

Administration for Children and Families
Office of Refugee Resettlement
Unaccompanied Children Program

Expanding Licensed Provider Beds







How this Response is Different

The Biden Harris Administration believes that **families belong together.** President Biden has made clear that reversing the Trump Administration's immigration policies, that separated thousands of families at the border, is a top priority.

President Biden's strategy is centered on the basic premise that **our country is safer, stronger, and more prosperous with a fair, safe and orderly immigration system** that welcomes immigrants, keeps families together, and allows people—both newly arrived immigrants and people who have lived here for generations—to more fully contribute to our country.

President Biden knows that new Americans fuel our economy, as innovators and job creators, working in every American industry, and contributing to our arts, culture, and government.

President Biden has outlined steps to reform our immigration system by keeping families together, **addressing the root causes of irregular migration**, and streamlining the legal immigration system. For additional information please see the <u>Fact Sheet</u>.

The current response to **supporting unaccompanied children and youth seeking support** in the Unites States is to make an intentional pivot to treat this **as a humanitarian effort that addresses child wellbeing.**





HHS Effort to Support Unaccompanied Children

- The US Department of Health and Human Services, Administration for Children and Families (ACF) is calling on partners across the country to *support a broad-sweeping humanitarian effort to swiftly place thousands of unaccompanied children into safe, licensed community-based providers that have open shelter beds*.
- We are working across federal partners in a unified and coordinated effort to align resources and remove barriers to support providers to join us in this effort as aligned with their capabilities and ability. Federal partners are working to streamline application and contracting processes, facilitate staff hiring resources, and increasing allowances to address resource needs.
- The effort seeks to *ensure unaccompanied children are supported in the same way we want our own children to be treated* with care, dignity and respect.
- This means taking a different approach and intentionally shifting from larger facilities to smaller, community-based provider settings that use child development and trauma-informed approaches to provide care. This shift is critical for the existing response of the Unaccompanied Children (UC) program and the long-term shift to build a UC system that employs a child wellbeing framework through a strong and broad provider network.
- The great majority, 90%, of children are reunified with their families or sponsors who reside in the United States as quickly as possible. This means that children typically stay in a temporary licensed shelter placement for 35 day or less.





What is a UC Licensed and Available Bed

Licensed Bed: A bed / placement that meets the respective state's licensure as a shelter or foster care provider that is approved to provide safety, resources, and supportive services to a child or youth.

Available Bed Capacity: State licensed shelter or foster care beds / placements and have no child / youth occupying the bed and may be put towards supporting the UC effort. (Note that the request is not for bed capacity currently or potentially being used to support residential childcare or home-based childcare that are in use or potentially in use for local domestic child welfare and youth placement needs.)





Greatest Needs to Support Licensed Bed Expansion



Ensure all current UC provider licensed beds are being maximized to greatest possible use (remove COVID restrictions, provide necessary funding, support staffing)



Increase the number of licensed community-based provider placements to house unaccompanied children

- A. Enabling interested licensed shelter and foster care providers to become subrecipients to current UC grantees to increase bed capacity. *Providers provide core information shared with current UC providers.*
- B. Publicizing the opportunity to become direct UC providers through a grant through the Office of Refugee Resettlement. *Providers complete the single-source application.*



Identify resources to support licensed provider barriers to make beds available, including bi-lingual child and youth care staff and case management support, through local partnerships and national contract resources





Greatest Needs to Support Licensed Bed Expansion

- 1. Licensed Providers with Bed Capacity
 - a. State licensed shelter and/or foster care providers with bed capacity, adequate staff, and supports resources to care for tender age (12yrs and under) children and sibling groups
 - b. State licensed shelter and/or foster care providers with bed capacity and supports resources to care for tender age (>12yrs) children and sibling groups *BUT require* support to bring on adequate bi-lingual and licensed child and youth care staff

2. Staff Resources

- a. Licensed child and youth care staff that can be deployed to staff existing UC providers expanding capacity and new UC subrecipients
- **b. Bi-lingual child and youth care staff** that can be deployed to staff existing UC providers expanding capacity and new UC subrecipients





Additional Partnership Needs to Support Licensed Bed Expansion

- 1. Physical Spaces
 - a. Non-licensed physical sites that can house 500+ children and youth
- 2. Specialized Staffing
 - a. Case management (virtual and in person)
 - b. Medical providers
 - c. Social and educational programming providers



Paths to Engage in Expanding UC Licensed Provider Beds



Key Dimensions	Path 1: Become a Direct UC Provider	Path 2: Become a Subrecipient to a UC Provider	Path 3: Provide Key Support Resources
Who is eligible?	State licensed shelter and child/youth residential care providers or state or county governments interested in becoming a direct UC provider. Providers can pursue Path 1 & 2 concurrently.	State licensed shelter and child/youth residential care providers who are interested in providing services for a temporary period as a subrecipient to a current UC provider that is a direct grantee. Providers can pursue Path 1 & 2 concurrently.	Businesses, organizations, and associations with support resources that UC providers need to be able to expand bed capacity (buildings; bi-lingual staff; licensed child care workers; case management).
What would this mean?	A state licensed shelter or foster care provider establishes a direct grantee relationship with the ACF Office of Refugee Resettlement (ORR).	A state licensed shelter or foster care provider establishes a time limited subrecipient / subcontractor relationship directly with a current UC provider to provide beds for UC to respond to the current influx. Note that providers may be interested in joining a umbrella contractor as a subrecipient (see Path 1 option b).	Entities/organizations identify resources they have available in need to enable expanding bed capacity: • Licensed child / youth care workers • Bi-lingual child / youth care workers • Case management (virtual, in person)
Who is this best suited for?	State licensed shelter or foster care providers who would like to establish a direct relationship (a) grant (multi-year) OR (b) contract (up to one year)	State licensed shelter or foster care providers who wouldlike to establish a time limited subrecipient / subcontractor relationship AND who have capacity, staff, and/or support resources available to bring beds online safely and quickly.	National or locally focused businesses, organizations, and associations with support resources that align with the identified needs. Entities open to partnering or contracting with existing UC providers or subrecipients to enable additional staffed UC beds to become available.
What are the next steps?	 Interested eligible providers review and submit an application based on best fit to the Office of Refugee Resettlement (ORR): (a) grant (up to one year) using the single source application materials (provided in association documents) (b) contract (up to one year) using link to application materials provided below 	 Interested eligible providers will be included on a list of interested subrecipients shared with current UC direct grantee providers Existing UC providers will seek out interested providers to engage in subrecipient or subcontract agreements and submit a proposal for ORR review Core eligibility will be assessed by completing linked form and provided to current UC grantees. 	 Entities with resources in need will be routed to theright party for review and next steps. For staffing and other resources: providers will be directed to the ACF contracting process for consideration There are existing open contract solicitations for a key group of required services: Direct Care Services Child Advocate Services Case Management
Action to take	 (a) grant - Complete single source application and submit to ORR. Application materials provided in associated documentation. (b) contract - ORR-UC-Shelter and Foster care services 	Complete Interested Provider Survey: https://orrresponse.force.com/s/	Complete Interested Provider Survey for staffing and other services that do not fit within the current open contract solicitations: https://orrresponse.force.com/s/





Additional Materials

- Key Documents: https://www.acf.hhs.gov/orr/policy-guidance/unaccompanied-children-program
- Policy and Guidance: https://www.acf.hhs.gov/orr/policy-guidance/children-entering-united-states-unaccompanied
- Frequently Asked Questions: https://www.acf.hhs.gov/orr/unaccompanied-children-frequently-asked-questions