

# **Mental Health Care Services for Unaccompanied Children**

**OMB Information Collection Request  
0970 - NEW**

## **Supporting Statement Part A - Justification**

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Submitted By:  
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Administration for Children and Families  
U.S. Department of Health and Human Services

## SUPPORTING STATEMENT A – JUSTIFICATION

### 1. Circumstances Making the Collection of Information Necessary

The Homeland Security Act (HSA), 6 U.S.C. 279, transferred responsibilities for the care and placement of unaccompanied children (UC) from the Commissioner of the former Immigration and Naturalization Service (INS) to the Director of the Office of Refugee Resettlement (ORR).

The *Flores v. Reno* Settlement Agreement, No. CV85-4544-RJK (C.D. Cal. 1996), establishes an order of priority for sponsors with whom UC should be placed and sets minimum standards for the housing, services, transportation, and discharge of UC. *Flores* also entitles Plaintiffs' counsel to visit ORR facilities.

The William Wilberforce Trafficking Victims Protection Reauthorization Act of 2008 (TVPRA), 8 U.S.C. 1232, creates additional requirements for the placement, services, and discharge of UC in federal custody. The TVPRA also directs ORR to create policies to ensure UC are protected from traffickers and others seeking to victimize them or otherwise engage them in criminal, harmful, or exploitative activity.

ORR's Interim Final Rule on the Standards to Prevent, Detect, and Respond to Sexual Abuse and Sexual Harassment Involving Unaccompanied Children, 45 CFR Part 411, sets forth such standards for ORR care provider facilities that house UC in accordance with section 1101(c) of the Violence Against Women Reauthorization Act of 2013, Pub. L. 113-4 (VAWA 2013).

ORR's UC Program provides care and custody for UC until they can be safely released to a sponsor, repatriated to their home country, or obtain legal status. ORR funds residential care provider facilities that provide temporary housing and other services to UC in ORR custody. Care provider facilities are State-licensed, with the exception of temporary influx care facilities, and must meet ORR requirements to ensure a high-level quality of care. Services provided at care provider facilities include, but are not limited to, education, recreation, vocational training, acculturation, nutrition, medical, mental health, legal, and case management.

ORR is submitting several instruments directly related to the care of UC for processing pursuant to the Paperwork Reduction Act. These instruments allow ORR to provide mental health care services to UC. The proposed instruments are:

- Initial Mental Health Evaluation (Form MH-1)
- Columbia Suicide Severity Rating Scale (SSRS) Risk Assessment (Form MH-2)
- Mental Health Group Event (Form MH-3)
- Clinical Contact Log (Form MH-4)
- Mental Health Service Report (Form MH-5)
- Mental Health Referral (Form MH-6)
- Mental Health Task (Form MH-7)

### 2. Purpose and Use of the Information Collection

- **Initial Mental Health Evaluation (Form MH-1):** This instrument is used by clinicians to document the UC's mental state upon arrival to the care provider facility. It includes an assessment of the UC's current mental state, psychiatric history, and substance use history.

- **Columbia Suicide Severity Rating Scale (SSRS) Risk Assessment (Form MH-2):** This instrument is used by clinicians to assess suicide risk for UC who verbalize or demonstrate suicidal thoughts or behavior. It is a shorter version of the standard Columbia SSRS, a tool designed to support suicide risk assessment through a series of simple, plain-language questions that anyone can ask. The Columbia SSRS includes the most essential, evidence-supported questions required for a thorough assessment. Further information about the Columbia SSRS can be found at <https://cssrs.columbia.edu/the-columbia-scale-c-ssrs/about-the-scale/>.
- **Mental Health Group Event (Form MH-3):** This instrument is used by clinicians to document group counseling and community meetings held at the care provider program.
- **Clinical Contact Log (Form MH-4):** This instrument is used by clinicians to document the following mental health services: individual counseling, group counseling, community meetings, family counseling sessions, screenings/evaluations, and collateral contact with services providers involved in the UC's case. A Mental Health Group Event (Form MH-3) may be linked to a Clinical Contact Log entry.
- **Mental Health Referral (Form MH-5):** This instrument is used by clinicians and/or medical coordinators to refer a UC for community-based mental health care services (assessments/evaluations, psychotherapy, medical referrals, and treatment); acute and long-term psychiatric hospitalizations; and referrals to out-of-network residential treatment centers.
- **Mental Health Service Report (Form MH-6):** This instrument is used by clinicians and/or medical coordinators to document the provision of community-based mental health care services (assessments/evaluations, psychotherapy, medical referrals, and treatment); acute and long-term psychiatric hospitalizations; and referrals to out-of-network residential treatment centers. In addition, the UC interview portion of the Out-of-Network Site Visit Report (Form M-3B), which is part of a different information collection request, is accessible from within this instrument.
- **Mental Health Task (Form MH-7):** This instrument is auto-generated to create reminders for clinicians and/or medical coordinators of tasks that must be completed. Clinicians and/or medical coordinators may edit the instrument after it is generated.

### **Supplemental Material**

**UC Mental Health Summary Page:** This is a dashboard from which all of the above instruments are accessible.

### **3. Use of Improved Information Technology and Burden Reduction**

ORR is in the process of developing a new case management system, UC Path. UC Path will streamline information management by consolidating UC information from disparate storage locations, reduce manual paperwork processing conducted outside of the system (e.g., spreadsheets, PDFs, Word documents), maximize the use of auto-population so that information is not entered more than once, enforce business rules through automated workflow management, and improve business intelligence capabilities by automating reporting and data analytics. All instruments in this collection will be part of UC Path.

### **4. Efforts to Identify Duplication and Use of Similar Information**

The information being collected by these instruments are not obtainable from other sources.

## **5. Impact on Small Businesses or Other Small Entities**

The proposed information collections will not burden or impact small businesses.

## **6. Consequences of Collecting the Information Less Frequently**

Not collecting the information requests on these forms would impede ORR from performing its charged duty of providing mental health care services to UC.

## **7. Special Circumstances Relating to the Guidelines of 5 CFR 1320.5**

None of the characteristics outlined in 5 CFR 1320.5(d)(2) apply to the instruments in this collection.

## **8. Comments in Response to the Federal Register Notice and Efforts to Consult Outside the Agency**

In accordance with the Paperwork Reduction Act of 1995 (Pub. L. 104-13) and Office of Management and Budget (OMB) regulations at 5 CFR Part 1320 (60 FR 44978, August 29, 1995), ACF published a notice in the Federal Register announcing the agency's intention to request an OMB review of this information collection activity. This notice was published on January 7, 2021, Volume 86, Number 4, pages 1114-1115, and provided a sixty-day period for public comment. During the notice and comment period, responses were received from five commenters, each containing multiple comments. Attachment A provides a summary of those comments and ORR's responses.

## **9. Explanation of Any Payment or Gift to Respondents**

No payment or gift to the respondents will be provided.

## **10. Assurance of Confidentiality Provided to Respondents**

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 published on July 18, 2016 at 81 FR 46682.

## **11. Justification for Sensitive Questions**

Sensitive information will be collected in order for ORR to provide mental health care services to children in its custody. ORR does not ask for any information of a sensitive nature beyond what is needed to provide mental health care services.

## **12. Estimates of Annualized Burden Hours and Costs**

Estimates used to calculate burden are based on the following factors:

- FY2021 projections for referrals to ORR custody and transfers within the ORR care provider network.

- ORR funds approximately 216 care provider grantees.
- The cost to respondents was calculated using wage data, accessed in November 2020, for the Bureau of Labor Statistics (BLS) job code 21-1014 Mental Health Counselors in the industry of Other Residential Care Facilities. The rates were multiplied by two to account for fringe benefits and overhead –  $\$18.75 \times 2 = \$37.50$ .

<b>Information Collection Title</b>	<b>Annual Number of Respondents</b>	<b>Annual Number of Responses per Respondent</b>	<b>Average Burden Minutes per Response</b>	<b>Annual Total Burden Hours</b>	<b>Average Hourly Wage</b>	<b>Annual Total Cost</b>
Initial Mental Health Evaluation (Form MH-1)	216	241	60	52,056	\$37.50	\$1,952,100.00
Columbia SSRS Risk Assessment (Form MH-2)	216	5	45	810	\$37.50	\$30,375.00
Mental Health Group Event (Form MH-3)	216	156	10	5,616	\$37.50	\$210,600.00
Clinical Contact Log (Form MH-4)	216	11,194	10	402,984	\$37.50	\$15,111,900.00
Mental Health Referral (Form MH-5)	216	24	45	3,888	\$37.50	\$145,800.00
Mental Health Service Report (Form MH-6)	216	31	45	5,022	\$37.50	\$188,325.00
Mental Health Task (Form MH-7)	216	55	5	990	\$37.50	\$37,125.00
<b>Estimated Annual Burden Hours Total:</b>				<b>471,366</b>	<b>Estimated Annual Cost Total:</b>	<b>\$17,676,225.00</b>

### 13. Estimates of Other Total Annual Cost Burden to Respondents and Record Keepers

Respondents will not incur any direct monetary costs, other than their time, in the completion of these instruments.

### 14. Annualized Cost to the Federal Government

The annualized cost estimate for each of these instruments considers the time of a step 1 GS-12 in the Washington, DC locality to review information following submittal. No additional costs will be incurred by the Federal government for developing computer systems or storing the instruments as those systems are already in place. The hourly rate was multiplied by two to account for fringe benefits and overhead.

<b>Information Collection Title</b>	<b>Annual Number of Respondents</b>	<b>Annual Number of Responses per Respondent</b>	<b>Average Federal Staff Burden Minutes per Response</b>	<b>Annual Total Federal Staff Burden Hours</b>	<b>Average Federal Staff Hourly Wage</b>	<b>Annual Total Federal Staff Cost</b>
Initial Mental Health Evaluation (Form MH-1)	45	1,156	15	13,005	\$82.74	\$1,076,033.70
Columbia SSRS Risk Assessment (Form MH-2)	45	23	10	173	\$82.74	\$14,314.02
Clinical Contact Log (Form MH-4)	45	53,733	1	40,300	\$82.74	\$3,334,422.00
Mental Health Referral (Form MH-5)	45	116	15	1,305	\$82.74	\$107,975.70
Mental Health Service Report (Form MH-6)	45	150	15	1,688	\$82.74	\$139,665.12
			<b>Estimated Annual Burden Hours Total:</b>	<b>56,471</b>	<b>Estimated Annual Cost Total:</b>	<b>\$4,672,410.54</b>

### **15. Explanation for Program Changes or Adjustments**

ORR plans to replace the term “unaccompanied alien child (UAC)” with “unaccompanied child (UC)” throughout the instruments in this collection. Note that the screenshots of UC Path instruments attached to this package do not reflect this change because it has not yet been developed in the system. However, the revision in terminology will be made before the system is launched.

ORR also plans to remove the term “alien” from the title of this information collection and revise it to read “Mental Health Care Services for Unaccompanied Children.”

### **16. Plans for Tabulation and Publication and Project Time Schedule**

ORR does not plan to publish the information provided by the respondents.

### **17. Reason(s) Display of OMB Expiration Date is Inappropriate**

ORR plans to display the expiration date of clearance as set by OMB.

### **18. Exceptions to Certification for Paperwork Reduction Act Submissions**

No exceptions are necessary for this information collection.