Florence Crittenton Services of Orange County, Inc., Did Not Always Meet Applicable Safety Standards Related to Unaccompanied Alien Children

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The designation of financial or management practices as questionable, a recommendation for the disallowance of costs incurred or claimed, and any other conclusions and recommendations in this report represent the findings and opinions of OAS. Authorized officials of the HHS operating divisions will make final determination on these matters.
Florence Crittenton Services of Orange County, Inc., Did Not Always Meet Applicable Safety Standards Related to Unaccompanied Alien Children

What OIG Found

Although Crittenton met most of the applicable safety standards for the care and release of children in its custody, Crittenton released some children to sponsors without conducting all required background checks, and some UAC case files were missing documentation to verify that Crittenton met certain safety standards. In addition, the numbers of released children listed in Crittenton’s quarterly performance progress reports were not readily verifiable for accuracy.

On the basis of our sample results, we estimated that Crittenton released 2 percent of children to sponsors without conducting all required background checks. Without conducting all required background checks, Crittenton did not follow ORR policies to ensure that, for an estimated 16 children, sponsors were properly vetted. We also estimated that Crittenton did not properly document the care and release of approximately 9 percent of all children released to sponsors in FYs 2014 and 2015. Without adequate documentation in the case files, ORR could not be assured that, for an estimated 71 children, Crittenton had followed ORR policies. In addition, without accurate information on the number of released children, ORR did not have assurance that Crittenton ensured program integrity and that every child Crittenton released was accounted for.

What OIG Recommends and Crittenton Comments

We recommend that Crittenton (1) ensure that all required background checks are conducted and documented, (2) provide periodic training to staff on maintaining documentation related to public records checks, (3) increase oversight of its quality review for UAC case files to ensure that all required documentation is maintained in the files, (4) develop policies and procedures for obtaining necessary documentation in the case files for children transferred from another shelter care provider, and (5) develop a process to document the information used to prepare its quarterly performance reports and verify the information’s accuracy.

In written comments on our draft report, Crittenton did not indicate concurrence or nonconcordance with our recommendations; however, it provided information on actions that it had taken or planned to take to address our recommendations.
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INTRODUCTION

WHY WE DID THIS REVIEW

The Office of Refugee Resettlement (ORR) within the U.S. Department of Health and Human Services' (HHS’s) Administration for Children and Families (ACF) manages the Unaccompanied Alien Children (UAC) program. The UAC program served between 7,000 and 8,000 children annually from fiscal years (FYs) 2005 through 2011. In FY 2012, however, the number of children entering the program began to increase, and by the end of that year, the UAC program served approximately 13,000 children. In FY 2013, the program served 24,668 children, and in FY 2014, referred to as the “surge” year, ORR served 57,496 children. Although the number of children that the program served decreased to 33,726 in FY 2015, ORR’s funding for the program increased.

From FYs 2009 through 2015, ORR’s funding for its UAC program totaled more than $3 billion, with about $948 million (32 percent) of the funding occurring during FY 2015 alone. (See the figure below.)

![Figure: UAC Program Funding From FYs 2009 Through 2015](image)

Because of the rapid increase of vulnerable children entering ORR care, the significant increases in program funding, and the multiple changes to ORR policies during FY 2014, we are conducting a series of reviews of ORR care providers across the Nation.1 We selected for review Florence Crittenton Services of Orange County, Inc. (Crittenton), a UAC program

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grantee, because Crittenton had a finding related to the ORR grant in its FY 2014 Single Audit report and had citations from the State licensing office related to the health and safety of children in its care. We conducted this review in conjunction with our review of Crittenton’s expenditure transactions, which will be covered in a separate report.

OBJECTIVE

Our objective was to determine whether Crittenton met applicable safety standards for the care and release of children in its custody.

BACKGROUND

Care of Unaccompanied Children

Within HHS, ORR manages the UAC program. The UAC program funds temporary shelter care and other related services for unaccompanied children in ORR custody. In FY 2014, ORR awarded grants totaling $1.1 billion to providers for the care and placement of children. The UAC program is separate from State-run child welfare and traditional foster care systems.

By law, HHS must provide for the custody and care of an unaccompanied child, defined as a child who has no lawful immigration status in the United States; has not attained 18 years of age; and with respect to whom there is no parent or legal guardian in the United States, or no parent or legal guardian in the United States available to provide care and physical custody (6 U.S.C. § 279(g)(2)). The Flores Settlement Agreement established a nationwide policy for the detention, treatment, and release of UAC and recognized the particular vulnerability of UAC while detained without a parent or legal guardian present (Flores v. Meese—Stipulated Settlement Agreement (U.S. District Court, Central District of California, 1997)).

Under the Homeland Security Act of 2002, Congress transferred the care and custody of UAC to HHS from the former Immigration and Naturalization Service to move toward a child-welfare-based model of care and away from the adult detention model. In the Trafficking Victims Protection Reauthorization Act of 2008, which expanded and redefined HHS’s statutory responsibilities, Congress directed that each child must “be promptly placed in the least restrictive setting that is in the best interest of the child” (8 U.S.C. § 1232(b)(2)).

Applicable Office of Refugee Resettlement Policies and Procedures

ORR policies and procedures were found in several different manuals during our audit period (October 1, 2013, through September 30, 2015). From October 2013 to January 2015, ORR

\(^2\) Shelter care is provided in a residential-care provider facility in which all of the programmatic components are administered onsite in the least restrictive environment. The goal of shelter care is to provide the least restrictive setting that is in the best interest of the child, taking into consideration potential flight risk and danger to the child and others.
looked to the 2006 draft of the Division of Unaccompanied Children’s Services’ Policies and Procedures Manual (P&P Manual) for applicable policies and procedures. Additionally, ORR used the ORR UAC Program Operations Manual, which was originally issued in April 2012 and updated in December 2012 (Ops Manual 2012), November 2013 (Ops Manual 2013), and April 2014 (Ops Manual 2014). ORR told us that the Ops Manuals covered only certain areas of program management, and where there was no Ops Manual guidance, ORR referred back to the P&P Manual. ORR made changes to both the P&P Manual and the Ops Manual on an ad-hoc basis.

In 2015, ORR issued the ORR Guide: Children Entering the United States Unaccompanied (Policy Guide), effective January 2015, and the ORR UAC Program Operations Guide (Operations Guide), effective September 2015, to replace the previous draft versions. ORR updates these documents on an ad-hoc basis and records the most recent effective date next to each policy provision.

Depending on the date within the audit period and the topic at issue, the applicable policy could be found in the P&P Manual, the Ops Manuals, or the Policy Guide. We applied the applicable policy in effect to determine whether the safety standards were met. In this report, we included citations to the relevant provisions in effect throughout the entire audit period. The content of the provisions and applicable dates are included in Appendix B.

Care Process

ORR funds care providers through cooperative agreements to provide temporary housing and other services to children in ORR custody at State-licensed facilities. These facilities must meet ORR requirements to ensure a high-level quality of care.

Federal Field Specialists (field specialists) are Federal employees who oversee care providers and ensure that they are following ORR requirements. Field specialists are ORR’s field staff, who are assigned to a group of care providers within a region. A field specialist’s authority includes approving or denying all child transfer and release decisions, overseeing care providers, implementing policies and procedures, and serving as a liaison to local stakeholders. Field specialists also provide guidance, direction, and technical assistance to care providers.

Case managers are employees of the care provider. Their responsibilities include:

- coordinating the completion of assessments of UAC,
- completing individual service plans (ISPs),
- assessing potential child sponsors,

3 Although the P&P Manual was marked “DRAFT,” ORR told us that it contained policies and procedures that should be followed.
• making transfer and release recommendations, and

• coordinating the release of a child to a sponsor.

ORR contracts with case coordinators, who act as local ORR liaisons with care providers. Case coordinators serve as third-party reviewers of each case manager’s management of the family reunification process. After reviewing the case managers’ decisions, case coordinators make transfer and release recommendations to the field specialists.

ORR policy requires that children receive certain care and services while in care provider facilities. See Appendix C for a chart of some of these services.

**Family Reunification Process**

In addition to caring for children, care providers facilitate the release of children to family members or other sponsors, known as the family reunification process, according to the following preferences: (1) a parent, (2) a legal guardian, (3) an adult relative, (4) an adult individual or entity designated by the child’s parent or legal guardian, (5) a licensed program willing to accept legal custody, or (6) an adult or entity approved by ORR. ORR has grouped these sponsors into three categories:

• category 1—parents and legal guardians;

• category 2—other immediate adult relatives, such as a brother, a sister, an aunt, an uncle, or a grandparent; and

• category 3—distant relatives and unrelated adults.

In making placement decisions, case managers facilitate background investigations of sponsors. As detailed in Appendix B, the level of the background check depends on the relationship between the sponsor and the child.

During the family reunification process, the case manager is responsible for conducting a suitability assessment of the sponsor. The case manager must not only investigate the background of the sponsor but also confirm the familial relationship of the sponsor to the child. Furthermore, current ORR policy requires the sponsor to complete a sponsor care plan if the sponsor is unlawfully present in the United States. ORR requires a sponsor care plan to ensure that each child has a caregiver, regardless of any complications that could arise from a sponsor’s immigration status.

The field specialist, case manager, and case coordinator each play a role in the decision to release an unaccompanied child to a sponsor. The case manager makes a recommendation to the case coordinator regarding the release. The case coordinator conducts a third-party review of the proposed release and makes a recommendation to the field specialist on the release of
the unaccompanied child to a particular sponsor. If the case manager and case coordinator are unable to agree on a particular recommendation, they may refer the case directly to a field specialist for guidance. Once the case manager and case coordinator present a recommendation to the field specialist, the field specialist reviews the recommendation and makes a release decision.

**Crittenton**

Crittenton is a nonprofit child welfare and behavioral health agency in Fullerton, California. Since 2006, Crittenton has participated in the UAC program and served more than 4,000 children. In FYs 2014 and 2015, Crittenton claimed approximately $20.5 million in Federal funds for the care and placement of 1,096 UAC.

**HOW WE CONDUCTED THIS REVIEW**

To determine whether Crittenton met applicable safety standards, we (1) inspected three facilities that provided shelter care, (2) reviewed Crittenton’s licensing documents and inspection results, (3) reviewed a judgmental sample of Crittenton’s employee files, and (4) reviewed a statistical sample of case files for those children who had been released to a sponsor during FYs 2014 and 2015 (October 1, 2013, through September 30, 2015).

We conducted this performance audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

Appendix A contains the details of our audit scope and methodology, Appendices D and E contain the details of our statistical sampling methodology and sample results and estimates, and Appendix F contains selected definitions of key terms used in this report.

**FINDINGS**

Although Crittenton met most of the applicable safety standards for the care and release of children in its custody, Crittenton released some children to sponsors without conducting all required background checks, and some UAC case files were missing documentation to verify that Crittenton met certain safety standards. In addition, the numbers of released children listed in Crittenton’s quarterly performance progress reports were not readily verifiable for accuracy.

Crittenton stated that it did not conduct all required background checks because of the “surge” in FY 2014, which overwhelmed Crittenton, ORR, and related systems. Crittenton stated that it was not provided resources in time to handle the influx of UAC. The documentation deficiencies occurred because Crittenton (1) did not provide periodic training to case managers,
(2) had insufficient oversight of its staff during the quality review of UAC case files, and
(3) lacked policies and procedures for obtaining missing documents from previous shelter care
providers. In addition, Crittenton’s practice of relying on its case managers to determine the
number of UAC served during each quarter was not effective in providing accurate information
in its quarterly performance progress reports.

Of the 793 children⁴ whom Crittenton released to sponsors during our audit period, we
estimated that Crittenton released 2 percent without conducting all required background
checks. Without conducting all required background checks, Crittenton did not follow ORR
policies to ensure that, for an estimated 16 children, sponsors were properly vetted.⁵

We also estimated that Crittenton did not properly document the care and release of
approximately 9 percent of all children released to sponsors in FYs 2014 and 2015 (4 percent
were related to sponsor background checks, and 6 percent were other documentation errors).⁶
Without adequate documentation in the case files, ORR could not be assured that, for an
estimated 71 children, Crittenton had followed ORR policies on sponsor background checks,
admission and orientation of children, timely medical exams for children after admission to
care, provision of appropriate clothing to children, and notification of the Department of
Homeland Security (DHS) of children’s release to sponsors.

Without accurate information on the number of released children, ORR did not have assurance
that Crittenton ensured program integrity and that every child Crittenton released was
accounted for.

**CRITTENTON RELEASED CHILDREN TO HOUSEHOLDS WITHOUT CONDUCTING
ALL REQUIRED BACKGROUND CHECKS**

Depending on the relationship between the sponsor and the child, the background check could
include the national criminal history check based on fingerprints, the immigration status check,
the child abuse and neglect (CA/N) check, and the public records check. When a home study is

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⁴ Crittenton cared for 1,096 UAC during FYs 2014 and 2015. Our review covered only those children who had been
released directly to sponsors.

⁵ The estimated 16 children reflect the unbiased point estimate. The lower limit at the 90-percent confidence level
is four children. See Appendix E for details of our sample results and estimates.

⁶ The individual error percentages do not add up to 9 percent because some case files had both background-check-
related and other documentation errors.
required, potential sponsors must undergo the CA/N check (Ops Manual 2012 § 4.401; Ops Manuals 2013 and 2014 § 4.402; Policy Guide § 2.5.1). Although a child may be released pending the results of a CA/N check if results are not received in a timely manner, a check must be conducted when required. However, 2 of our 100 sampled UAC case files indicated that Crittenton released 2 children to sponsors when home studies were required without initiating the required CA/N checks. Specifically, in one case, the required CA/N check was never initiated for the potential sponsor, and in the other case, the CA/N check was not initiated for the potential sponsor until 5 months after the child’s release.

Crittenton attributed the deficiencies to the “surge” in FY 2014, which overwhelmed Crittenton, ORR, and related systems. Crittenton stated that it was not provided the resources in time to handle the influx of UAC.

On the basis of our sample results, we estimated that Crittenton released 2 percent of children to sponsors without conducting the required CA/N checks. Without conducting all required background checks, Crittenton did not follow ORR policies to ensure that sponsors were properly vetted. As a result, children may have been at risk of being released to sponsors with significant criminal backgrounds, placing children in danger.

**SOME CASE FILES WERE MISSING DOCUMENTATION TO VERIFY THAT CRITTENTON MET CERTAIN SAFETY STANDARDS**

Of the 100 UAC case files in our sample, 4 files did not contain evidence that Crittenton conducted the required public records checks when vetting sponsors, and 6 files had other documentation errors. We estimated that Crittenton did not properly document the care and release of approximately 9 percent of all children released to sponsors.

**Some Case Files Lacked Evidence of Public Records Checks on Sponsors**

All potential sponsors must undergo the public records check (Ops Manual 2012 § 4.401; Ops Manuals 2013 and 2014, § 4.402; Policy Guide § 2.5.1). However, for 4 of our 100 sampled UAC case files, Crittenton could not provide evidence that it conducted the required public records checks.

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7 A home study is an indepth investigation of a potential sponsor’s ability to ensure a child’s safety and well-being. A home study is conducted for any case in which the safety and well-being of the unaccompanied child is in question and for any case that meets the mandatory Trafficking Victims Protection Reauthorization Act of 2008 home study categories.

8 A CA/N check is conducted for all localities in which the potential sponsor resided in the previous 5 years.

9 One child was released on September 20, 2014, and the other child was released on November 1, 2014. The CA/N check is now required for all potential category 3 sponsors and for potential category 1 and 2 sponsors when a home study is conducted or a special concern is identified.

10 The related systems included the UAC Portal (ACF’s system to collect, maintain, and manage UAC information) and the systems used to conduct the background checks.
checks when vetting sponsors. Specifically, four case files for children that Crittenton released to category 1 or 2 sponsors contained no evidence that public records checks were conducted on the sponsors.

**Documentation Was Missing Because of a Lack of Periodic Training and Insufficient Oversight**

Crittenton stated that it did not document in the UAC case files the public records checks for the sponsors because it did not provide periodic training to case managers and had insufficient oversight of its staff during the quality review of UAC case files to ensure that case files contained all required documentation.

**Unaccompanied Children’s Safety Potentially at Risk Upon Release**

On the basis of our sample results, we estimated that Crittenton did not have evidence that it had conducted public records checks in 4 percent of the cases in which it released children to sponsors in FYs 2014 and 2015. Without documentation in the UAC case files to demonstrate that Crittenton conducted the required public records checks, ORR could not be assured that Crittenton was releasing children to sponsors who had been properly vetted. As a result, children may have been at risk of being released to sponsors with significant criminal backgrounds, placing children in danger.

**Some Case Files Had Other Documentation Errors**

Of the 100 UAC case files in our sample, 6 files had other documentation errors, and 4 of these had more than 1 error. The documentation errors we identified are described below.

**Case Files Were Missing Required Admission and Orientation Documents**

A care provider is required to maintain in each child’s case file certain documents at admission and orientation, which include but are not limited to (1) an inventory of property and cash signed by the child, (2) the child’s acknowledgment of receiving an orientation regarding program rules and policies in his or her language, and (3) the child’s acknowledgment of receiving the Legal Resource Guide (P&P Manual § 1.02; Policy Guide § 5.6.2). For the six sampled case files, Crittenton could not provide one or more of the required documents.

**Case Files Were Missing “Initial Intake” Form**

A care provider must use an “Initial Intake” form to interview a child within 24 hours of arrival at an ORR facility (P&P Manual § 3.01; Policy Guide § 5.6.2). For two of the six sampled case files, Crittenton could not provide us with this form.
A Case File Was Missing Documents To Support Timely Medical Exam

Each child must have a medical exam within 48 hours of arrival at an ORR facility (P&P Manual § 3.01; Policy Guide § 3.2.1). For one of the six sampled case files, Crittenton could not provide documents to support that the required medical exam was performed within 48 hours.

A Case File Was Missing Documents To Support Clean Clothing Distribution

A care provider is required to issue clothing to each child upon admission (P&P Manual § 3.01; Policy Guide §§ 3.2.1 and 3.11). For one of the six sampled case files, Crittenton could not provide us with documents to support that it had given the child clothing upon admission.

A Case File Was Missing Documentation To Prove That Discharge Notification Forms Were Sent to the Department of Homeland Security

Upon release of a child to a sponsor, the care provider is required to complete a Discharge Notification form within 24 hours and email the form to DHS and other stakeholders (Ops Manual 2012 § 4.500; Ops Manuals 2013 and 2014, § 4.501; Policy Guide § 2.8.3). For one of the six sampled case files, Crittenton could not provide documents to support that it notified DHS that it had released the child to a sponsor.

Documentation Was Missing Because of a Lack of Policies and Procedures

Crittenton stated that, in some cases, its case managers could not locate the required documentation. For four of the six sampled case files, Crittenton noted that the children were transferred from another shelter care provider. In those cases, Crittenton could not access the other providers’ electronic records and did not have policies and procedures to obtain any missing documents from the previous providers.11

ORR Could Not Be Assured That Crittenton Followed ORR Policies

On the basis of our sample results, we estimated that Crittenton did not properly document the care or notify DHS of release of approximately 6 percent of all children released to sponsors in FYs 2014 and 2015. As a result, ORR could not be assured that Crittenton followed ORR policies on admission and orientation of children, timely medical exams for children after admission to care, provision of appropriate clothing to children, and notification of DHS of the children’s release to sponsors.

11 Although the Policy Guide did not specify what documentation should follow a child upon transfer, the P&P Manual states that a copy of the child’s case file, with certain documents included, accompanies the child when transferred (P&P Manual § 5.03). ORR policies stated that providers are to maintain comprehensive case files for each unaccompanied child in their care (P&P Manual § 1.02; Policy Guide § 5.6.2). Moreover, as of July 27, 2015, providers were required to perform a quarterly review of case files for completeness (Policy Guide § 5.6.3).
NUMBERS OF RELEASED CHILDREN LISTED IN CRITTENTON’S QUARTERLY PERFORMANCE PROGRESS REPORTS WERE NOT READILY VERIFIABLE FOR ACCURACY

ORR-funded care providers are required to submit quarterly performance reports and comply with other measures to ensure program integrity and accountability (P&P Manual § 4.03; Policy Guide § 5.6). However, the numbers of released children that Crittenton listed in its quarterly performance progress reports covering our audit period were not readily verifiable for accuracy.

Crittenton’s practice of relying on its case managers to determine the number of UAC served during the quarter was not effective in providing accurate information in its quarterly performance progress reports. In addition, Crittenton stated that, because of staff turnover during the audit period, the number of released UAC that the case managers reported was inaccurate; therefore, the quarterly reports did not accurately represent the total number of UAC discharged during the period. Without accurate information on the number of released children, ORR did not have assurance that Crittenton ensured program integrity and that every child Crittenton released was accounted for.

RECOMMENDATIONS

We recommend that Crittenton:

- ensure that all required background checks are conducted and documented,
- provide periodic training to staff on maintaining documentation related to public records checks,
- increase oversight of its quality review for UAC case files to ensure that all required documentation is maintained in the files,
- develop policies and procedures for obtaining necessary documentation in the case files for children transferred from another shelter care provider, and
- develop a process to document the information used to prepare its quarterly performance reports and verify the information’s accuracy.

CRITTENTON COMMENTS AND OFFICE OF INSPECTOR GENERAL RESPONSE

In written comments on our draft report, Crittenton did not indicate concurrence or nonconcurrence with our recommendations; however, it provided information on actions that it had taken or planned to take to address our recommendations:
Regarding our first recommendation, Crittenton stated that it had implemented a system in which the lead case manager or case manager coordinator reviews the discharge packet to ensure that all background checks have been completed before submission to the field specialist for approval.

Regarding our second recommendation, Crittenton stated that the case manager coordinator now reviews documentation requirements in staff meetings each month and provides a quarterly refresher course in processing background checks.

Regarding our third recommendation, Crittenton stated that, although it performs “random sample chart audits,” the sample size and frequency of those audits for both shelter care and long-term foster care have been increased.

Regarding our fourth recommendation, Crittenton stated that it “cannot and will not accept responsibility for the completeness of files [it] cannot control.” Crittenton stated that it will consult with its ORR program officer to determine whether it is directed to refuse transfers from shelter care without complete files or whether the field specialist will be tasked with remediating incomplete records from other providers.

Regarding our fifth recommendation, Crittenton stated that it had implemented an internal reconciliation process between client intake and discharge records maintained by the case manager coordinator and the daily census maintained by the program director.

Crittenton’s comments are included in their entirety as Appendix G.

Regarding our fourth recommendation, we acknowledge that the completeness of the case files for children transferred from another care provider may be out of Crittenton’s control; however, we maintain that Crittenton should develop policies and procedures for obtaining necessary documentation for UAC transferred to its care when the case files are incomplete. Without adequate documentation in the case files, ORR cannot be assured that UAC have received required services or that ORR policies have been followed.
APPENDIX A: AUDIT SCOPE AND METHODOLOGY

SCOPE

To determine whether Crittenton met applicable safety standards, we (1) inspected three facilities that provided shelter care, (2) reviewed Crittenton’s licensing documents and inspection results, (3) reviewed a judgmental sample of Crittenton’s employee files, and (4) reviewed a statistical sample of case files for those children who had been released to a sponsor during FYs 2014 and 2015 (October 1, 2013, through September 30, 2015).

We performed our fieldwork at Crittenton in Fullerton, California, from August 2016 through September 2017.

Our objective did not require an understanding of all of Crittenton’s internal controls. We limited our assessment to Crittenton’s controls pertaining to the selected safety standards we reviewed.

METHODOLOGY

To accomplish our objective, we:

- reviewed applicable Federal laws, regulations, and guidance;
- reviewed grant documents and policies and procedures maintained at Crittenton;
- interviewed Crittenton officials and ORR’s field specialist assigned to Crittenton;
- toured the Crittenton site;
- conducted a review of selected safety standards at the site and noted any deficiencies;
- selected and reviewed a judgmental sample of 30 employee files by:
  - sorting the list of 211 employees by job title and whether the employee had been terminated and
  - selecting 1 or 2 employees from different job titles and employment status;
- selected a statistical sample of UAC case files for children released to sponsors during our audit period (Appendix D);
- reviewed and documented any deficiencies within these sampled UAC case files;
• reviewed Crittenton’s quarterly performance progress reports for our audit period;

• estimated the number and percentage of children whom Crittenton released to sponsors during our audit period without following ORR policies and procedures (Appendix E); and

• discussed our findings with Crittenton officials.

We conducted this performance audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.
APPENDIX B: OFFICE OF REFUGEE RESETTLEMENT REQUIREMENTS DURING OUR AUDIT PERIOD
(effective October 1, 2013, through September 30, 2015)

Unless otherwise noted, Manual provisions are effective as of the following dates:

- Ops Manual 2012—12/21/2012
- Policy Guide—1/30/2015

BACKGROUND CHECKS FOR SPONSORS

To meet the requirement of an independent finding that the sponsor does not have a history that would place a UAC’s safety at risk, in collaboration with the HHS, Office of Security and Strategic Information, Division of Personnel Security, care providers shall conduct criminal history, CA/N, and immigration background checks as follows:

**Ops Manual 2012 § 4.401**

*National (FBI [Federal Bureau of Investigation]) Criminal History Check (Digital Fingerprints)*
- All sponsors
- All adult household members for cases referred for a home study
- May be conducted on any adult household member where a case of special concern is identified

*Immigration Status Check*
- All sponsors

*Child Abuse and Neglect Check*
- The sponsor, for all home study cases
- May be conducted on any adult household member where a case of special concern is identified

*Criminal Public Record Check (Internet)*
- All sponsors
- May be conducted on any adult household member where a case of special concern is identified

*State Criminal History Repository Check and/or Local Police Check*
- For sponsors or household members, may be conducted in special circumstances only for unresolved criminal arrest or issue
Ops Manual 2013 § 4.402

National (FBI) Criminal History Check (Digital Fingerprints)\textsuperscript{12}

- Category 2 and category 3 sponsors
- Category 1 sponsors where there is a documented risk to the safety of the UAC, the UAC is especially vulnerable, and/or the case is being referred for a mandatory home study
- All adult household members for home study cases
- May be conducted on any adult household member where a case of special concern is identified

Immigration Status Check

- All sponsors

Child Abuse and Neglect Check

- The sponsor, for all home study cases
- May be conducted on any adult household member where a case of special concern is identified

Criminal Public Record Check (Internet)

- All sponsors
- May be conducted on any adult household member where a case of special concern is identified

State Criminal History Repository Check and/or Local Police Check

- May be conducted on sponsors or household members in special circumstances only for unresolved criminal arrest or issue

Ops Manual 2014 § 4.402

National (FBI) Criminal History Check (Digital Fingerprints)

- Category 2 and category 3 sponsors
- Category 1 sponsors where there is a documented risk to the safety of the UAC, the UAC is especially vulnerable, and/or the case is being referred for a mandatory home study
- All adult household members for home study cases
- May be conducted on any adult household member where a case of special concern is identified

\textsuperscript{12} During the first 2 months of our audit period (October and November 2013), ORR required all categories of sponsors to undergo a national (FBI) criminal history check. Effective November 25, 2013, this requirement no longer applied to category 1 sponsors. Additionally, for approximately 1 month during our audit period (May 20 through June 16, 2014), ORR did not require fingerprint background checks on any category of sponsor if certain conditions were met.
Immigration Status Check
- All sponsors that require a National (FBI) criminal history check

Child Abuse and Neglect Check
- The sponsor, for all home study cases
- May be conducted on any adult household member where a case of special concern is identified

Criminal Public Record Check (Internet)
- All sponsors
- May be conducted on any adult household member where a case of special concern is identified

State Criminal History Repository Check and/or Local Police Check
- May be conducted on sponsors or household members in special circumstances only

Policy Guide § 2.5.1

National (FBI) Criminal History Check (Digital Fingerprints)
- Category 2 and category 3 sponsors
- Category 1 sponsors where there is a documented risk to the safety of the UAC, the UAC is especially vulnerable, and/or the case is being referred for a mandatory home study
- All adult household members where there is a documented risk to the safety of the UAC, the UAC is especially vulnerable, and/or the case is being referred for a mandatory home study

Immigration Status Check
- Category 2 and category 3 sponsors
- Category 1 sponsors where there is a documented risk to the safety of the UAC, the UAC is especially vulnerable, and/or the case is being referred for a mandatory home study
- All adult household members where there is a documented risk to the safety of the UAC, the UAC is especially vulnerable, and/or the case is being referred for a mandatory home study

Child Abuse and Neglect Check
- Category 3 sponsors
- Category 1 and category 2 sponsors in all cases that require a home study and in any case where a special concern is identified
- All adult household members in any case where a special concern is identified

Criminal Public Record Check (Internet)
- All sponsors
- All adult household members in any case where a special concern is identified
**State Criminal History Repository Check and/or Local Police Check**
- For sponsors or household members, used on a case-by-case basis when there is an unresolved criminal arrest or issue that is still in process

**OTHER DOCUMENTATION**

**P&P Manual § 3.01**

Admission staff shall be responsible for ensuring that:
- an “Initial Intake” form is completed within 24 hours of each UAC’s arrival,
- the UAC receives clean clothing (if needed), and
- the UAC receives a medical examination within 48 hours of admission or the first workday after admission.


DHS shall be provided notice, by email, of the pending release of a UAC. To provide DHS sufficient time to comment on the release of a UAC, the care provider shall not release the UAC until 24 hours have elapsed from the time the care provider emails notification of the pending release to DHS.

**Policy Guide § 2.8.3**

The care provider completes a Discharge Notification form within 24 hours of the physical discharge of the youth and then emails the form to DHS and other stakeholders.

**Policy Guide § 3.2.1**

Care providers must ensure the physical and mental well-being of the child by:
- interviewing the child using an “Initial Intake” form within 24 hours of admission,
- ensuring the UAC receives clean clothing, and
- ensuring the UAC receives a medical examination within 48 hours of admission (excluding weekends and holidays).

**Policy Guide § 3.3.11**

Care providers must provide new clothing and footwear, items for personal hygiene, grooming, and hair as deemed appropriate and needed.
CASE FILE MANAGEMENT

P&P Manual 1.02

ORR’s policy is to ensure that UAC case files are comprehensive, complete, accurate and up-to-date, and that confidentiality and security is maintained.

Care providers shall develop, maintain, and safeguard individual UAC case files and develop an internal policy on staff access and use. This policy shall include a system of accountability that ensures completeness and accuracy of files, preserves the confidentiality of client information, and protects the records from unauthorized use or disclosure.

Each UAC case file shall contain the following information:

**Personal Identifying Information**
- Name/Alien Number
- Initial Intake Form
- Placement and Medical Authorization Forms
- Photographs
- Cover sheet which highlights dates of key services provided (admission date, mental health assessments, counseling sessions, medical treatments, transfers and family reunification/release)
- Case Information/History from Referral Source
- Case Notes/Log

**Legal Information**
- 1-770 Notice of Rights
- Authority to Accept Child
- Case Information Referral
- Case History
- G-28 (if applicable)
- DHS Documents
- Court Documents
- Signed Release of Information (if applicable)

**Medical and Mental Health**
- Admission Assessment Form
- Psycho-Social Summary and ISP
- Updates of Psycho-Social Summary and ISP at 90-day intervals
- Trafficking Addendum
- Staff-Secure/Secure Addendum
- Medical Exam (within 48 hours)
- Medical Records
• Immunization Records
• Individual Counseling Notes
• Group Counseling Log
• Progress Notes Related to Medical or Mental Health Services
• Signed Release of Information
• Copies of Referrals to Medical Providers and Results of Outpatient Consultations

**Care Provider Information**
• Acknowledgment of Orientation Program Rules/Policies/Grievance
• Acknowledgment of Rights and Responsibilities (signed by child in client’s language)
• Incidents Reports (Internal and ORR)
• Telephone Log
• Inventory and Receipts of Cash and Personal Property
• Stipend Log
• Clothing and Supplies Distribution Log

**Education, Training, and Recreation**
• Educational Assessment
• Education Records
• Training Records
• Recreational Activity Log

**Exit Information**
• Family Reunification Packet
• Transfer Forms
• Exit Letter

**Policy Guide § 5.6.2**

Care providers must maintain comprehensive, accurate, and up-to-date case files that are kept confidential and secure. Care providers must have written policies and procedures for organizing and maintaining the content of active and closed case files.

Each UAC case file must, minimally, include the following:

**UAC Information**
• Name and Alien Number
• Birth certificate
• Photograph

**Admission Documents**
• Initial Intakes Assessment
• Placement Authorization form
• Inventory of property and cash (signed by UAC)
• List of clothing and supplies distributed to UAC
• Notice of Placement in Secure or Staff-Secure (if applicable)
• Acknowledgment by the unaccompanied child that he or she has received the orientation in his or her language regarding program rules and policies, grievance procedures, information on boundaries, abuse and neglect; and emergency and evacuation procedures
• Acknowledgment by the unaccompanied child that he or she has received information regarding the local and/or national service providers and organizations available to assist UAC

Legal Information
• Acknowledgment of receiving Legal Resource Guide at admission and discharge
• G-28 (if applicable)
• Executive Office of Immigration Review (i.e., immigration court) documents
• Court Documents/Criminal History Records (if applicable)
• Authorization for Release of Records (if applicable)

Medical Records
• Authorization for Medical, Dental, and Mental Health Care
• Documentation of Initial Medical Exam
• Copies of Referrals for Medical Services
• Medical and Mental Health Records (including over-the-counter medications), diagnosis, and documentation of communicable diseases
• Immunization Records
• Prescriptions (including prescription logs)
• Record of Dental Exam(s)
• TB [tuberculosis] Screening results
• Records of office visits/ER [emergency room] visits/hospital, surgery
• Progress notes related to medical or mental health services (if applicable)
• Diagnosis list

Assessments
• UAC Assessments
• UAC Case Review and updates
• Sponsor Addendum(s) (if applicable)
• ISP and updates

Educational Services
• Summary of Educational Assessments
• Education Plan
Case Management Records
- Case Worker Progress Notes
- Recreation/Activity log
- Telephone Log
- Religious Services Log
- Stipend log (if stipends are mandated by State licensing)

Clinical Services
- Progress notes from individual counseling
- Group counseling notes or records

Incident Report
- Significant Incident Reports
- Documentation of the facility’s Internal Incidents or reports
- Grievances/Grievance Reports
- Discharge/Exit Information
- Family Reunification Packet
- Verification of Release Form
- Transfer Request and Tracking Form
- For transfers only, notice of transfer to ICE [Immigration and Customs Enforcement] Chief Counsel (Change of Address/Change of Venue information)
- Log/ checklist including all documents provided to the UAC at discharge
- Log of Property Returned/disbursed at Discharge
- Discharge checklist for medical records
- Copy of Order of Removal (if applicable)
- Copy of the Trafficking Eligibility Letter, if applicable
## APPENDIX C: SELECTED REQUIREMENTS FOR OFFICE OF REFUGEE RESETTLEMENT

**CARE PROVIDER FACILITIES DURING OUR AUDIT PERIOD**

<table>
<thead>
<tr>
<th>Care/Service</th>
<th>Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initial Intakes Assessment</td>
<td>Within 24 hours of receiving a child, facility staff conduct an assessment to gather information on family members, medical and mental health concerns, medications taken, and personal safety concerns.</td>
</tr>
<tr>
<td>Orientation</td>
<td>Within 48 hours of admission, facility staff provide an orientation to the child, including providing information on the care provider’s rules, regulations, and procedures; the child’s rights and responsibilities; and grievance policies and procedures.</td>
</tr>
<tr>
<td>Medical Services</td>
<td>Within 48 hours of arrival, a child receives an initial medical examination, unless the child has been transferred from another ORR care provider and has documentation showing that the initial examination has already occurred.</td>
</tr>
<tr>
<td>Academic Educational Services</td>
<td>Within 72 hours of admission, a care provider must conduct an educational assessment. Facilities must provide 6 hours of education per day, Monday–Friday, throughout the calendar year in basic educational areas (including English as a second language, if applicable).</td>
</tr>
<tr>
<td>Proper Physical Care</td>
<td>Children are provided suitable living accommodations, food, appropriate clothing, and personal grooming items.</td>
</tr>
<tr>
<td>Individual Child Assessment</td>
<td>Care providers must conduct intake/admission assessments and develop ISPs for UAC to ensure that their needs are accurately assessed and addressed.</td>
</tr>
<tr>
<td>Recreational and Leisure Services</td>
<td>Children are to engage in at least 1 hour of large muscle activity each day and 1 hour per day of structured leisure activity, per a recreational and leisure services plan.</td>
</tr>
<tr>
<td>Individual and Group Counseling Services</td>
<td>Children are provided at least one individual counseling session with a trained social worker and two group counseling sessions per week.</td>
</tr>
<tr>
<td>Legal Services Information</td>
<td>Children are provided information on legal rights and the availability of free legal services.</td>
</tr>
<tr>
<td>Reunification Services</td>
<td>Staff are required to identify sponsors and evaluate the suitability of the sponsor.</td>
</tr>
</tbody>
</table>

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APPENDIX D: STATISTICAL SAMPLING METHODOLOGY

TARGET POPULATION

The target population consisted of all children that Crittenton released to sponsors during FYs 2014 and 2015.

SAMPLING FRAME

We received an Excel file from Crittenton that listed 1,096 children whom it had discharged during FYs 2014 and 2015. From this list, we removed those children who had been transferred, had voluntarily departed, or had run away. In addition, we removed individuals who were 18 years of age or older when they were admitted to Crittenton or who turned 18 while in Crittenton’s care. We also removed children for which the type of discharge was not identified. The remaining 793 children, whom Crittenton directly released to a sponsor, made up our sampling frame.

SAMPLE UNIT

The sample unit was a child whom Crittenton released to a sponsor during our audit period.

SAMPLE DESIGN

We used a simple random sample.

SAMPLE SIZE

We selected 100 children.

SOURCE OF RANDOM NUMBERS

We used the Office of Inspector General, Office of Audit Services (OIG/OAS), statistical software to generate the random numbers.

METHOD OF SELECTING SAMPLE ITEMS

We consecutively numbered the sample units in the sampling frame from 1 to 793. After generating the random numbers, we selected the corresponding frame items.

ESTIMATION METHODOLOGY

Using the OIG/OAS statistical software, we estimated the number and percentage of children whom Crittenton released to sponsors during our audit period without following ORR policies and procedures.
APPENDIX E: SAMPLE RESULTS AND ESTIMATES

Table 1: Sample Results

<table>
<thead>
<tr>
<th>No. of Items in Sampling Frame</th>
<th>Sample Size</th>
<th>No. of Sample Items for Which Not All Required Background Checks Were Conducted</th>
<th>No. of Sample Items With Missing Documentation</th>
</tr>
</thead>
<tbody>
<tr>
<td>793</td>
<td>100</td>
<td>2</td>
<td>9</td>
</tr>
</tbody>
</table>

Table 2: Estimates of Percentage and Number of Children Released to Households Without Conducting of All Required Background Checks *(Limits Calculated at the 90-Percent Confidence Level)*

<table>
<thead>
<tr>
<th>Estimate Description</th>
<th>Percentage of Children</th>
<th>Number of Children</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Lower Limit</td>
<td>Point Estimate</td>
</tr>
<tr>
<td>Case files for which not all required background checks were conducted</td>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

Table 3: Estimates of Percentage and Number of Case Files With Missing Documentation *(Limits Calculated at the 90-Percent Confidence Level)*

<table>
<thead>
<tr>
<th>Estimate Description</th>
<th>Percentage of Children</th>
<th>Number of Children</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Lower Limit</td>
<td>Point Estimate</td>
</tr>
<tr>
<td>Case files lacked evidence of public records checks</td>
<td>2</td>
<td>4</td>
</tr>
<tr>
<td>Case files missing other documentation</td>
<td>3</td>
<td>6</td>
</tr>
<tr>
<td>Case files with at least one error</td>
<td>5</td>
<td>9</td>
</tr>
</tbody>
</table>

<sup>14</sup> The percentage and number of case files with at least one error is less than the sum of the individual error estimates because one sampled case file both lacked evidence of public records checks and was missing other documentation.
APPENDIX F: DEFINITIONS OF KEY TERMS

Care Provider—any ORR-funded program that is licensed, certified, or accredited by an appropriate State agency to provide residential care for children, including shelter, group, foster care, staff-secure, secure, therapeutic, or residential treatment care.

Case Coordinator—an ORR nongovernmental contractor field staff member who acts as a local ORR liaison with care providers and stakeholders and who is responsible for making transfer and release recommendations.

Case Manager—the care provider staff member who coordinates assessments of unaccompanied children, ISPs, and efforts to release unaccompanied children from ORR custody, which includes conducting sponsor background investigations. Case managers also maintain case files for unaccompanied children and ensure that all services for children are documented.

Child Sponsor—an individual (in the majority of cases a parent or another relative) or entity to which ORR releases an unaccompanied child from Federal custody.

Family Reunification Packet—an application and supporting documentation completed by a potential sponsor who wishes to have an unaccompanied child released from ORR into the sponsor’s care. ORR uses the application and supporting documentation, as well as other procedures, to determine the sponsor’s ability to provide for the unaccompanied child’s physical and mental well-being.

Legal Guardian—a person who was appointed to be in charge or have custody of a child in a court order recognized by U.S. courts.

Federal Field Specialist—a field staff member who acts as the local ORR liaison with care providers and stakeholders. A field specialist is assigned to multiple care providers within a specific region and serves as the regional approval authority for unaccompanied children transfer and release decisions.

Placements—The term “placements” includes initial placement of an unaccompanied child in an ORR care provider facility and the transfer of an unaccompanied child within the ORR network of care.

Release—the ORR-approved release of an unaccompanied child from the care and custody of ORR to the care of a sponsor.

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15 Definitions compiled from ORR’s Policy Guide.
APPENDIX G: CRITTENTON COMMENTS

March 19, 2018

Ms. Lori A. Ahlstrand
Regional Inspector General for Audit Services
Office of Audit Services, Region IX
Office of Inspector General
U.S. Department of Health & Human Services
90 - 7th Street, Suite 3-650
San Francisco, CA 94103

Report Number A-09-16-01005

Dear Ms. Ahlstrand,

On behalf of the Crittenton team, I would like to commend and her

As noted in the report, FY 2014 saw an overwhelming surge of young people into
the ORR system of care. This dramatic influx overwhelmed ORR systems and that
of its contract providers. Procedures changed continuously, in an effort to
effective manage such a dramatic increase in case load without a concomitant
infusion of resources. On behalf of our agency and our many colleagues, we
worked alongside ORR and staff to quickly discharge youth to sponsors to
maximize capacity for their care. A similar audit in calmer times would likely yield
a better result. However, the audit period was one of crisis management and i am
proud of the work we did under these trying circumstances. All that said, there
are weaknesses in our systems that you have identified. Those recommendations
have been addressed as follows:

(1) Ensure that all background checks are conducted and documented.

Four client files did not reflect that ALL required background checks were
completed; although no youth was released with NO background check.
To ensure that ALL documents are on file and presented to the Federal
Field Specialist to approve, we implemented a system by which the Lead
Case Manager or Case Manager Coordinator review the discharge packet to ensure that all checks have been completed before submitting to the FFS for approval. This second look is intended to catch missing checks as well as checks completed but documentation not properly filed.

(2) Provide periodic training to staff on maintaining documentation related to public records checks.
Case Manager Coordinator now reviews requirements in staff meetings each month and provides a quarterly refresher course in processing the background checks as well as documentation requirements. The training outline and PowerPoint are also now available on our training portal, Relias, so staff may access the information whenever needed to refresh their understanding.

(3) Increase oversight of quality review for UAC case files to ensure that all documentation is maintained in the files.
Although the agency performs random sample chart audits, the sample size and frequency did not produce the results needed, so both sample size and frequency of chart audits for both Shelter and Long Term Foster Care have been increased. If the audit finds one file with missing documents, the sample size is immediately expanded.

(4) Develop policy and procedures for obtaining necessary documentation in the case files for children transferred from another shelter care provider.
The bulk of the missing documents identified in this audit were items missing from other providers transferring a youth to our long term foster care. We cannot and will not accept responsibility for the completeness of files we cannot control. It was shared during the audit that we cannot access the portal of other providers. We will consult with our ORR Program Officer to determine if we are directed to refuse transfer without complete files, or if the federal field specialist will be tasked with remediating incomplete records from other providers.

(5) Develop a process to document the information used to prepare quarterly performance reports and verify the information's accuracy.
It was correctly noted in the audit that several quarterly reports’ statistical information about UC’s served during the period were in error.
We have since implemented an internal reconciliation process between client intake and discharge records maintained by the Case Manager Coordinator and daily census maintained by the Program Director. Both must agree to each other and to the portal prior to submitting the quarterly report.

We take great pride in the work we do, our partnership with the Office of Refugee Resettlement, and the care of the children and youth entrusted to us. The purpose of any audit is to identify areas of improvement and to recommend a course of action intended to improve efficiency and effectiveness. Thank you for this opportunity to take a critical look at our policies and procedures, and to strengthen our operations.

Sincerely,

Joyce Capelle
Chief Executive Officer