align with the overarching generic, which specifies that program offices will use information collected under this generic clearance to monitor the efficiency and efficacy of funding recipient activities related to the delivery of healthcare services and to provide support or take appropriate action, as needed.

DESCRIPTION OF RESPONDENTS: Care provider program staff

CERTIFICATION:

I certify the following to be true:

1. The collection is in compliance with U.S. Health and Human Services regulations.
2. The collection is low-burden for respondents and low-cost for the Federal Government.
3. The collection is non-controversial and does not raise issues of concern to other federal agencies.
4. Information gathered will not be used for the purpose of substantially informing influential policy decisions.

Name: Kirsten Buckley, Health Informatics Lead, Division of Health

To assist OMB review of your request, please provide answers to the following question:

PERSONALLY IDENTIFIABLE INFORMATION:

1. Is personally identifiable information (PII) collected? [] Yes [X] No
2. If Yes, will any information that is collected be included in records that are subject to the Privacy Act of 1974? [] Yes [] No
3. If Yes, has an up-to-date System of Records Notice been published? [] Yes [] No

BURDEN HOURS

The number of respondents is based on the estimated number of facilities in ORR’s care provider network over the next three years. Each new and current facility will complete the form once and provide updates to specific fields as services change. The burden for completing the form in its entirety is 42 minutes; burden for updates is 4 minutes. It is expected that care provider programs will have 4 updates a year (12 updates in 3 years).

Title of Information Collection	Category of Respondent	# Respondents (Total)	# Responses per Respondent	Burden per Response (hrs)	Total Burden – 3-year period (hrs)
ORR Care Provider Healthcare Delivery Report (HDR)	Private Sector (Care provider program staff)	225	1*	1.5	337.5

*Includes initial completion of form and submission of minimal updates throughout duration of information collection.

FEDERAL COST: The estimated annual cost to the Federal Government is \$27,210.

ORR employs 2 contractors to onboard new care providers and follow-up on all notifications about disruptions in delivery of healthcare services. It is expected that follow-up will require an average of 20 minutes per notification. The hourly rate for this position including fringe benefits and overhead is \$90.70. Therefore, the annual cost to follow up on notifications is **\$27,210 (\$81,630 over 3 years)**.

TYPE OF COLLECTION:

How will you collect the information? (Check all that apply)

- Web-based
- E-mail
- Paper mail
- Other, Explain