Office of Information Governance and Privacy

U.S. Department of Homeland Security
500 12th St., SW
Washington, D.C. 20536

U.S. Immigration and Customs Enforcement

October 18, 2019

Daniel Alexander McGrath
American Oversight
1030 15th Street, NW
Suite B255
Washington, DC 20005

RE: American Oversight v. ICE
ICE FOIA Case Number 2019-ICLI-00054
Second Interim Release

Dear Mr. McGrath:

This letter is the second response to your Freedom of Information Act (FOIA) request to U.S. Immigration and Customs Enforcement (ICE), dated June 26, 2019. You have requested the following records in connection with 3 FOIA requests:

1. 2019-ICFO-29818, requesting, training materials and policies/directives pertaining to the processing/medical evaluation and care for transgender detainees,
2. 2019-ICFO-36401, requesting training materials and policies/directives pertaining to the processing/medical evaluation and care for pregnant detainees, those that miscarried, juveniles and also emails from Albence, Homan and Vitello & their chiefs of staff on related topics, and
3. 2019-ICFO-36404, requesting various categories of information pertaining to IHSC staffing.

ICE has considered your request under the FOIA, 5 U.S.C. § 552. A total of 300 pages of records were reviewed for this second interim production. The 300 pages of records were located pursuant to a search of the Office of Enforcement and Removal Operations (ERO). Of these, 268 pages were determined to be responsive,8 pages were found to be duplicates or non-responsive and 24 pages were determined to contain potentially proprietary information and as such will be sent to the GEO Group for review pursuant to the submitter notice process under 6 C.F.R. § 5.7. The responsive 268 pages of records are attached and have been marked 2019-ICLI-00054 461 to 2019-ICLI-00054 728. Upon review, ICE has determined that portions of the documents will be withheld pursuant to Exemptions b(6), b(7)(C), and b(7)(E) of the FOIA as described below.

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ICE has applied FOIA Exemptions 6 and 7(C) to protect from disclosure the names, e-mail addresses, and phone numbers of ICE and DHS employees contained within the documents, as well as the names, and other personally identifiable information of other individuals contained within the records.

FOIA Exemption 6 exempts from disclosure personnel or medical files and similar files the release of which would cause a clearly unwarranted invasion of personal privacy. This requires a balancing of the public's right to disclosure against the individual's right to privacy. The privacy interests of the individuals in the records you have requested outweigh any minimal public interest in disclosure of the information. Any private interest you may have in that information does not factor into the aforementioned balancing test.

FOIA Exemption 7(C) protects records or information compiled for law enforcement purposes that could reasonably be expected to constitute an unwarranted invasion of personal privacy. This exemption takes particular note of the strong interests of individuals, whether they are suspects, witnesses, or investigators, in not being unwarrantably associated with alleged criminal activity. That interest extends to persons who are not only the subjects of the investigation, but those who may have their privacy invaded by having their identities and information about them revealed in connection with an investigation. Based upon the traditional recognition of strong privacy interest in law enforcement records, categorical withholding of information that identifies third parties in law enforcement records is ordinarily appropriate. As such, I have determined that the privacy interest in the identities of individuals in the records you have requested clearly outweigh any minimal public interest in disclosure of the information. Please note that any private interest you may have in that information does not factor into this determination.

ICE has applied FOIA Exemption (b)(7)(E) to protect from disclosure information compiled for law enforcement purposes, the release of which would disclose techniques and/or procedures for law enforcement investigations or prosecutions or would disclose guidelines for law enforcement investigations or prosecutions when such disclosure could reasonably be expected to risk circumvention of the law.

FOIA Exemption (b)(7)(E) protects records compiled for law enforcement purposes, the release of which would disclose techniques and/or procedures for law enforcement investigations or prosecutions or would disclose guidelines for law enforcement investigations or prosecutions if such disclosure could reasonably be expected to risk circumvention of the law. I have determined that disclosure of certain law enforcement sensitive information contained within the responsive records could reasonably be expected to risk circumvention of the law. Additionally, the techniques and procedures at issue are not well known to the public.

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If you have any questions about this letter, please contact AUSA Diana Valdivia with the United States Attorney's Office at 202 252 2545.

Sincerely,

Toni Fuentes for

Catrina M. Pavlik-Keenan
FOIA Officer

Enclosure(s): 268 page(s)

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U.S. IMMIGRATION AND CUSTOMS ENFORCEMENT

ICE Directive 11032.3: Identification and Monitoring of Pregnant Detainees

Issue Date: **December 14, 2017**
Effective Date: **December 14, 2017**
Superseded: ICE Policy 11032.2: *Identification and Monitoring of Pregnant Detainee* (August 15, 2016).
Federal Enterprise Architecture Number: 306-112-002b

1. **Purpose/Background.** This Directive sets forth policy and procedures to ensure pregnant detainees in U.S. Immigration and Customs Enforcement (ICE) custody for immigration violations are identified, monitored, tracked, and housed in an appropriate facility to manage their care. This Directive codifies existing ICE policy and procedures and complements ICE's national detention standards[1] and ICE Health Service Corps (IHSC) policies.

2. **Policy.** ICE is committed to identifying and providing appropriate care for pregnant detainees in ICE custody. ICE's detention standards generally require detention facilities to notify ICE after a pregnant detainee is identified.

   Enforcement and Removal Operations (ERO) officers and Homeland Security Investigations (HSI) agents will notify their Field Office Directors (FODs) and Special Agents in Charge (SACs), respectively, when they arrest and detain a pregnant individual in ICE custody. HSI SACs shall notify the ERO FOD when administratively arresting a pregnant individual who will be detained in ICE custody. ERO FODs shall notify the local Field Medical Coordinator (FMC) upon learning of a pregnant detainee.

3. **Definitions.** None.

4. **Responsibilities.**

4.1. **ERO Field Office Directors** are responsible for:

   1) Ensuring local IHSC and custody personnel, or medical staff in non-IHSC staffed facilities, have a process in place to notify the FOD, consistent with applicable detention standards, no later than 72 hours after a detainee is determined to be pregnant;

   2) Ensuring detention facilities are aware of their obligations regarding pregnant detainees under this Directive and applicable ICE detention standards;

[1] Refers to the National Detention Standards (NDS) 2000, Performance-Based National Detention Standards (PBNDS) 2008, and the PBNDS 2011.

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3) Ensuring pregnant detainees receive appropriate medical care including effectuating transfers[2] to facilities that are able to provide appropriate medical treatment;

4) Monitoring, in coordination with IHSC, the condition of pregnant detainees; and

5) Ensuring that ERO officers are aware of policy related to the use of restraints for pregnant detainees.

4.2. HSI Special Agents in Charge (SACs) are responsible for:

1) Ensuring the HSI agents notify the SAC as soon as practical when a pregnant individual is arrested;

2) Notifying the FOD as soon as practical when a pregnant individual is arrested and is detained in ICE custody; and

3) Ensuring HSI agents are aware of policy related to the use of restraints for pregnant detainees.

4.3. IHSC Personnel are responsible for:

1) Notifying the FOD and IHSC HQ, as soon as practical, when a pregnant detainee is identified;

2) Monitoring, in coordination with the FOD, the condition of pregnant detainees, including the term of the pregnancy, general health of the pregnant detainee, and medical condition of the fetus, and communicating with the FOD about any specific risk factors or concerns;

3) Oversight and review of facility capabilities to determine if a pregnant detainee's needs can be accommodated and recommending to the FOD when a pregnant detainee's transfer to another facility is necessary for appropriate medical care; and

4) Developing and maintaining a system for tracking and monitoring all pregnant detainees in ICE custody.

4.4. ERO Field Operations Personnel are responsible for:

1) Consulting with FODs and IHSC on custody determinations or detention facility placement decisions for a pregnant detainee; and

2) Providing case, location, and status information as appropriate to assist IHSC with tracking and monitoring pregnant detainees.

[2] All transfer determinations shall be made in accordance with the requirements of ICE Policy 11022.1: *Detainee Transfers* (Jan. 4, 2012), or as updated.

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4.5. **ICE Officers and Agents** are responsible for notifying, as soon as practical, the SAC or FOD, through their chain of command, when a pregnant individual is arrested and detained in ICE custody.

5. **Procedures/Requirements.**

5.1. **Medical Needs of Detainees.** IHSC will assess detention facilities to determine their ability to meet the needs of pregnant detainees and monitor and track the medical condition of individual pregnant detainees while in ICE custody. When it is determined that a facility cannot provide appropriate medical care in a particular case, the pregnant detainee will be transferred to another detention facility or off-site treatment facility that can provide appropriate medical care.

6. **Recordkeeping.** IHSC will maintain medical records in accordance with records retention schedule DAA 567-2015-0002, which states in relevant part, that medical records for an adult will be retained for 10 years after an individual has been released from ICE custody, and then shall be destroyed. Medical records for minors must be retained until the minor's 27th birthday. ERO will maintain the records of custody determinations in accordance with records schedule DAA-0563-2013-0001-006. These records are destroyed 75 years after the end of the calendar year in which the data is gathered.

7. **Authorities/References.**

7.1. Immigration and Nationality Act §§ 212(d)(5), 235(b), 236, & 241.

7.2. 8 C.F.R. §§ l.l(q), 212.5, 235.3, & 236.2(b).

7.3. 2000 National Detention Standards, including "Medical Care" Standard.

7.4. 2008 Performance Based National Detention Standards, including Standard 4.3 "Medical Care."

7.5. 2011 Performance Based National Detention Standards, including: Standard 2.15 "Use of Force and Restraints"; Standard 4.3 "Medical Care"; and Standard 4.4 "Women's Medical Care."

7.6. IHSC Policy 04-02 "Women's Medical Care."

7.7. ICE Policy No. 11020.1: *Use of GPS Monitoring Devices on Persons who are Pregnant or Diagnosed with a Severe Medical Condition* (Sept. 14, 2009), or as updated.

8. **Attachments.** None.

9. **No Private Right.** This document provides only internal ICE policy guidance, which may be modified, rescinded, or superseded at any time without notice. It is not intended

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to, does not, and may not be relied upon to create any right or benefit, substantive or procedural, enforceable at law by any party in any administrative, civil, or criminal matter. Likewise, no limitations are placed by this guidance on the otherwise lawful enforcement or litigative prerogatives of ICE.

Thomas D. Homan
Deputy Director and Senior Official
Performing the Duties of the Director
U.S. Immigration and Customs Enforcement

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DHS-19-0195-B, 19-0494-B, 19-0495-B-000004
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South Texas Detention Complex

Pregnancy Education

Common Discomforts during Pregnancy

Nausea

Many women suffer from nausea or vomiting during the early months of pregnancy. This problem often is called "morning sickness," but it can occur at any time of the day. Nausea and vomiting usually stop by the end of the third month of pregnancy. Until then suggest these tips:

- If able buy and keep crackers, dry cereal, or dry bread beside bed. Eat a small amount slowly in the morning before getting out of bed.
- Avoid sudden movements. Get up slowly in the morning.
- Don't lie down after meals.
- Never go for long periods without food. Try not to overload your stomach when you eat.
- Drink fluids (juice, milk, soup) between meals rather than with meals.
- Go easy on salt and spices.
- Avoid greasy and fried foods.
- When you feel nauseated between meals, sip on fruit juice or water, or eat a small snack.
- Get plenty of rest.
- Avoid smells that upset your stomach.

Heartburn

Heartburn is a burning feeling in the chest. The pressure of the growing baby on the stomach can send stomach acid into the "food pipe" (esophagus). The acid causes the burning feeling. Heartburn usually occurs later on during pregnancy. Here are some tips to prevent or help relieve heartburn:

- Eat 5 or 6 small meals each day.
- Chew food slowly.
- Avoid eating foods that form gas (broccoli, cabbage, beans, nuts, and onions).
- Avoid citrus fruits or juices.
- Drink fluids between meals – not with meals.
- Do not eat or drink within a few hours of bedtime.
- Do not lie down right after meals.
- Wear clothes that are loose at the waist.
- Limit greasy and fried foods.
- Eat lightly seasoned foods. Avoid using too much pepper, chili, and garlic.
    - **For heartburn or indigestion**, give an antacid such as Maalox per RN guidelines.

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South Texas Detention Complex

Pregnancy Education

Constipation

Constipation is common during pregnancy for many reasons. The hormones produced during pregnancy can affect the digestive system. The pressure of the growing baby can slow the action of your intestines. Prenatal vitamin supplements that contain iron also can cause constipation. Try the following tips to prevent or help relieve constipation:

- Drink 6 to 8 glasses of liquid every day. Water, milk, fruit juices, and soup are good choices. Having a warm drink as soon as you wake may help.
- Drink 8 to 10 glasses of water daily. Don't drink caffeine. Eat fiber rich foods like fruits, vegetables, whole grains cereals. Try mild physical activity.
- Exercise regularly. Take a daily walk.
    - **For constipation**, you may give Docusate per RN guidelines.

Hemorrhoids

Hemorrhoids may occur if you have constipation. They are swollen veins of the rectum that may itch, burn, or sometimes bleed. To avoid making hemorrhoids worse or to help relieve them, follow these tips:

- Take steps to prevent constipation.
- **Do not** strain to have a bowel movement.
- Drink lots of fluids.
- Eat fiber-rich foods, like whole grains, vegetables and fruits.

Leg cramps

Leg cramps are common during pregnancy. They may be caused by a mineral imbalance or from the pressure of the enlarged uterus. Try these suggestions:

- Avoid soda pop.
- Gently stretch the calf muscle by flexing the foot and pointing the toes.
- Use warm compresses.
    - **For muscle aches or mild pain**, you may give acetaminophen per RN guidelines, every 6 hours as needed.

Backache

Backache is the most common problem in pregnancy. It tends to get worse as the pregnancy progresses. To keep the body balanced, the back curves inward as the uterus grows. This change in posture causes varying degrees of backache. Try these tips:

- Keep good posture. Sit, stand, and walk with back straight.
- Use good body mechanics. When lifting something from the floor, bend the knees instead of bending at the waist.
- Take breaks throughout the day and rest the back.
- Apply heat to lower back.
- Place a pillow or rolled towel behind lower back when sitting.
    - **For muscle aches or mild pain**, you may give acetaminophen per RN guidelines, every 6 hours as needed.

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South Texas Detention Complex

Pregnancy Education

Shortness of breath

As your uterus gets bigger, the lungs do not have as much room to expand. Try the following tips:

- Slow down when walking long distances.
- Prop yourself up at night.
- Avoid sleeping flat on back. Lying on side is usually more comfortable.

Toward the very end of pregnancy, especially if this is the first pregnancy, the baby may "drop." This means the baby will be lower in the body. This is sometimes called "lightening." When and if this happens, the patient will be more comfortable and will be able to breathe better.

Swelling

Swelling of the feet and legs is common toward the end of pregnancy. With the added weight of pregnancy, circulation is slower to return the fluid to the heart, especially from feet.

***Let the Rendering Provider know if there is swelling in the legs, face, or hands. This could be a sign of pregnancy-induced hypertension (PIH) or toxemia.

To relieve some of the swelling:

- Avoid standing or sitting for a long time.
- Keep legs raised whenever possible.
- Place pillows under legs when lying down.
- **Do not** cross legs when sitting.
- **Do not** wear knee-high socks, knee-high nylons, or thigh-high nylons with tight elastic bands.
- Lie on side when resting.

Difficulty sleeping and fatigue

Most pregnant women have difficulty sleeping, especially during the last trimester of pregnancy. It's hard to get comfortable in bed, and there are so many things to think about — the baby, labor, delivery, just to name a few. Listen to the body and rest when able if you are tired during the day. Try these tips to help you sleep:

- Take a warm shower at bedtime.
- Read before bed.
- Make self as comfortable as possible.
- Avoid eating a large meal within 2 to 3 hours of bedtime.
- Avoid caffeine.
- Do relaxation exercises.
- Drink needed fluids earlier in the day, so you can drink less in the hours before bed.

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South Texas Detention Complex

Pregnancy Education

Nasal stuffiness

A stuffy nose is common for a lot of pregnant women. Since the blood volume increases during pregnancy, it affects the membranes inside the nose, causing them to swell. The nasal passages may feel very dry. Frequently blowing the nose may cause a nosebleed to occur. Try the following:

- Drink more fluids.
- Avoid known allergies.
- Breathe in steam from a hot shower, humidifier, or vaporizer.
- Use saline (saltwater) nose spray.
- Use warm, moist towels on sinuses, and massage your sinuses.
    - **For head congestion or stuffy nose**, you may give saline nasal spray per RN guidelines. You may also give Diphenhydramine 25 mg per RN guidelines. Use Benadryl with caution. It may cause drowsiness.

Varicose veins

During pregnancy, pressure from the enlarged uterus interferes with the return of blood from the feet and legs. This can cause varicose veins to appear. Try these tips:

- Exercise regularly.
- Avoid tight clothing.
- Wear full-length support hose when standing or walking for a long time.
- **Do not** wear knee-high socks, knee-high nylons, or thigh-high nylons with tight elastic bands.
- Avoid sitting or standing for long periods of time.
- Raise legs whenever possible.

Vaginal Discharge

Normal vaginal discharge during pregnancy is called leukorrhea and is thin, white, milky, and mild smelling. Leukorrhea is normal and nothing to worry about. Its presence, though never especially pleasant, is normal throughout the entire pregnancy — it protects the birth canal from infection and maintains a healthy balance of bacteria in the vagina. You may also notice your discharge is brown or pink – as long as you're not heavily bleeding this vaginal spotting is most often a normal symptom of pregnancy. However if the discharge is yellowish, greenish or thick and cheesy with a foul odor, refer to the rendering provider as this may be a vaginal infection that requires treatment.

- Wear pads or panty liners (never a tampon) to absorb the discharge if they help to feel more comfortable.
- Keeping clean and dry down there can help prevent some of the unpleasant odors that can possibly go along with vaginal discharge during pregnancy.

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Frequent urination

Frequent urination occurs in the first trimester and in the last trimester. The enlarged uterus puts a lot of pressure on the bladder, especially when the baby drops at the end of pregnancy. This problem almost always improves after delivery. These suggestions may help:

- Do Kegel exercises to help strengthen the muscles around the urethra (the opening to your bladder), vagina, and rectum.
- It is possible to pass urine when coughing, sneezing, or laughing too hard. Wear a pad to absorb and ensure comfort.

Cold or the Flu

Colds and the flu are viruses that can be spread easily to others. Symptoms usually will improve on their own after a few days. There is no cure for colds or the flu. Antibiotics do not cure them. Taking the medicines listed below for pain, cough, and sore throat may help with discomforts until the virus is gone. Encourage the following suggestions to those that are pregnant with a cold or the flu:

- Wash hands often.
- Get as much rest or sleep as possible.
- Use paper tissues. Throw the tissues away in a trash basket.
- To help loosen congestion, drink plenty of fluids. Should drink hot decaf drinks or juices.
- Avoid having too many dairy products, like milk. These can thicken mucus secretions.

Emotional Changes in Pregnancy

Mood Swings

Mood swings are common in pregnancy and may occur daily. One moment she may be in tears and the next moment she may be angry. This could be due to hormone changes or tiredness. In fact, all of the changes the patient is going through can lead to mood swings. Sometimes it can help just to know that your feelings and experiences are normal. It's very common to worry about how you look and feel. She may be concerned about labor and delivery. She may find it helpful to talk about these feelings with others.

Other changes that occur in pregnancy and treatment

Extreme tiredness

Breast swelling and tenderness – Wear a maternity bra with good support

Headache

Weight gain or weight loss

Numbness and tingling of the fingers called carpal tunnel syndrome – Take frequent breaks to rest the hand .Ask for a splint to keep the wrists straight.

Craving or distaste for certain foods

Stretch marks or skin changes – These usually fade after delivery.

Itching – Use gentle soaps and moisturizing creams, avoid hot showers and baths.

Dizziness – Stand up slowly, avoid standing too long, don't skip meals, lie on your left side.

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Most of these discomforts will go away as the pregnancy advances and some women don't feel any discomfort at all.

NOTE: EVERY WOMAN IS DIFFERENT AND EACH PREGNANCY IS DIFFERENT.

Medications during Pregnancy

All medicines affect your body in some way. We need to be extra careful about giving medications to our pregnant patients. CDC's focus on medications in pregnancy is an initiative called ***Treating for Two: Safer Medication Use in Pregnancy***. This initiative aims to prevent birth defects and improve the health of mothers by working to identify the best alternatives for treatment of common conditions during pregnancy.

Below are some recommended medicines for common discomforts, colds, and the flu during pregnancy:

- **For headaches, muscle aches, or mild pain**: Acetaminophen, two tablets by mouth every 6 hours as needed for pain. Do NOT give Ibuprofen.
- **For head congestion or stuffy nose:** Saline nasal spray, two sprays in each nostril every 6 hours or Diphenhydramine 25 mg, one capsule by mouth every 6 hours as needed. Use Benadryl with caution. It may cause drowsiness.
- **For a sore throat:** Warm salt water gargles; Throat lozenges/cough drops from commissary.
- **For a cough:** Guaifenesin as directed.
- **For seasonal allergies or hay fever**: Diphenhydramine 25 mg, one capsule by mouth every 6 hours as needed. Use Benadryl with caution. It may cause drowsiness.
- **For heartburn or indigestion:** Maalox as directed.

Red Flags during Pregnancy

- Bleeding from vagina like having a period with or without pain. This bleeding is heavier than spotting.
- Passage of anything that looks like tissue onto a pad or into the toilet.
- A sudden increase in swelling in face, hands, or ankles
- Constant, very bad headache
- Blurred or fuzzy vision
- Urinating smaller amounts than usual
- Pain or burning while urinating
- Chills, fever, or feeling sick
- Sharp or constant pain in abdomen
- Any fall, blow, or injury to lower abdomen, with or without pain
- Water coming from vagina
- Fewer movements by baby or a change in movements for more than 4 hours

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PREGNANCY SUPERVISION

(b)(6), (b)(7)(C), MD

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INTAKE OF THE PREGNANT PATIENT

- Intake Actions Note demographic information. Schedule provider PE-C within 2 business days (soonest preferred.) Confirm pregnancy with urine pregnancy test. Urgent referral for complication or related sexual assault. Provide educational brochures. Make notifications for placement on pregnancy tracker. Set global MED / PSYCH alert to pregnant.

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WHAT TO DO AT THE PE-C

- Provider Initial Visit Actions Note pregnancy history. Initiate OB referral within 2 business days. Order prenatal vitamins, imunizations (when needed), and applicable labs. Urgent OB or ED referral for any emergency or complication of pregnancy. Provide prenatal counseling. Initiate special needs form: low bunk/tier, no restraints, pregnancy diet, light duty. Place on MED Hold only if applicable. Complete PE-C and antepartum information.

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INITIAL SCREENING LABS

- Blood type and D (Rh) typeAntibody ScreenHgb / Hct (from CBC)RPR / VDRL (Syphilis)Urine culture / screenHBsAgHIV Screen
- ChlamydiaGonorrheaRubella ImmunityVaricella ImmunityTB ScreenZika Screen

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WORK WITH THE OB TO COMPLETE THESE IF / WHEN INDICATED

- PAP / HPV (when indicated)Diabetic screen (when indicated)Cystic fibrosis (when indicated)Aneuploidy screen (when indicated)Fetal Survey U/S (18-24 weeks)
- TDAP (27-36 weeks)Diabetic screen (24-28 weeks)RhIg (Rhogam -28+ wks if indicated)Gr. B Strep (35-37 weeks)Resistance testing if PCN allergy

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THE ROUTINE PRENATAL VISIT

- *For routine supervision, Q4 weeks until week 28 then Q2 weeks until week 36 then weekly. Fetal doppler each visit after 12 weeks, fundal height each visit after 20 weeks. U/A at initial visit and as clinically indicated. Cervix checks when indicated, typically in late 3rd trimester. Note significant symptoms in notes and problems lists (and EHR notes / plans) - n/v, H/A, blurred vision, vaginal bleed, LOF, dysuria, pelvic pain, fetal movement. The fundus should generally be at the level of the umbilicus at 20 weeks and measurements should progress 1 cm/week after 20 weeks.Fundal height is measured from the superior aspect of the pubic symphysis to the upper edge of the uterine fundus.*

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THE PRENATAL VISIT (TUMMY CHECK)

- Date Weeks BP U/A: Prot/Gluc Pain (0-10)Fetal Mvmt. Labor Signs FHR Fundal Hgt. Cervix

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THE OBSTETRIC REFERRAL

- 25yo G3P1A1 at _ weeks based on sure LMP of _ with limited prenatal care, taking prenatal vitamins only since arrival to facility on _ . Treated for asymptomatic UTI. Initial prenatal labs completed and attached. Previous spontaneous abortion at 6 weeks. Referred for routine prenatal care.

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COMMON QUESTIONS

- When is an ultrasound indicated?Is there more than one type of obstetric ultrasound?Do we test for Zika on everyone from an endemic country?Is TSH a prenatal lab?What medications can be used in pregnancy?How do you do measure fundal height?When can you hear the baby's heart beat and what should it be?What if you do not hear the baby's heart beat?

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FUNDAL HEIGHT MEASUREMENT



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PREGNANCY COMPLICATIONS

- H/A, blurry vision, LOF, vaginal bleeding, pain, preterm contractions, absence of fetal movement, dysuriaHyperemesis gravidarumAsymptomatic UTIHypertensionDiabetesElective terminationSpontaneous abortionSTDs

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U.S. IMMIGRATION AND CUSTOMS ENFORCEMENT
ENFORCEMENT AND REMOVAL OPERATIONS
ICE HEALTH SERVICE CORPS

WOMEN'S HEALTH SERVICES

IHSC Directive: 04-02 ERO
Directive Number: 11772.2
Federal Enterprise Architecture Number: 306-112-002b
Effective Date: August 23, 2017

By Order of the Assistant Director
Stewart D. Smith, DHSc STEWART D SMITH

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1. **PURPOSE:** The purpose of this issuance is to set forth the policy and procedures for the delivery and administration of women's health services.

2. **APPLICABILITY:** This directive applies to all U.S. Immigration and Customs Enforcement (ICE) Health Service Corps (IHSC) personnel, including but not limited to, Public Health Service (PHS) officers, civil service employees, and contract personnel. It is applicable to IHSC personnel supporting health care operations in ICE-owned and contracted detention facilities and to IHSC Headquarters (HQ) staff. This directive applies to contract personnel when supporting IHSC in detention facilities and at HQ. Federal contractors are responsible for the management and discipline of their employees supporting IHSC.

3. **AUTHORITIES AND REFERENCES:**

3-1. Title 8, Code of Federal Regulations, Section 235.3 (8 CFR § 235.3), Inadmissible Aliens and Expedited Removal;

3-2 Section 232 of the Immigration and Nationality Act, as amended, Title 8, U.S. Code, Section 1222 (8 U.S.C. § 1222), Detention of Aliens for Physical and Mental Examination;

3-3. Title 8, Code of Federal Regulations, Part 232 (8 CFR 232), Detention of
Aliens for Physical and Mental Examination;

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3-4 Section 322 of the Public Health Service Act, as amended, Title 42 U.S. Code, Section 249(a) (42 U.S.C. § 249(a)), Medical Care and Treatment of Quarantined and Detained Persons; and

3-5. Title 42, U.S. Code, Section 252 (42 U.S.C. § 252), Medical Examination of Aliens.

3-6. IHSC Directive 03-01/ERO Directive Number 1178.4, Sexual or Physical Assault, Abuse and/or Neglect dated 01 Dec 15.

4. **POLICY:** Female detainees/residents receive routine age-appropriate gynecological and obstetrical health care assessments and preventive women's health services as medically appropriate.

4-1. **Chaperones.** IHSC staff serves as the chaperone when needed, and a chaperone of the same-sex as the detainee is provided. For transgender detainees, the detainee will indicate his or her preferred sex of the chaperone. Custody or ICE Field Operations staff may be utilized if no other IHSC staff member is available; however, the detainee's consent will be obtained. If the detainee refuses, the examination will be rescheduled to permit the use of an IHSC staff member chaperone. Non-IHSC staff should not be routinely used as chaperones for the simple convenience of IHSC staff. If safety concerns dictate that a custody officer be present, consent is not required. Detainees are never used as chaperones.

NOTE: Staff must document in the medical encounter the name and title of the chaperone used.

A chaperone will be used during the health assessment or any other clinical encounter involving the following circumstances:

4-1.1 When requested by the detainee.

4-1.2 Examination of the breasts, genitalia, or anal/rectal area.

4-1.3 Other circumstances in which staff feel a chaperone is appropriate.

4-2. **Intake Screening.** *See* IHSC Directive: 03-08: *Pre-Screening,* dated 19 Jan 2015, for female-specific health care requirements.

4-3. **Initial Health Assessment.** If the initial medical intake screening indicates a pregnancy, prior physical and/or sexual victimization, assault or violence,

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or the need for emergency contraception (due to unprotected sex within the past five (5) days), a mid-level provider (MLP) or physician must complete the initial health assessment as soon as appropriate, and no later than two business days. A behavioral health provider (BHP) must also evaluate the detainee/resident within 72 hours, if indicated.

Note: Medical providers must ensure that detainees / residents, who have been sexually assaulted or raped within the prior five days, are evaluated off-site at an emergency department or other appropriate facility.

4-3.1 The health assessment includes the following information:

4-3.1.a Pregnancy test results (ages 10-56);

4-3.1.b Whether the detainee/resident is currently breastfeeding;

4-3.1.c Whether contraception is currently being utilized; if yes, type of contraception utilized;

4-3.1.d A reproductive history (number of pregnancies/ births/ abortions/ living children) and pregnancy complications;

4-3.1.e Whether the detainee/resident is menstruating; if yes, menstrual regularity and interval;

4-3.1.f History of breast and gynecological problems;

4-3.1.g Family history of breast and gynecological problems; and

4-3.1.h History of physical or sexual victimization; if yes, when it occurred.

4-3.2 If a medical provider deems testing appropriate and necessary (high risk and/or symptomatic), a pelvic examination, Papanicolaou test (Pap test), breast examination, mammography, and/or sexually transmitted infection (STI) testing must be offered and scheduled within 14 days from the initial health assessment. These additional testing and exams are deferred for asymptomatic or low risk detainees/residents until the detainee/resident has been in ICE custody for one year. Only MLPs and physicians can perform pelvic and breast examinations. Female detainees/residents may request Pap tests and/or STI testing at

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any time, provided these services are available on-site.

4-4. Mental Health Services. In addition to regular mental health services offered to all detainees/residents, a BHP must evaluate any female detainee/resident who has recently (occurring within the past 30 days) given birth, miscarried, or terminated a pregnancy. If screening indicates any prior sexual victimization or perpetration of sexual abuse, the detainee/resident must be referred to a qualified BHP for a mental-health evaluation, as appropriate. The BHP must perform the mental-health evaluation within 72 hours of the referral. For victims of sexual abuse or assault in custody, refer to IHSC Directive: 03-01, *Sexual or Physical Assault, Abuse and/or Neglect*, dated 28 Mar 2016.

4-5. Preventive Women's Services. Medical providers offer preventive health care services specific to women in line with respected authorities, such as the U.S. Preventive Services Task Force (http://www.uspreventiveservicestaskforce.org/).

4-5.1 Women's Health Screening. During the annual physical examination, medical providers should offer age-appropriate screenings for asymptomatic individuals, to include breast examinations, Pap tests, STI testing and mammograms, if indicated. These services should not interfere with the detainee's/resident's deportation or release from custody date. If a detainee/resident is symptomatic at any point during ICE custody, a medical provider should offer and schedule the necessary and clinically indicated testing and exams.

4-5.2 Medical Contraceptive Therapies. At the detainee's/ resident's request or in response to a public health threat (e.g., Zika virus, etc.), medical providers must provide detainees/residents with non-directive (impartial) advice and consultation pertaining to family planning and contraceptive medication options. Medical providers may prescribe and dispense contraceptives, including emergency contraception, if medically appropriate and not otherwise barred by federal law. The detainees/ residents should have access to written information about contraceptive methods and community resources. The detainee/ resident always have the choice to decide whether to use, or not use, medical birth control measures.

4-5.2.a In the context of this directive, medical contraception provided by IHSC refers to oral contraceptives (estrogen and

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progestin combinations and progestin-only products), injectable depot medroxyprogesterone, progestin-releasing intrauterine devices (IUDs) and—for the purposes of emergency contraception—levonorgestrel or ulipristal acetate. IHSC does not provide subdermal implantable progestin contraceptives, estrogen and/ or progestin skin patches or vaginal ring devices, tubal ligation procedures, or barrier method devices (condoms, vaginal sponges, diaphragms, and cervical caps) unless approved by both of the IHSC Associate Medical Directors or designees.

4-5.2.b Medical providers must utilize formulary contraceptive therapy options unless an appropriate justification exists for a non- formulary medication. If a detainee/ resident was prescribed birth control prior to detention and would like to continue birth control in detention, the detainee's/ resident's contraception should be offered a change to a formulary agent with the consent of the detainee/resident.

4-5.2.c If during the intake screening, a detainee/ resident reports unprotected sex within the past five days from which an unwanted pregnancy may result, she must be offered emergency contraception. See IHSC Directive: 04-01, *Emergency Contraception,* dated 24 Mar 2016.

4-5.2.d Medical providers must discuss the risks and benefits of medical contraceptive therapy with the detainee/resident and document the discussion in the detainee's/resident's health record prior to prescribing.

4-5.2.e Medical contraceptives may also be used to manage medical conditions (e.g., menorrhagia, dysfunctional uterine bleeding and resulting anemia, hypogonadism). Emergency contraception may also be used for certain situations (e.g., sexual assault).

4-5.3 Pregnancy Care.

4-5.3.a Prenatal and Postnatal Care. While in ICE custody, a pregnant detainee/resident must receive prenatal and postnatal care from a medical provider, in consultation with an obstetric specialist. Medical providers must provide

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relevant laboratory results and objective measurements (e.g., fetal heart tones rate, fundal height measurement, etc.) to the obstetrician to facilitate continuity of care.

4-5.3.b Regular Appointments. Medical providers must see pregnant detainees/residents on a monthly basis, or more often based on risk factors or the recommendation of the obstetrics specialist.

4-5.3.c Documentation. The medical provider must document progress in the detainee's/resident's eHR using information set forth in the Prenatal Care History and Physical Exam Form (IHSC Form 846) or electronic equivalent.

4-5.3.d High Risk Pregnancies. The medical provider must evaluate risk factors and provide a summary of those risk factors in the consultation note in the eHR. All pregnant detainees/residents identified by an obstetrician as "high risk" must be referred to a physician specializing in high risk pregnancies. *See* Section 5-4 below for reporting processes and requirements.

4-5.3.e Management of Chemically Dependent/ Addicted Pregnant Detainees. Pregnancy significantly complicates detoxification management. The possibility of pre-term labor and miscarriage is increased if detoxification is not managed appropriately. Substances that produce withdrawal syndromes for individuals with physiological dependence include alcohol, sedatives/hypnotics, anxiolytics, and opioids. All chemically dependent pregnant detainees are considered high risk and must be referred to an obstetrician and/or another medical provider capable of addressing their needs immediately.

4-5.3.f Use of Restraints. A pregnant detainee/resident in post-delivery recuperation should not be restrained, unless truly extraordinary circumstances that render restraints absolutely necessary exist and are documented by a supervisor or directed by the on-site medical authority. This general prohibition on restraints applies to all pregnant detainees/resident in the custody of ICE, whether during transport, in a detention facility, or at an outside medical

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facility. Restraints are never permitted on detainees/residents who are in active labor or delivery. Restraints should not be considered as an option, unless one or more of the following applies:

- A medical officer has directed the use of restraints for medical reasons;
- Credible and reasonable grounds exist to believe that the detainee/resident presents immediate and serious threat of hurting herself, staff, or others; or
- Reasonable grounds exist to believe that the detainee/resident presents an immediate and credible risk of escape that cannot be reasonably minimized through any other method.

NOTE: If one of the above situations applies, the Clinical Director (CD) must provide written orders that determine the safest method and duration for the use of restraints. Staff must use the least restrictive method. The detainee/resident should never be placed in four-point restraints while lying on her back or stomach, and a restraint belt that constricts the abdominal and/or pelvic area should never be used. In the extreme case that a pregnant detainee/resident is put in restraints while lying down, all attempts are made to place the detainee/resident on her left side (left lateral decubitus position).

NOTE: Medical restraint orders must be documented in the detainee's/resident's eHR.

4-6. Newborn Care. If a female detainee/resident delivers a baby while in ICE custody, IHSC must cover expenses related to the mother's care and for the delivery of the infant, as long as the mother remains in ICE custody.

An infant born to a mother in ICE custody is a U.S. citizen (USC). As such, ICE has no jurisdiction over the newborn infant, and IHSC staff should not be involved in the provision or arrangement of care for a USC. IHSC will not cover any medical care expenses for the infant after delivery.

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4-7. Abortion Access. In the event that the life of the detainee/resident is endangered by carrying a fetus to term, or in the case of rape or incest, ICE must assume the cost associated with a female detainee's/resident's decision to terminate a pregnancy. If the specifics of the pregnancy do not meet the above criteria, the detainee/resident must bear the cost of the elective abortion. The Regional Clinical Director, in consultation with an obstetrical specialist who has evaluated the detainee/resident, must determine whether the life of the detainee/resident is endangered by carrying a fetus to term. This determination must be documented and shared with the detainee/resident.

4-7.1 Request for Elective Abortion. If a female detainee/resident opts to voluntarily terminate the pregnancy, the CD must notify the Assistant Field Office Director (AFOD) and/or the Field Office Director (FOD) as soon as possible for further guidance per ICE/Enforcement and Removal Operations (ERO) policy. IHSC should offer medical resources to support effective recovery and follow-up care.

4-7.2 Documentation. The medical provider must document the detainee's/ resident's wishes and intent. If the detainee/resident indicates a desire to terminate the pregnancy, or requests more assistance to make a decision, the medical provider must refer her to an appropriate community resource as soon as possible.

4-8. Victims of Sexual Assault. *See* IHSC Directive: 03-01, *Sexual or Physical Assault, Abuse and/or Neglect*, dated 28 Mar 2016.

5. PROCEDURES:

5-1. Initial Screening and Education. As a part of the initial health assessment, health care personnel provide education on services available supporting women's health.

5-1.1 Education and services offered for women's health must be documented in the detainee's/resident's eHR during the initial health assessment.

5-1.2 Health care providers should perform age-appropriate women's health screenings and education, and this must be documented in the detainee's/resident's eHR.

5-1.3 All female detainees/residents ages 10-56 meeting the standards

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set forth in this directive must complete a pregnancy test.

5-1.4 Health care providers must screen detainees/residents for a history of unprotected sex in the past five days. If the detainee/resident reports unprotected sex, as well as the possibility that the unprotected sex may result in an unwanted pregnancy, a medical provider must offer her emergency contraception.

5-1.5 Medical providers must manage and provide specific counseling upon diagnosis of a woman's health condition, and the counseling session must be documented in the detainee's/resident's eHR. The medical provider must track chronic conditions.

5-2. Mental Health Services. BHPs must evaluate female detainees/residents who have a recent history (defined as occurring within the past 30 days) of pregnancy, miscarriage, or abortion. If screening indicates any prior sexual victimization or perpetration of sexual abuse, the detainee/resident must be referred to a BHP. A BHP must complete a mental-health evaluation of the detainee/resident within 72 hours of the referral. For victims of sexual abuse or assault in custody, refer to IHSC Directive: 03-01, *Sexual or Physical Assault, Abuse and/or Neglect*, dated 28 Mar 2016.

5-3. Preventive Women's Services.

5-3.1 Medical providers must screen detainees/residents for active women's health issues (e.g., STIs, abnormal Pap test, breast cancer) and offer diagnostics and treatment, as clinically indicated. Registered nurses (RNs) should refer a detainee/resident to a medical provider for these additional testing and exams, as appropriate.

5-3.2 Medical providers must offer routine women's health screenings (e.g., Pap test, mammography) to asymptomatic detainees/residents at the annual physical examination, as clinically indicated.

5-3.3 Medical providers must counsel and provide formulary medical contraception to detainees/residents who request it, if medically appropriate. Impartial advice and the consultation information provided to the detainee/resident must be documented in the detainee's/resident's eHR. A medical provider may also prescribe contraceptives for medical conditions (e.g., dysfunctional uterine bleeding). *See* Section 4-4 (b.) of this directive for additional details.

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5-4. Pregnancy Notification Monitoring Requirements.

5-4.1 Notifications at IHSC-Staffed Facilities. The Health Services Administrator (HSA) must notify the AFOD, and/or the FOD, as soon as possible of any detainee housed at the facility who is determined to be pregnant, but no later than 72 hours after such determination. Upon receipt of a positive pregnancy result, the health care provider must generate a Detainee Special Needs Form (IHSC Form 819) with recommendations for appropriate accommodation (e.g., housing, diet). Additionally, a Pregnant Global Alert must be placed on the detainee's electronic health record. The HSA or other designated IHSC staff member must send a copy of the Medical/Psychiatric Alert (IHSC Form 834) to the local AFOD and/or FOD. The health care provider or other designated staff must also forward a copy of a completed IHSC Form 819 to appropriate custody and facility authorities.

5-4.2 All pregnancies in IHSC staffed facilities can be tracked through the use of eBO Reports; 1157 Pregnant Detainees Current and 1158 Pregnant Detainees Historical.

5-4.3 Notifications at Non-IHSC Staffed Facilities. Non IHSC-staffed facilities have been instructed to notify the AFOD and/or FOD as soon as possible of any detainee housed at the facility who is determined to be pregnant, but no later than 72 hours after such determination. The field medical coordinator (FMC) and other IHSC personnel should coordinate with the AFOD and /or FOD in ensuring that detention facility staff are aware of these notification requirements.

5-4.4 IHSC Monitoring the Status of Pregnant Detainees. Once it is determined that a detainee/resident is pregnant, the HSA, FMC or designees m u s t review facility capabilities and report to the AFOD and /or FOD whether another facility would be better suited for the detainee (no later than 72 hours after pregnancy determination). The HSA, FMC or designee must also coordinate with the AFOD and /or FOD on an ongoing basis to ensure that the pregnant detainee is appropriately housed, to track the term of the pregnancy, and to ensure the pregnant detainee is receiving necessary and appropriate medical care while in custody.

The AFOD's and /or FOD's primary IHSC point of contact for these cases should be the HSA for IHSC-staffed facilities and the FMC for detention facilities not staffed by IHSC.

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5-4.5 Updating the IHSC Pregnancy Status Database. HSAs for IHSC-staffed facilities and FMCs for non-IHSC staffed facilities must add newly identified pregnant detainees and provide status updates regarding a detainee's pregnancy (e.g., pregnancy status changed from normal to high risk pregnancy) to the pregnancy database on the IHSC SharePoint site (https://team.ice.dhs.gov/sites/ihsc/healthops/Lists/IHSCPregnancyReport/AllItems.aspx). This information should be uploaded to the database as soon as possible and updated at least monthly or sooner if needed to document relevant care concerns.

5-4.6 See **Attachment A** (Procedures for Tracking Pregnant Females at IHSC-Staffed Facilities), **Attachment B** (Procedures for Tracking Pregnant Females at Non-IHSC Staffed Facilities) and the Pregnancy Tracker Guide for additional information regarding tracking of pregnant detainees.

5-5. **Abortion Access.** A medical provider must refer a detainee/resident for elective abortion upon the detainee's/resident's request; however, ICE will only cover the cost if the pregnancy endangers the life of the mother or is the product of rape or incest. *See* Section 4.7 of this directive for additional details.

5-6. **Non-Availability of Health Services.** A medical provider must refer the detainee/resident to a community resource if the specialized services are warranted and not available within the IHSC facility.

5-7. **Limited English Proficiency.** Facilities must provide appropriate interpretation and language services for detainees/residents with limited English proficiency for all health assessments. If appropriate staff interpreters are not available, facilities must use professional interpretation and language services.

6. **HISTORICAL NOTES:** This is a revision to IHSC Directive: 04-02, *Women's Health Services,* dated 22 August 2016.

6-1. Section 4-1 clarifies information about chaperones use to be consistent with IHSC Directive 03-07 Health Assessment.

6-2. Section 4-5 d. reference to entering restraint use in EARM is deleted.

6-3. Section 5-3 d. is deleted in its entirety.

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6-4. Section 5-4 is modified regarding IHSC Headquarters notification procedures for pregnant detainees.

7. DEFINITIONS: See definitions for this directive at IHSC Glossary. Key definitions are also found below:

Chronic Condition – A chronic condition is a condition persisting three months or longer.

Health Care Personnel or Providers – Health care personnel or providers are credentialed individuals employed, detailed, or authorized by IHSC to deliver health care services to detainees. It includes federal and contract staff assigned or detailed (i.e., temporary duty) who provide professional or paraprofessional health care services as part of their IHSC duties.

Medical Providers – Medical providers include physicians, physician assistants, and nurse practitioners.

8. APPLICABLE STANDARDS:

8-1. Performance-Based National Detention Standards (PBNDS): PBNDS 2011:4.4: Medical Care (Women)

8-2. ICE Family Residential Standards: 4.3: Medical Care

8-3. American Correctional Association (ACA): Performance-Based Standards for Adult Local Detention Facilities, 4th edition: 4-ALDF-4C-13: Pregnancy Management. 4-ALDF-4C-22: Health Screens. Standards for Adult Correctional Institutions, 4th edition: 4-4362: Health Screens. Performance-Based Standards for Correctional Health Care in Adult Correctional Institutions:1-HC-1A-10: Pregnancy Management. 1-HC-1A-19: Health Screens.

8-4. National Commission on Correctional Health Care (NCCHC): Standards for Health Services in Jails, 2014: J-E-01: Information on Health Services. J-E-02: Receiving Screening. J-E-04: Initial Health Assessment. J-E-05: Mental Health Screening and Evaluation. J-G-02: Patients with Special Health Needs. J-G-08: Contraception. J-G-09: Counseling and Care of the Pregnant Inmate. J-I-01: Restraint and Seclusion.

9. PRIVACY AND RECORDKEEPING. IHSC maintains detainee health records in accordance with the Privacy Act and as provided in the Alien Health

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Records System of Records Notice, 80 Federal Register 239 (January 5, 2015). The records in the eHR/eClinicalWorks (eCW) are destroyed ten (10) years from the date the detainee leaves ICE custody. Retention periods for records of minors may differ. Paper records are scanned into eHR and destroyed after upload is complete.

9-1. Protection of Health Records and Sensitive Personally Identifiable Information (PII).

9-1.1 Staff must keep all health records, whether electronic or paper, secure with access limited only to those with a need to know. Staff should lock paper records in a secure cabinet or room when not in use or not otherwise under the control of a person with a need to know.

9-1.2. Staff is trained at orientation and annually on the protection of patient medical information and sensitive PII. Only authorized individuals with a need to know are permitted to access health records and sensitive PII.

9-1.3 Staff should reference the Department of Homeland Security *Handbook for Safeguarding Sensitive Personally Identifiable Information* (March 2012) at: https://insight.ice.dhs.gov/mgt/oop/Documents/pdf/safeguarding_spii.pdf when additional information is needed concerning safeguarding sensitive PII.

10. NO PRIVATE RIGHT STATEMENT. This directive is an internal policy statement of IHSC. It is not intended to, and does not create any rights, privileges, or benefits, substantive or procedural, enforceable against the United States; its departments, agencies, or other entities; its officers or employees; or any other person.

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ATTACHMENT A

Procedures for Tracking Pregnant Females at IHSC-Staffed Facilities

1. The Health Services Administrator or designee will enter a pregnant detainee in the IHSC Pregnancy Tracking Spreadsheet on the IHSC Health Operations Share Point website in the Reports/Pregnancy Tracker folder: https://collab.ice.dhs.gov/sites/ihsc/healthops/Lists/IHSCPregnancyReport/AllItems.aspx

2. If the pregnant detainee is transferred to another facility or released from custody, the HSA or designee will enter the change in status on the Pregnancy Tracking Spreadsheet.

3. If a detainee reaches the 3rd trimester while in custody and is included on the spreadsheet, an automated alert will appear. This will prompt the IHSC Executive Assistant to alert the Health Operations Unit Chief and/or the HSA to check on the status of the detainee and determine whether she is still in custody.

4. If the detainee remains in custody in the 3rd trimester, the Health Operations Unit Chief will ask the HSA to alert the Assistant Field Office Director and inquire as to the status of the case and plan for the detainee as to whether the detainee will remain in custody, be deported, or released.

5. Any detainee who is considered to be a high-risk pregnancy will be followed closely. If the facility does not have the resources to care for the detainee, the HSA will notify the Regional Clinical Director to seek assistance in identifying alternative housing for the detainee where care can be received. If the detainee is hospitalized, the HSA will obtain daily reports from the hospital and provide updates to the Field Office and to IHSC Headquarters.

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ATTACHMENT B

Procedures for Tracking Pregnant Females at Non IHSC-Staffed Facilities

1. The Field Medical Coordinator (FMC) is notified of a pregnant detainee in custody in their area of responsibility (AOR).

2. The FMC contacts the facility to obtain information about the detainee and enters the detainee in the IHSC Pregnancy Tracking Spreadsheet on the IHSC Health Operations Share Point website in the Reports/Pregnancy Tracker folder: https://collab.ice.dhs.gov/sites/ihsc/healthops/Lists/IHSCPregnancyReport/AllItems.aspx

3. If FMC is notified of a pregnant detainee's release or transfer to another facility, the FMC will note this in the spreadsheet. When IHSC leadership requests a current report of pregnant detainees in custody, the custody status will need to be confirmed using ENFORCE prior to sending report to others.

4. If a detainee reaches the 3rd trimester while in custody and is included on the spreadsheet, an automated alert will appear. This will prompt the IHSC Executive Assistant to alert the Medical Case Management (MCM) Unit Chief and/or the FMC to check on the status of the detainee and determine whether she is still in custody.

5. If the detainee remains in custody in the 3rd trimester, the MCM Unit Chief will ask the Regional FMC/FMC to alert the Assistant Field Office Director and/or Field Office Director and inquire as to the status of the case and the Field Office's plan for the detainee as to whether the detainee will remain in custody, be deported soon, or released.

6. Any detainee who is considered to be a high-risk pregnancy will be followed closely by the FMC in terms of ensuring that the facility has the internal and community resources to care for the detainee. If the facility does not have the resources to care for the detainee, the FMC will assist with finding alternative housing for the detainee where care can be received. If the detainee is hospitalized, the FMC will obtain daily reports from the hospital and provide updates to the Field Office and to IHSC Headquarters.

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Office of Detention and Removal Operations

U.S. Department of Homeland Security
425 I Street NW
Washington, DC 20536

U.S. Immigration and Customs Enforcement

APR 1 7 2008

MEMORANDUM FOR: Assistant Directors
Deputy Assistant Directors
Field Office Directors
Deputy Field Office Directors

FROM: Gary Mead
Acting Director

SUBJECT: Repatriation and Custody Transfer of Unaccompanied Alien Children in ICE Custody to Foreign Government Officials

This memorandum serves to provide a new directive to Field Office Directors (FODs) ensuring that all attempts to safeguard unaccompanied alien children (UAC) during the transfer of custody to a foreign government official or designee are documented after escorting oft]eers/agents arrive in that foreign country.

Background

The Committee on House Appropriations recently expressed concerns regarding the possible lack of repatriation efforts made on behalf of UAC who are removed from the United States and transferred to their countries of origin. The Committee's corresponding Report 110-181 directed U.S. Immigration and Customs Enforcement (ICE) to develop and implement policies and procedures to ensure the safe and secure repatriation of UAC to their home countries.

Discussion

Therefore, effective immediately, all escorting officers who are removing UAC to a country of origin are required to have the receiving government official or designee sign form 1-216. thereby indicating the safe transfer of custody for all UAC listed. Once the appropriate foreign government official or designee signs the form, the 1-216 will serve to document the safe repatriation and transfer to a government authority for all UAC listed. A copy of this form will be placed in the UAC's A-files after the officer/agent returns to their field office or forwarded to the A-file controlling office.

Should the foreign government official or designee refuse to sign form 1-216, the officer/agent will document the official's name (if known), dale, time, port and note the refusal. A copy of this form will be placed in the UAC's A-files after the officer/agent returns to their field office or forwarded to the A-file controlling office.

This policy excludes removals to Mexico and Canada: current policy and procedures for UAC custody transfers to Mexico and Canada will remain in effect.

Attachment: (1)

~~LAW ENFORCEMENT SENSITIVE - FOR OFFICIAL USE ONLY~~

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U.S. Department of Justice

Immigration and Naturalization Service

Record of Persons and Property Transferred

Sheet No. _____

Date of Transfer _____ From _____ To _____

File No.	Name of Person	Nationality	Status	Afflicted/ Dangerous	From Service Detention	Expenses of Deportation	Money and Hand Luggage	Checked Baggage	Baggage Check Numbers

Show whether deportation, removal, etc.
Show whether criminal, diseased, epileptic, insane, etc. or likely to attempt escape
Show whether alien detained at Service expense immediately prior to transfer
Show whether deportation is to be effected at Service expense or at carrier expense.

Use a separate line for each person transferred.
This form is to be executed in sufficient number of copies to allow each receiving officer to retain one copy for his personal expense voucher and two additional copies for station of final delivery.

Form I-216 (Rev. 8-8-56)

Received the above-listed persons, property and baggage checks

Signature _____

Title _____

Place and date _____

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Office of Detention and Removal Operations

U.S. Department of Homeland Security
500 12th Street, SW
Washington, DC 20536

U.S. Immigration and Customs Enforcement

MEMORANDUM FOR: Field Office Directors
Deputy Field Office Directors

SEP 14 2009

FROM: David J. Venturella
Acting Director

SUBJECT: Use of GPS Monitoring Devices on Persons who are Pregnant or Diagnosed with a Severe Medical Condition

Effective immediately, the Office of Detention and Removal Operations" (DRO) Alternatives to Detention (ATD) program is discontinuing the use of Radio Frequency (RF) and Global Positioning Satellite (GPS) ankle bracelets on persons whose medical conditions render the use of these devices inappropriate. This includes, but is not limited to verifiably pregnant women.

ATD personnel should transfer anyone currently wearing ankle bracelets and who fall into this category to another form of monitoring. If ATD personnel have reason to believe that an exception to this rule is warranted in a particular case, they should contact the HQDRO-ATD Chief for authorization to apply an ankle bracelet.

This change in practice does not prevent affected persons from remaining in the ATD program, provided they accept the changed terms of participation, nor does it indicate that electronic monitoring devices are or have been demonstrated to be harmful.

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U.S. Immigration and Customs Enforcement
U.S. Department of Homeland Security
500 12th Street S.W.
Washington, D.C. 20536

U.S. Immigration and Customs Enforcement

October 23, 2015

MEMORANDUM FOR: Field Office Directors, Deputy Field Office Directors, and Assistant Field Office Directors

Chief Counsel and Deputy Chief Counsel

FROM: Thomas Homan
Executive Associate Director

Gwendolyn Keyes Fleming
Principal Legal Advisor

SUBJECT: Implementation of the August 21, 2015 *Flores v. Lynch* Order

Purpose

This memorandum sets forth further procedures applicable to U.S. Immigration and Customs Enforcement's (ICE) Family Residential Centers (FRCs) to ensure compliance with the August 21, 2015 order of the U.S. District Court for the Central District of California in *Flores v. Lynch*, No. 85-4544 (C.D. Cal. filed July 11, 1985), including by acting as expeditiously as possible in processing aliens detained in FRCs, and generally limiting the average time in detention for all accompanied minors in the credible or reasonable fear process to not more than 20 days.[1]

Background

On January 17, 1997, the U.S. Department of Justice (DOJ), including the former Immigration and Naturalization Service, entered into a stipulated settlement agreement in *Flores v. Reno*, No. 85-4544 (C.D. Cal. Jan. 17, 1997). The *Flores* Settlement Agreement (FSA) sets forth a nationwide policy for the detention, release, and treatment of minors in the custody of the U.S. Department of Homeland Security (DHS), including procedures and timeframes for the processing, transport, and detention of minors following apprehension.[2] On February 2, 2015, Plaintiffs filed a motion to enforce the FSA, contending that conditions at ICE's FRCs and U.S. Customs and Border Protection (CBP) Border Patrol Stations violate the FSA and that ICE is failing to minimize the detention of all minors, to take affirmative steps to release children to a parent or relative, and to house children in non-secure facilities that are licensed to care for dependent children. On July 24, 2015, the U.S. District Court for the Central District of

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California granted Plaintiffs' motion to enforce the FSA, finding that: (1) the FSA applies to accompanied children; (2) under the FSA, Defendants "must release the accompanying parent so long as doing so would not create a [significant] flight risk or a safety risk;" (3) housing children, who are not released as expeditiously as possible, in secure and non-licensed facilities violates the FSA; and (4) conditions at CBP facilities were in breach of the FSA requirement that Defendants provide "safe and sanitary" holding cells.

On August 21, 2015, the district court entered an order requiring that DHS comply with the remedies included in its July 24, 2015 order, as amended, by October 23, 2015.[3] A copy of the court's order is attached. For ICE purposes, implementation of the order will occur as outlined below.

Implementation Guidance

I. CBP Processing and Transfer to ICE FRCs

A. Family units apprehended by CBP in its Rio Grande Valley Sector will be processed by CBP for immediate release, or transferred to ICE custody if they fall within the categories of family units who may be detained at FRCs.[4] CBP has committed to transfer family units to ICE as quickly as possible but no longer than within 48 hours of apprehension. These family units transferred to ICE custody will be transported from the CBP Combined Processing Center (CPC), in McAllen, Texas to FRCs with appropriate ICE officer escorts or other ICE-approved escorts.

B. After processing by CBP, family units apprehended by CBP in California, Arizona, and New Mexico will be processed for immediate release or transported via commercial air carriers to San Antonio, TX or Philadelphia, PA, with ground transportation to the designated FRC with appropriate ICE officer escorts or other ICE-approved escorts.

II. Family Units Who May be Detained at FRCs

Generally, only family units in which: (1) the child(ren) is (or are) subject to mandatory detention, or (2) the parent or legal guardian (hereinafter "Head of Household" (HoH)) is subject to mandatory detention or determined to pose a "significant flight risk" that cannot be mitigated by appropriate bond or other conditions of release and for whom no other parent or legal guardian is available, will be detained at FRCs. This group will generally be limited to family units in the expedited removal or reinstatement of removal process, including:

A. Family units in which both the HoH and child(ren) are in the expedited removal process and are awaiting a credible fear interview before U.S. Citizenship and Immigration Services (USCIS) or a credible fear review before the Executive Office for Immigration Review (EOIR), or have been determined not to have established a credible fear and are therefore subject to removal;

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B. Family units in which the child(ren) is (or are) in the expedited removal process and is (or are) awaiting a credible fear interview before USCIS or a credible fear review before EOIR or has (or have) been determined not to have established a credible fear and is (or are) subject to removal, and the HoH is in the reinstatement of removal process, and is awaiting a reasonable fear interview before USCIS or a reasonable fear review before EOIR, or has been determined not to have established a reasonable fear and is subject to removal;

C. Family units in which the child(ren) is (or are) in the expedited removal process and has (or have) been determined by USCIS to possess a credible fear and referred for removal proceedings, and the HoH is in the reinstatement of removal process and is awaiting a reasonable fear interview before USCIS or a reasonable fear review before EOIR, or has been determined not to have established a reasonable fear and is subject to removal, and has been determined to pose a significant flight risk (that cannot be mitigated by an appropriate bond or other conditions of release); and

D. Family units in which both the HoH and child(ren) are subject to final orders of removal and have been determined to pose a significant flight risk (that cannot be mitigated by an appropriate bond or other conditions of release).

III. Intake Processing and Case Management

A. Upon arrival of a family unit at an FRC, Enforcement and Removal Operations (ERO) FRC staff receiving the transfer will verify that all necessary documentation, based upon the type of case, is completed and properly served on the family unit. Charging documents should be served on all aliens who are 14 years of age or older. For minors under age 14, charging documents should be served on the HoH.

B. After all charging documents have been reviewed to ensure proper service, ERO FRC staff will enter the family unit into the Enforce Alien Detention Module (EADM) utilizing the proper FRC facility code.

C. In all cases, ERO FRC staff will begin efforts to identify sponsors and future release options as soon as practicable after a family unit is booked into an FRC. ERO FRC staff will interview the HoH to determine if the child(ren) has another parent or legal guardian residing in the United States to whom the child(ren) may be released.

D. The alien files (A-files) for all members of the family unit will be forwarded to the appropriate ERO FRC staff according to the local Field Office's docket assignment system.

E. The ERO FRC staff managing the case of the family unit will receive the A-files and create the cases (if not previously created) in the Enforce Alien Removal Module (EARM).

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F. The ERO FRC staff will review the A-files for each family unit on his or her docket and take all appropriate action to expedite the removal process, resulting in either removal or release of the family unit as expeditiously as possible, but generally within 20 calendar days from the date of apprehension by CBP or 15 days from the date the claim of fear is made, whichever is longer.

G. The ERO FRC staff will ensure that EARM is properly and thoroughly documented during the course of the family unit's time in ICE custody, including a specific custody justification and, as appropriate, information regarding efforts to release and/or information regarding any processing delays attributable to the alien.

IV. Expedited Removal – Credible Fear Process

Family units in which the HoH is in the expedited removal process and has claimed a fear of return will be referred to USCIS for credible fear adjudication, pursuant to the regulations and consistent with normal processes, as soon as practicable.

A. Upon learning that a family unit housed at an FRC has expressed a claim of fear of return, the ERO FRC staff will annotate EARM to reflect that the claim was expressed and the date and time it was expressed.

B. ERO FRC staff will immediately refer all credible fear claims to USCIS by electronic mail, copying the "ERO CF/RF" mailbox" for quality control purposes. Referrals to USCIS must be made within 24 hours of ERO learning of the claim of fear, even if the claim of fear is first raised prior to transfer to an FRC.

C. Credible fear referrals will include:

   i. Fully executed Form I-860 (Notice and Order of Expedited Removal);
   ii. Form M-444 (Information About Credible Fear Interview);
   iii. Fully executed Form I-867 (Record of Sworn Statement in Proceedings under Section 235(b)(1) of the Act); and
   iv. Form I-213 (Record of Deportable/Inadmissible Alien).

D. USCIS has committed to completing all credible fear screenings within an average of 10 days and has indicated that this 10-day period will include sufficient time for family units to consult with legal representatives prior to the interview.

E. In order to minimize detention time, if USCIS has made a negative credible fear determination, the case must be referred to EOIR within 24 hours for prompt immigration judge (IJ) review. USCIS will serve the negative credible fear determination on the alien, and will forward the negative credible fear referral to the designated Office of the Principal Legal Advisor (OPLA) Office of the Chief Counsel (OCC) electronically. The

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OCC will file the negative credible fear referral documents with the immigration court having jurisdiction over the case as soon as possible but no later than the next business day.

F. Although, IJ review of negative credible fear determinations is required to be completed no later than 7 days after the negative USCIS fear determination, EOIR has committed to generally conducting this review within 3 days.

G. In cases in which USCIS makes a positive credible fear determination, USCIS will immediately (and within not more than 24 hours) forward the A-file, positive credible fear determination, and Notice to Appear (NTA) to ERO FRC staff. ERO FRC staff will serve the documentation on the aliens. The NTA will be filed with EOIR as set forth in Section VII.G. below.

V. Reinstatement of Removal – Reasonable Fear Process

Family units in which the HoH is in the reinstatement of removal process and has claimed a fear of return will be referred to USCIS for reasonable fear adjudication, pursuant to the regulations and consistent with normal processes, as soon as practicable.

A. Upon learning that a family unit housed at an FRC has expressed a claim of fear of return, the ERO FRC staff will annotate EARM to reflect that the claim was expressed and the date and time it was expressed.

B. ERO FRC staff will immediately refer all reasonable fear claims to USCIS by electronic mail, copying the "ERO CF/RF" mailbox for quality control purposes. Referrals to USCIS must be made within 24 hours of ERO learning of the claim of fear, even if the claim of fear is first raised prior to transfer to an FRC.

C. Reasonable fear referrals will include:

i. Fully executed Form I-871 (Notice of Intent/Decision to Reinstate Prior Order), including the prior order of removal; and
ii. An indication, whether in oral, written, or electronic form, that the individual has made a fear claim during the reinstatement process.

D. USCIS has committed to completing all reasonable fear screening within an average of 10 days and has indicated that this 10-day period will include sufficient time for family units to consult with legal representatives prior to the interview.

E. In order to minimize detention time, if USCIS has made a negative reasonable fear determination, the case must be referred within 24 hours to EOIR for prompt IJ review. USCIS will serve the negative reasonable fear determination on the alien, and will forward the negative reasonable fear referral documents to the designated OCC

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electronically. The OCC will file the negative reasonable fear referral documents with the immigration court having jurisdiction over the case as soon as possible but no later than the next business day.

F. EOIR has committed to generally conducting this review within 3 days.

G. In cases in which USCIS makes a positive reasonable fear determination, USCIS will immediately (and within not more than 24 hours) forward the A-file, positive reasonable fear determination, and charging document to ERO FRC staff. ERO FRC staff will serve the documentation on the aliens. The charging document will be filed with EOIR as set forth in Section VII.G. below.

VI. Case Oversight and Review

ERO will regularly monitor the cases of all family units detained in FRCs to ensure that the cases are moving properly through the removal process.

A. In addition to daily case management, the ERO FRC staff and the OCC will jointly review every case no later than 15 days after the family unit's apprehension by CBP and every three days thereafter to ensure the case is proceeding appropriately for timely release or removal.[5]

B. In all cases in which USCIS or EOIR has failed to complete credible or reasonable fear processing in the timeframes set forth in Sections IV(C) and (E) and V(C) and (E) above, ERO FRC staff should consult with the local OCC to facilitate having the case expedited before USCIS or EOIR. The ERO FRC staff will document and track their efforts in EARM, and the OCC will document its efforts in PLAnet. Should the ERO FRC staff and the OCC be unable to resolve the issue locally, such cases should be elevated to ERO Field Operations and OPLA Field Legal Operations, through the appropriate chain of command, for assistance.

C. The ERO FRC staff will immediately notify the local OCC of any case in which the family unit delays or declines conditions of release to coordinate and assess expeditious processing options. The ERO FRC staff will also document and track these events in EARM.

D. The ERO FRC staff will review any case involving a medical issue that may impact the appropriateness of continued detention with IHSC staff and the local OCC to coordinate and assess expeditious processing options.

E. All reporting and statistical information prepared by the ERO Field Office with regard to implementation of this guidance will be coordinated with local OCC.

F. In all cases in which the family unit has not been removed or released after 30 days, the

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child(ren) and HoH shall be issued NTAs and processed for release pursuant to Section VII.C below, unless they are described in Section IX.A.ii or iii below, or there are other compelling reasons requiring continued detention.

VII. Processing Release

A. In all cases in which the child(ren) is (or are) not subject to mandatory detention, as soon as practicable after intake into an FRC, ERO FRC staff will interview the HoH to determine if the child(ren) has (or have) another parent or legal guardian residing in the United States to whom the child(ren) may be released. Where such a parent or legal guardian is available, the child(ren) should generally be released to the parent or legal guardian and the HoH transferred to an adult detention facility.[6]

B. In the case of family units in which the child(ren) is (or are) not subject to mandatory detention and the HoH has had his or her final order of removal reinstated, ERO FRC staff will work as expeditiously as possible with the HoH to process release. In cases in which the HoH cannot provide a verifiable address, ERO FRC staff will work with available non-governmental organizations (NGOs) to assist in identifying a sponsor. ERO FRC staff will begin efforts to identify a sponsor and future release options as soon as practicable after a family unit is booked into an FRC. In cases in which releasing the parent or legal guardian and child together may create a risk to safety of both the parent or legal guardian and the child, including where they lack a place to stay in the United States, they may be continued in detention while release options are pursued.

C. If a family unit does not fall within one of the categories of aliens who may be detained at an FRC, set forth in Section II above, the members of the family unit will be served with NTAs, released subject to enrollment in an Alternatives to Detention (ATD) program or other reasonable conditions, and instructed to report to their designated ERO Field Office within a specified timeframe.[7]

   i. In order to ensure such families arrive in the city in which they intend to reside upon release, and to improve compliance with reporting requirements, before transferring the family unit to bus stations, airports, or other transportation hubs, ERO FRC staff will coordinate with available local NGOs after arrangements have been coordinated with sponsoring family members.

   ii. Those family units released from the Karnes County Residential Center or South Texas Family Residential Center who have not arranged transportation directly from the facility will be released at the appropriate transportation hub.

D. Family units determined by USCIS to have established a positive credible or reasonable fear of removal will generally be released subject to enrollment in an ATD program or other reasonable conditions as expeditiously as possible, but not later than 20 days from the date of apprehension by CBP or 15 days from the date the claim of fear is made,

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whichever is longer.

E. A family unit in the reinstatement process, determined by USCIS not to have established a reasonable fear, unless determined to pose a significant flight risk (that cannot be mitigated by an appropriate bond or other conditions of release), generally will be removed or otherwise released subject to enrollment in an ATD Program or other reasonable conditions as expeditiously as possible, but not later than 20 days from the date of apprehension by CBP or 15 days from the date the claim of fear is made, whichever is longer.

F. For all cases in which a family unit is offered release subject to enrollment in an ATD program or other reasonable conditions, ERO FRC staff will inform the alien of the available processes to request amelioration of the conditions of release, including removal of the ankle monitor, from the IJ or ERO, as applicable. For aliens subject to removal proceedings under Section 240 of the Immigration and Nationality Act (INA), including positive credible fear cases, the ERO FRC staff will inform the HoH that if he or she accepts the conditions of release and is released from ICE custody, he or she may be eligible to seek amelioration of the conditions of release (i.e., a bond hearing) if a request is filed with EOIR within seven days of release, and that he or she may also request a change in the conditions of release from ERO in the receiving field office.[8] For all other aliens, the ERO FRC staff will inform the subject that he or she may request a change in the conditions of release from ERO in the receiving field office.

G. For those aliens determined to be released:

   i. Once a sponsor has been identified, ERO FRC staff will coordinate with the HoH and the sponsor to safely release the family unit from the FRC.

   ii. ERO FRC staff will serve the HoH with the appropriate release documentation prior to release from the FRC.

   iii. All detention actions will be properly documented and tracked in EADM.

   iv. After verification of all travel arrangements to the city in which the family unit intends to reside, ERO will escort the family unit to the appropriate form of transportation to their designated sponsor.

   v. For cases in which the family unit will be referred for removal proceedings or withholding only proceedings before EOIR, ERO FRC staff will serve the charging documents on the family unit at the FRC prior to release, but will forward the charging documents to the receiving ERO Field Office. The receiving ERO Field Office will file the charging documents with EOIR.

H. The ERO FRC staff will send the A-files to the ERO Field Office responsible for the

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location in which the family unit will be residing.

VIII. Removal Processing

A. Family units in which the HoH has a final order of removal and is housed in ICE custody due to a significant flight risk (that cannot be mitigated by an appropriate bond or other conditions of release) will be immediately processed for removal if members of the family unit have not claimed a fear of return.

B. Family units that are ordered removed, determined by USCIS not to possess a credible or reasonable fear, and determined to pose a significant flight risk (that cannot be mitigated by an appropriate bond or other conditions of release) will be processed for removal as expeditiously as possible.

   i. In cases in which a travel document is not required for removal – i.e., citizens of Mexico – or in which ERO already has possession of a valid unexpired travel document, within 24 hours of the final order of removal, the ERO FRC staff will coordinate with ICE Air Operations to schedule the family unit for a charter or commercial flight for removal, and removal should occur within 48 hours of scheduling.

   ii. In cases in which a travel document is required for removal, within 24 hours of receiving the final order of removal, the ERO FRC staff will submit a travel document request to the appropriate country of citizenship, consistent with standard procedures. The ERO FRC staff will work expeditiously to obtain the travel document and coordinate with ICE Air Operations to schedule the family unit for a charter or commercial flight for removal. Removal should occur within 72 hours of scheduling.

   iii. The ERO FRC staff will track the travel document process to ensure that the family unit is removed as expeditiously as possible.

   iv. ERO will transport the family unit to the airport for removal.

C. Consistent with standard procedures, for those family units removed via ICE Air Operations, ICE Air Operations will notify the ERO Field Office upon successful completion of removal by returning the fully executed Form I-205 (Warrant of Removal) to the ERO Field Office.

D. The ERO Field Office with docket control over the case will update EARM and close out the case as a removal.

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IX. Transfers to the Berks Family Residential Center (BFRC)[9]

A. The following family units will generally be transferred to the BFRC or released subject to enrollment in ATD or other reasonable conditions as expeditiously as possible, unless removal is imminent:

   i. Family units pending a credible or reasonable fear determination before USCIS or a credible or reasonable fear review before EOIR, who have been detained in ICE custody beyond 20 days or 15 days from the date the claim of fear is made, whichever is later, *provided, however*, that such cases should not be transferred to the BFRC if doing so would significantly delay credible or reasonable fear screening due to the change of venue (e.g., cases in which IJ negative fear review has already been scheduled);

   ii. Family units subject to reinstatement of removal, who have not asserted a fear claim; and

   iii. Family units in removal proceedings under section 240 of the INA or who are awaiting execution of final removal orders.

B. ERO will use an existing contract or commercial air carrier, with appropriate ERO officer escorts or other ERO-approved escorts, to transport families to the BFRC from other FRCs, as appropriate.

X. Reporting

A. In order to ensure the completeness and accuracy of data required by the district court's order to be reported, the ERO FRC staffs will timely update cases in the EID Graphic for Law Enforcement (EAGLE), EADM, and EARM.

B. ERO will provide routine reporting on the data items listed below:

   i. FRC weekly intakes, releases, and removals by FRC;
   ii. HoH population and HoH fear claims asserted;
   iii. Average length of stay in FRCs for those booked out of FRCs; and
   iv. For the current population in FRCs, the number of individuals in FRCs delineated by length of time in custody.

C. ERO Headquarters will coordinate collection and data quality review of the information listed in Section X.B above, and will provide consolidated reports of such information to OPLA Headquarters on the second Monday of each month. OPLA Headquarters will transmit the information to DOJ.

XI. No Private Right Statement

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This document provides only internal ICE policy guidance, which may be modified, rescinded, or superseded at any time without notice. It is not intended to, does not, and may not be relied upon to create or diminish any rights, substantive or procedural, enforceable at law or equity by any party in any criminal, civil, or administrative matter. Likewise, no limitations are placed by this guidance on the otherwise lawful enforcement or litigative prerogatives of DHS.

XII. Attachments

Attached are copies of the relevant pages of the district court's August 21, 2015 order and a reference flow chart showing the general course that family unit cases will take under this implementation guidance.[10]

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Endnotes

[1] For purposes of this memorandum, in order to limit further litigation risk, time in detention will be calculated from the date of apprehension by CBP to the date of release from an FRC. This is a strategic legal decision that should not be construed as acquiescence to the district court's order or a concession that such an approach is the only permissible reading of the order. Also, although aliens detained in FRCs should generally be released within 20 days, for cases in which a claim of fear is not raised until five or more days after apprehension by CBP, such individuals should be released or removed as expeditiously as possible, but generally no more than 15 days from the date on which the claim of fear is raised.

[2] Although DHS takes the position that the FSA applies only to unaccompanied minors, the district court ultimately found that the FSA applies to all minors in DHS custody. Pending the outcome of any appeal of this finding, ICE will abide by the court's decision.

[3] The Government filed a Notice of Appeal with the U.S. Court of Appeals for the Ninth Circuit on September 18, 2015.

[4] For purposes of this guidance, the term "family unit" is used to refer collectively to a minor child(ren) and his or her parent or legal guardian who is over the age of 18.

[5] While EADM will only track length of stay based upon the FRC book-in date, ERO Field Office staff must be aware of the CBP apprehension date of each family unit case.

[6] To ensure the safety of the child(ren), documentation establishing the parental or guardianship relationship should be provided and maintained in the A-file. For non-parent legal guardians, ERO Field Office staff should consult with their respective OCC in determining whether documentation provided is sufficient to establish the claimed relationship.

[7] In cases in which ICE exercises its discretion to cease the expedited removal or reinstatement of removal process, and instead initiate removal proceedings under Section 240 of the Immigration and Nationality Act, *see Matter of E-R-M- & L-R-M-*, 25 I&N Dec. 520 (BIA 2011), the family unit will be processed in accordance with this paragraph.

[8] *See* 8 C.F.R. § 1236.1(d)(1); *see also Matter of Garcia-Garcia*, 25 I&N Dec. 93 (BIA 2009).

[9] The reason for transferring family units from other FRCs to the BFRC is that the BFRC has been licensed by the State of Pennsylvania. The FSA requires that minors detained in ICE custody be transferred to a licensed program. Should other ICE FRCs become state-licensed, this guidance may be updated.

[10] Please note that the reference flow chart is a general guide and does not address every possible permutation a family unit case could present. ERO and OPLA should confer closely in their handling of family unit cases to ensure compliance with the court's August 21, 2015 order.

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Attachment A

The Court orders Defendants to implement the following remedies by no later than October 23, 2015:

1. As required by Paragraph 18 of the Agreement, Defendants, upon taking an accompanied class member into custody, shall make and record prompt and continuous efforts toward family reunification and the release of the minor pursuant to Paragraph 14 of the Agreement.

2. Unless otherwise required by the Agreement or the law, Defendants shall comply with Paragraph 14A of the Agreement by releasing class members without unnecessary delay in first order of preference to a parent, including a parent who either was apprehended with a class member or presented herself or himself with a class member. Class members not released pursuant to Paragraph 14 of the Agreement will be processed in accordance with the Agreement, including, as applicable, Paragraphs 6, 9, 21, 22, and 23.

3. Subject to Paragraph 12A of the Agreement, accompanied class members shall not be detained by Defendants in unlicensed or secure facilities that do not meet the requirements of Paragraph 6 of the Settlement or, in appropriate cases, as set forth in the Agreement, in facilities that do not meet the requirements of Paragraphs 12A, 21, and 23. Defendants shall not selectively apply the "influx" provision of Paragraph 12C of the Agreement to house class members apprehended with a parent in facilities that do not comply with the Agreement.

4. To comply with Paragraph 14A of the Agreement and as contemplated in Paragraph 15, a class member's accompanying parent shall be released with the class member in accordance with applicable laws and regulations unless the parent is subject to mandatory detention under applicable law or after an individualized custody determination the parent is determined to pose a significant flight risk, or a threat to others or the national security, and the flight risk or threat cannot be mitigated by an appropriate bond or conditions of release.

5. As contemplated in Paragraph 28A of the Agreement, Defendants or their Regional Juvenile Coordinator shall monitor compliance with their acknowledged standards and procedures for detaining class members in facilities that are safe and sanitary, consistent with concern for the particular

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vulnerability of minors, and consistent with Paragraph 12 of the Agreement, including access to adequate drinking water and food, toilets and sinks, medical assistance if the minor is in need of emergency services, temperature control, ventilation, adequate supervision to protect minors from others, and contact with family members who were arrested with the minor. In the alternative, the parties may stipulate to the appointment of a special monitor for this purpose.

6. Defendants shall monitor compliance with the Agreement and this Order and shall provide Class Counsel on a monthly basis statistical information collected pursuant to Paragraph 28A of the Agreement.

IT IS SO ORDERED.

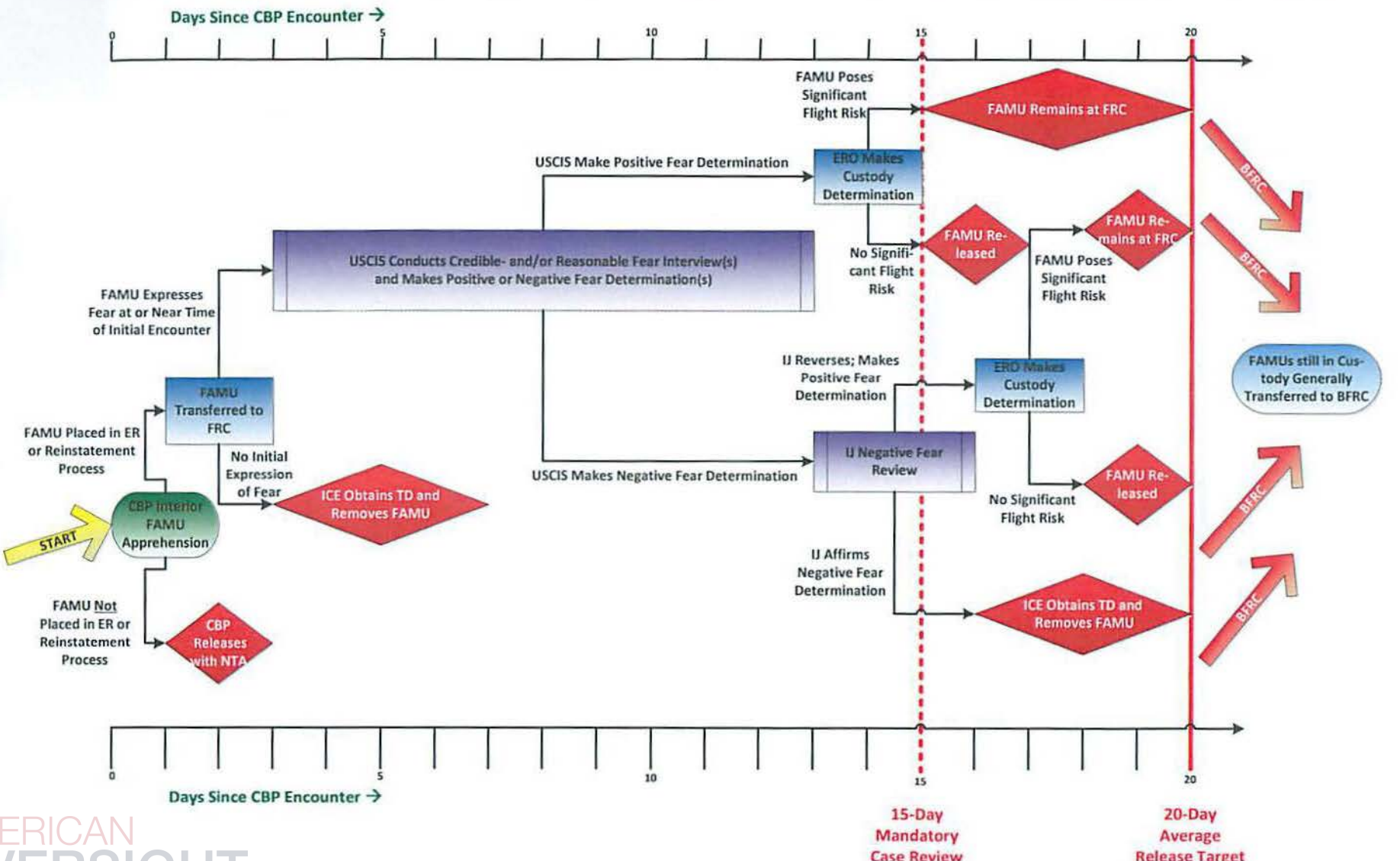
DATED: August 21, 2015

DOLLY M. GEE
UNITED STATES DISTRICT JUDGE

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Attachment B

General DHS Process Flow for Family Unit (FAMU) Processing Under the August 21, 2015 Court Order in *Flores v. Lynch*



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Office, of Detention and Removal Operations

U.S. Department of Homeland Security
Washington, D.C. 20536

U.S. Immigration and Customs Enforcement

JUL 29 2004

MEMORANDUM FOR: Field Officer Directors
Deputy Assistant Director
Unit Chiefs

FROM: Victor Cerda
Acting Director

SUBJECT: New Release Procedures for Unaccompanied Alien Children Placed with and Cared for by the Office of Refugee Resettlement

This memorandum modifies existing release policies and procedures for unaccompanied alien children (UACs) placed with and cared for by the Office of Refugee Resettlement (ORR). The policies and procedures contained within this memorandum become effective Monday, August 2, 2004.

Currently, documents and information (family reunification packet) needed from sponsors related to the release of UACs are gathered by a representative of the ORR and forwarded to the Detention and Removal Operations Field Office Juvenile Coordinator (FOJC) with a request for the FOJC to perform a record check on the proposed sponsor. The FOJC also completes the appropriate release documents for the UAC and the sponsor.

Effective Monday, **August 2, 2004**, ORR will complete and sign all appropriate release documents for the UAC and the sponsor. In summary, on August 2, 2004, the FOJC will no longer prepare or sign release documents, set conditions of release, or set bond on UACs being released by ORR. Also, effective **August 2, 2004**, the FOJC will no longer perform record checks on proposed sponsors. ORR will perform background checks prior to releasing a UAC to a sponsor.

Release Procedures

In the event ORR chooses to release the UAC, ORR will complete and sign the release paperwork and send a copy of such to the FOJC where the UACs A-file is located. In most cases, this will be the location where the UAC is being housed. In other instances, it will be the jurisdiction having venue over the case. Documentation will include, but not be limited to, the following: 1) UACs name, date of birth, A-number, sex, current address and facility name, address where the UAC will be residing upon release, and release date; 2) Sponsor's, name, date

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of birth, A-number, sex, social security number, address, telephone number, and employer name and address; and 3) Release documents prepared and signed by ORR. Upon receipt of this information, the FOJC will immediately update DACS and other appropriate computer systems and place the documentation provided by ORR into the UACs A-file.

Once the UAC is released, the case should be handled as per current policy and practice relating to UACs released from federal custody.

DHS Form I-94, *Arrival/Departure Record*

In the event (for arriving aliens) the DHS Form I-94, is required as part of the release package, ORR will contact the appropriate FOJC prior to releasing the UAC. The FOJC will fill out the arrival and departure sections of the I-94, stamp the I-94 with a parole stamp and complete the date, purpose, and port portions of parole stamp. The date portion of the parole stamp should not exceed six months from the date the document is stamped. The purpose section of the parole stamp should state: "Paroled to sponsor pending removal proceedings." The FOJC will then send the I-94 to ORR via Federal Express. ORR will then complete the date and officer portions of the parole stamp. When completed, ORR will provide the appropriate portion to the UAC and immediately return the remaining portion to the FOJC. The FOJC will then place the document into the UAC's A-file.

DHS Form I-286, *Notice of Custody Determination*

ORR is responsible for making decisions related to the care and custody of UACs in their charge. This includes decisions regarding release to include bond and reporting requirements. Consequently, once a UAC has been referred to ORR for placement and placed in an ORR facility, the FOJC must review the I-286 and make a custody redetermination. On the I-286 and in the section entitled "Result of Custody Redetermination," the FOJC must check the box marked "other" and write or type in "Transfer of physical custody to ORR – any previous bond cancelled." By doing so, any bond previously set will be explicitly eliminated.

In the event ORR contacts ICE and requests that a bond be set, the FOJC will check the box marked "bond amount reset" and write or type in this section "Bond set in the amount of (enter the amount) as per the request of ORR." In this scenario, ICE will collect bond according to existing policies and procedures.

Any questions regarding these procedures may be directed to (b)(6); (b)(7)(C) Headquarters Office of Detention and Removal at (b)(6); (b)(7)(C)

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The American College of Obstetricians and Gynecologists
WOMEN'S HEALTH CARE PHYSICIANS

Patient Addressograph

ANTEPARTUM RECORD

Date: – – ID #:

Hospital of Delivery:

Name: LAST FIRST MIDDLE

Newborn Care Provider:

Referred By:

Primary Care Provider/Group:

Address:

Final EDD:

Birth Date: – – Age: Race: Marital Status: S M W D Sep

Address:

Zip: Phone: (1) (2)

Occupation: Education: (Last Grade Completed)

E-Mail:

Language: Ethnicity:

Insurance Carrier/Medicaid #:

Partner: Phone:

Policy #:

Father Of Baby: Phone:

Emergency Contact: Phone:

Total Preg:	Full Term:	Premature:	Ab, Induced:	Ab, Spontaneous:	Ectopics:	Multiple Births:	Living:

Menstrual History

Lmp ☐ Definite ☐ Approximate (Month Known) ☐ Unknown ☐ Normal Amount/Duration ☐ Final: _____

Duration: Q _____ Days

Prior Menses: _____ Date

Frequency: Q _____ Days

Contraception at conception ☐ Yes ☐ No

Menarche: _____ (Age Onset)

Hcg + ___/___/___

Past Pregnancies (Last Five)

Date Month/ Year	GA Weeks	Length Of Labor	Birth Weight	Sex M/F	Type Of Delivery	Anes	Place Of Delivery	Breastfeeding Duration	Lactation Consult Needed Yes/No	Comments/ Complications

Medical History

	P*	F*	Detail Positive Remarks Include Date & Treatment
A. Drug/Latex Allergies/ Reactions			
B. Allergies (Food, Seasonal, Environmental)			
1. Neurologic/Epilepsy			
2. Thyroid Dysfunction			
3. Breast Disease/Breast Surgery			
4. Pulmonary (TB, Asthma)			
5. Heart Disease			
6. Hypertension			
7. Cancer			
8. Hematologic Disorders			
9. Anemia			
10. Gastrointestinal Disorders			
11. Hepatitis/Liver Disease			
12. Kidney Disease/UTI			
13. Deep Vein Thrombosis			
14. Diabetes (Type 1 Or Type 2)			
15. Gestational Diabetes			
16. Autoimmune Disorders			
17. Dermatologic Disorders			
18. Operations/Hospitalizations (Year & Reason)			
19. Gyn Surgery (Year & Reason)			
20. Anesthetic Complications			
21. History Of Blood Transfusions			
22. Infertility			
23. Art (IVF Or FET)			
24. History of Abnormal Pap			
25. History of STI			
26. Psychiatric Illness			
27. Depression/Postpartum Depression			
28. Trauma/Violence			
29. Tobacco (Smoked, Chewed, ENDS, Vaped) (AMT/Day)			
30. Alcohol (AMT/Wk)			
31. Drug Use (Including Opioids) (Uses/Wk)			
32. Polycystic Ovary Syndrome			
33. Other			

Prepreg	Preg	# Years Use

*P = Patient F = Family

COMMENTS:

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Patient Name:		Birth Date:	- -	ID No.:		Date:	- -

Genetic Screening*

Condition	Patient	Partner	Other	Relationship
Congenital Heart Defect				
Neural Tube Defect				
Hemoglobinopathy Or Carrier				
Cystic Fibrosis				
Chromosome Abnormality				
Tay–Sachs				
Hemophilia				
Intellectual Disability/Autism				
Recurrent Pregnancy Loss/Stillbirth				
Other Structural Birth Defect				
Other Genetic Disease (eg, PKU, Metabolic Disease, Muscular Dystrophy)				

Teratogen Exposures Since LMP/Conception

	Yes	No	Details/Date
Prescription Medications			
Over The Counter Medications			
Alcohol			
Illicit Drugs			
Maternal Diabetes			HGB A1C
Other			
Uterine Anomaly/DES			

*If a patient has been screened for a genetic disorder previously, the results should be documented but the test should not be repeated.

COMMENTS/COUNSELING: _____

Infection History	Yes	No		Yes	No
1. Live with Someone with TB or Exposed to TB			6. HIV Infection		
2. Patient or Partner has History of Genital Herpes			7. History Of Hepatitis		
3. Rash or Viral Illness Since Last Menstrual Period			8. Recent Travel History Outside Of Country		
4. Prior GBS-Infected Child			9. Other (See Comments)		

5. History of STIS: (Check All That Apply) Gonorrhea Chlamydia HPV Syphilis PID

COMMENTS: _____

INTERVIEWER'S SIGNATURE: _____

Immunizations	Yes (Month/Year) ___/___	No	If No, Vaccine Indicated?*	Immunizations	Yes (Month/Year) ___/___	No	If No, Vaccine Indicated?*
TDAP (Each pregnancy; between 27–36 weeks)				Hepatitis A (When Indicated)			
Influenza† (Each pregnancy as soon as vaccine is available)				Hepatitis B (When Indicated)			
Varicella†				Meningococcal (When Indicated)			
MMR (Rubella-containing vaccine)†				Pneumococcal (When Indicated)			
HPV							

*Yes/No & date to be administered

†All live vaccines are contraindicated in pregnancy, including the live intranasal influenza, MMR, and varicella vaccines. All women who will be pregnant during influenza season (October through May) should receive inactivated influenza vaccine at any point in gestation. Administer the HPV, MMR, and varicella vaccines postpartum if needed. The Tdap vaccine can be given postpartum if the woman has never received it as an adult and did not get it during pregnancy.

Initial Physical Examination

Date: ____/____/____ BP/Prepregnancy Weight: _____ Height: _____ BMI: _____

1. Heent		Normal		Abnormal	11. Vulva		Normal		Condyloma	Lesions
2. Teeth		Normal		Abnormal	12. Vagina		Normal		Inflammation	Discharge
3. Thyroid		Normal		Abnormal	13. Cervix		Normal		Inflammation	Lesions
4. Breasts		Normal		Abnormal	14. Uterus Size	___	Weeks			Fibroids
5. Lungs		Normal		Abnormal	15. Adnexa		Normal		Mass	
6. Heart		Normal		Abnormal	16. Rectum		Normal		Abnormal	
7. Abdomen		Normal		Abnormal	17. Clinical Pelvimetry		Concerns		No Concerns	
8. Extremities		Normal		Abnormal						
9. Skin		Normal		Abnormal						
10. Lymph Nodes		Normal		Abnormal						

COMMENTS (Number and explain abnormals): _____

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2019-ICLI-00054 518

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Patient Name:		Birth Date:	- -	ID No.:		Date:	- -

Drug Allergy:_____	Latex Allergy ☐ Yes ☐ No	Postpartum Contraception Method:_____ Counseled About LARC? ☐ Yes ☐ No

Is Blood Transfusion Acceptable? ☐ Yes ☐ No Antepartum Anesthesia Consult Planned ☐ Yes ☐ No

Problems	Plans	Resolved?
1.		
2.		
3.		
4.		
5.		

Medication List (Including Opioids)	Start Date	Stop Date
1.	– –	– –
2.	– –	– –
3.	– –	– –
4.	– –	– –
5.	– –	– –

EDD Confirmation				Pregnancy Weight Gain	
Lmp:	– –	= = EDD	– –	Prepregnancy Weight	
Initial Exam:	– –	= Wks = EDD	– –	Height	
Ultrasonography:	– –	= Wks = EDD	– –	BMI	
Final Edd:	– –	IVF Transfer:	– –	Estimated Weight Gain	
Initialed By:				Recommended Weight Gain	

Prepregnancy Weight _____

BMI _____

Date	Weeks Gest. (Best Est.)	Weight	Blood Pressure	Urine (Albumin/Glucose)	Pain Scale * (0–10)	Fetal Movement	Preterm Labor Signs/Symptoms: +=Present O=Absent	FHR	Fundal Height (CM)/EFW	Presentation	Edema	Cervix Examination (Dil./Eff. Sta.) Length On Ultrasonography	Next Appointment	Provider (Initials)	Comments:
- -															
- -															
- -															
- -															
- -															
- -															
- -															
- -															
- -															
- -															
- -															

*Describe the intensity of discomfort ranging from 0 (no pain) to 10 (worst possible pain).

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Patient Name:		Birth Date:	- -	ID No.:		Date:	- -

Laboratory and Screening Tests

Initial Labs	Date	Result	Reviewed
Blood Type	- -	A B AB O	
D (Rh) Type	- -		
Antibody Screen	- -		
Complete Blood Count	- -	HCT/HGB: _____ % _____ g/dL MCV:_____ PLT:_____	
VDRL/RPR (Syphilis)	- -		
Urine Culture/Screen	- -		
HBsAg	- -		
HIV Testing	- -	Pos. Neg. Declined	
Chlamydia (When Indicated)	- -		
Gonorrhea (When Indicated)	- -		
Rubella Immunity	- -		
Other:			

Supplemental Labs	Date	Result	
Hemoglobin Electrophoresis	- -	AA AS SS AC	
PPD/Quanta (When Indicated)	- -		
Pap Test (When Indicated)	- -		
HPV (When Indicated)	- -		
Early Diabetes Screen (When Indicated)	- -	Pos. Neg. Declined	
Varicella Immunity (When Indicated)	- -		
Cystic Fibrosis	- -	Pos. Neg. Declined	
Spinal Muscular Atrophy	- -	Pos. Neg. Declined	
Fragile X	- -	Pos. Neg. Declined	
Tay–Sachs	- -	Pos. Neg. Declined	
Canavan Disease	- -	Pos. Neg. Declined	
Familial Dysautonomia	- -	Pos. Neg. Declined	
Genetic Screening Tests (See Form B)	- -	Pos. Neg. Declined	
Other:			

8–20-Week Aneuploidy Screening	Date Test Performed	Result
Aneuploidy Screening Offered	- -	Accepted Declined GA Too Advanced
1st Trimester Aneuploidy Screening	- -	Pos Neg
2nd Trimester Serum Screening	- -	Pos Neg
Integrated Screening	- -	Pos Neg
Cell-Free DNA	- -	Pos Neg
CVS	- -	Karyotype: 46,XX Or 46,XY/Other_____ Array
Amniocentesis	- -	Karyotype: 46,XX Or 46,XY/Other_____ Array
Amniotic Fluid (AFP)	- -	Normal Abnormal
Other:		

Comments/Additional Labs

(continued)

PROVIDER SIGNATURE (AS REQUIRED): _____

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2019-ICLI-00054 520

Patient Name:		Birth Date:	– –	ID No.:		Date:	– –

Laboratory and Screening Tests *(continued)*

Late Pregnancy Labs and Screening	Date	Result	Reviewed
Tdap Vaccination (Every Pregnancy; 27–36 Weeks)	– –		
Complete Blood Count	– –	HCT/HGB:_____ % _____ g/dL MCV:_____ PLT:_____	
Diabetes Screen (24–28 Weeks)	– –		
GTT (If Screen Abnormal)	– –	_____Fbs _____1 Hour _____2 Hours _____3 Hours	
D (Rh) Antibody Screen (When Indicated)	– –		
Anti-D Immune Globulin (RhIg) Given (28 Wks Or Greater) (When Indicated)	– –	_____ Signature	
Complete Blood Count	– –	Hct/Hgb:_____ % _____ g/dL MCV:_____ PLT:_____	
Ultrasonography (18–24 Weeks) (When Indicated)	– –		
HIV (When Indicated)*	– –		
VDRL/RPR (Syphilis) (When Indicated)	– –		
Gonorrhea (When Indicated)	– –		
Chlamydia (When Indicated)	– –		
Group B Strep (35–37 Weeks)	– –		
Resistance Testing If Penicillin Allergic	– –		
Other:			

Comments/Additional Labs

*Check state requirements before recording results.

Comments

PROVIDER SIGNATURE (AS REQUIRED): _____

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DHS-19-0195-B, 19-0494-B, 19-0495-B-000061

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2019-ICLI-00054 521

Patient Name:		Birth Date:	– –	ID No.:		Date:	– –

Plans/Education

By Trimester. Initial And Date When Discussed.

	NA	Date	Follow-Up Needed	Referral	Comments
First Trimester					
Psychosocial Screening					
Desire For Pregnancy		– –			
Depression / Anxiety (Should Be Performed At Least Once During Perinatal Period)		– –			
Alcohol		– –			
Tobacco (Smoked, Chewed, ENDS, Vaped) Cessation Counseling (Ask, Advise, Assess, Assist, And Arrange)		– –			
Illicit/Recreational Drugs/Substance Use (Parents, Partner, Past, Present)*		– –			
Intimate Partner Violence		– –			
Barriers To Care		– –			
Unstable Housing		– –			
Communication Barriers		– –			
Nutrition		– –			
Wic Referral		– –			
Environmental/Work Hazards		– –			
Anticipatory Guidance					
Anticipated Course Of Prenatal Care		– –			
Nutrition Counseling; Special Diet; Dietary Precautions (Mercury, Listeriosis)		– –			
Weight Gain Counseling		– –			
Toxoplasmosis Precautions (Cats/Raw Meat)		– –			
Use Of Any Medications (Including Supplements, Vitamins, Herbs, Or Otc Drugs)		– –			
Sexual Activity		– –			
Exercise		– –			
Dental Care/Refer to Dentist		– –			
Avoidance Of Saunas Or Hot Tubs		– –			
Seat Belt Use		– –			
Childbirth Classes/Hospital Facilities		– –			
Breastfeeding		– –			
Fetal Testing					
Indications For Ultrasonography		– –			
Screening For Aneuploidy		– –			
Second Trimester					
Anticipatory Guidance					
Signs And Symptoms Of Preterm Labor		– –			
Selecting A Newborn Care Provider		– –			
Reproductive Life Planning & Contraception		– –			
Postpartum Care Planning		– –			
Psychosocial Screening					
Tobacco (Smoked, Chewed, ENDS, Vaped) Cessation Counseling (Ask, Advise, Assess, Assist, And Arrange)		– –			
Depression / Anxiety (Should Be Performed At Least Once During Perinatal Period)		– –			
Intimate Partner Violence		– –			

(continued)

*Data from Ewing H. A practical guide to intervention in health and social services with pregnant and postpartum addicts and alcoholics: theoretical framework, brief screening tool, key interview questions, and strategies for referral to recovery resources. Martinez (CA): The Born Free Project, Contra Costa County Department of Health Services; 1990.

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2019-ICLI-00054 522

Patient Name:		Birth Date:	- -	ID No.:		Date:	- -

Plans/Education *(continued)*

By Trimester. Initial And Date When Discussed.

	NA	Date	Follow-Up Needed	Referral	Comments
Third Trimester					
Birth Preferences					
Pain Management Plans		- -			
Trial Of Labor After Cesarean Counseling		- -			☐ TOLAC ☐ Elective RCS
Labor Support Person(S)		- -			
Immediate Postpartum Larc		- -			☐ Implant ☐ LNG-IUS ☐ Copper IUD
Circumcision Preference		- -			☐ Yes ☐ No
Infant Feeding Intention		- -			☐ Exclusive ☐ Mixed ☐ Formula
Anticipatory Guidance					
Fetal Movement Monitoring		- -			
Signs And Symptoms Of Preeclampsia		- -			
Labor Signs		- -			
Cervical Ripening/Labor Induction Counseling		- -			
Postterm Counseling		- -			
Infant Feeding		- -			
Newborn Education (Newborn Screening, Immunizations, Jaundice, SIDS/Safe Sleeping Position, Car Seat)		- -			
Family Medical Leave Or Disability Forms		- -			
Postpartum Depression		- -			
Psychosocial Screening					
Tobacco (Smoked, Chewed, ENDS, Vaped) Cessation Counseling (Ask, Advise, Assess, Assist, And Arrange)		- -			
Depression / Anxiety (Should Be Performed At Least Once During Perinatal Period)		- -			
Intimate Partner Violence		- -			
Postpartum					
Screening					
Depression / Anxiety (Should Be Performed At Least Once During Perinatal Period)		- -			
Infant Feeding Problems		- -			
Birth Experience		- -			
Glucose Screen (If Gdm)		- -			
Anticipatory Guidance					
Infant Feeding		- -			
Pelvic Muscle Exercise/Kegel		- -			
Return To Work / Milk Expression		- -			
Weight Retention		- -			
Optimal Birth Spacing		- -			
Postpartum Sexuality		- -			
Exercise		- -			
Nutrition		- -			
Cardiometabolic Risk (If Gdm / Ghtn)		- -			
Transition Of Care					
Referral Made To Primary Care Provider		- -			
Pregnancy Complications Documented In Medical Record		- -			
Written Recommendations For Follow-Up Communicated To Patient And To Pcp		- -			

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2019-ICLI-00054 523

Patient Name:		Birth Date:	- -	ID No.:		Date:	- -

Plans/Education *(continued)*

By Trimester. Initial And Date When Discussed.

Requests

	Date		Initials	
Tubal Sterilization Consent Signed (If Desired).	- -			
History And Physical Have Been Sent To Hospital, If Applicable.	- -			
Update With Group B Streptococcus Results Sent.	- -			

Comments

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Patient Name:		Birth Date:	- -	ID No.:		Date:	- -

Plans/Education Notes

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Name:
LAST FIRST MIDDLE

ID#: EDD:

Prenatal Visits

Prepregnancy Weight _____

BMI _____

Date	Weeks Gest. (Best Est.)	Weight	Blood Pressure	Urine (Albumin/Glucose)	Pain Scale * (0–10)	Fetal Movement	Preterm Labor Signs/Symptoms: +=Present, O=Absent	FHR	Fundal Height (CM)/EFW	Presentation	Edema	Cervix Examination (Dil./Eff./Sta.) Length On Ultrasonography	Next Appointment	Provider (Initials)	Comments:
- -															
- -															
- -															
- -															
- -															
- -															
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- -															
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- -															
- -															
- -															

*Describe the intensity of discomfort ranging from 0 (no pain) to 10 (worst possible pain).

Progress Notes

PROVIDER SIGNATURE (AS REQUIRED): _____

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2019-ICLI-00054 526

Name:
LAST FIRST MIDDLE

ID#: EDD:

Prenatal Visits

Prepregnancy Weight _____

BMI _____

Date	Weeks Gest. (Best Est.)	Weight	Blood Pressure	Urine (Albumin/Glucose)	Pain Scale * (0–10)	Fetal Movement	Preterm Labor Signs/Symptoms: +=Present O=Absent	FHR	Fundal Height (CM/EFW	Presentation	Edema	Cervix Examination (DIL./EFF. STA.) Length On Ultrasonography	Next Appointment	Provider (Initials)	Comments:
- -															
- -															
- -															
- -															
- -															
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- -															
- -															
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- -															
- -															
- -															

*Describe the intensity of discomfort ranging from 0 (no pain) to 10 (worst possible pain).

Progress Notes

PROVIDER SIGNATURE (AS REQUIRED): _____

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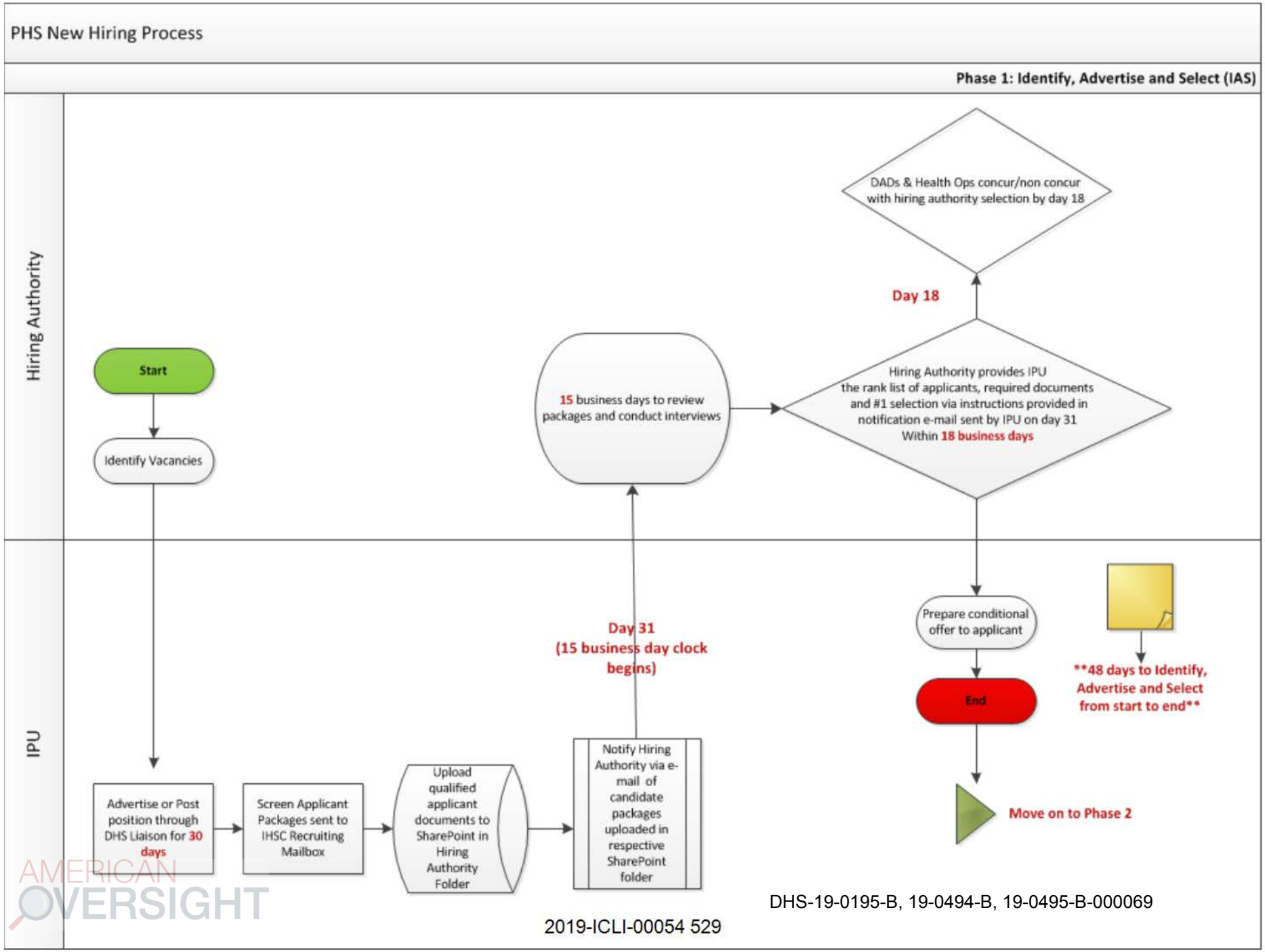
Patient Name:		Birth Date:	- -	ID No.:		Date:	- -

Progress Notes

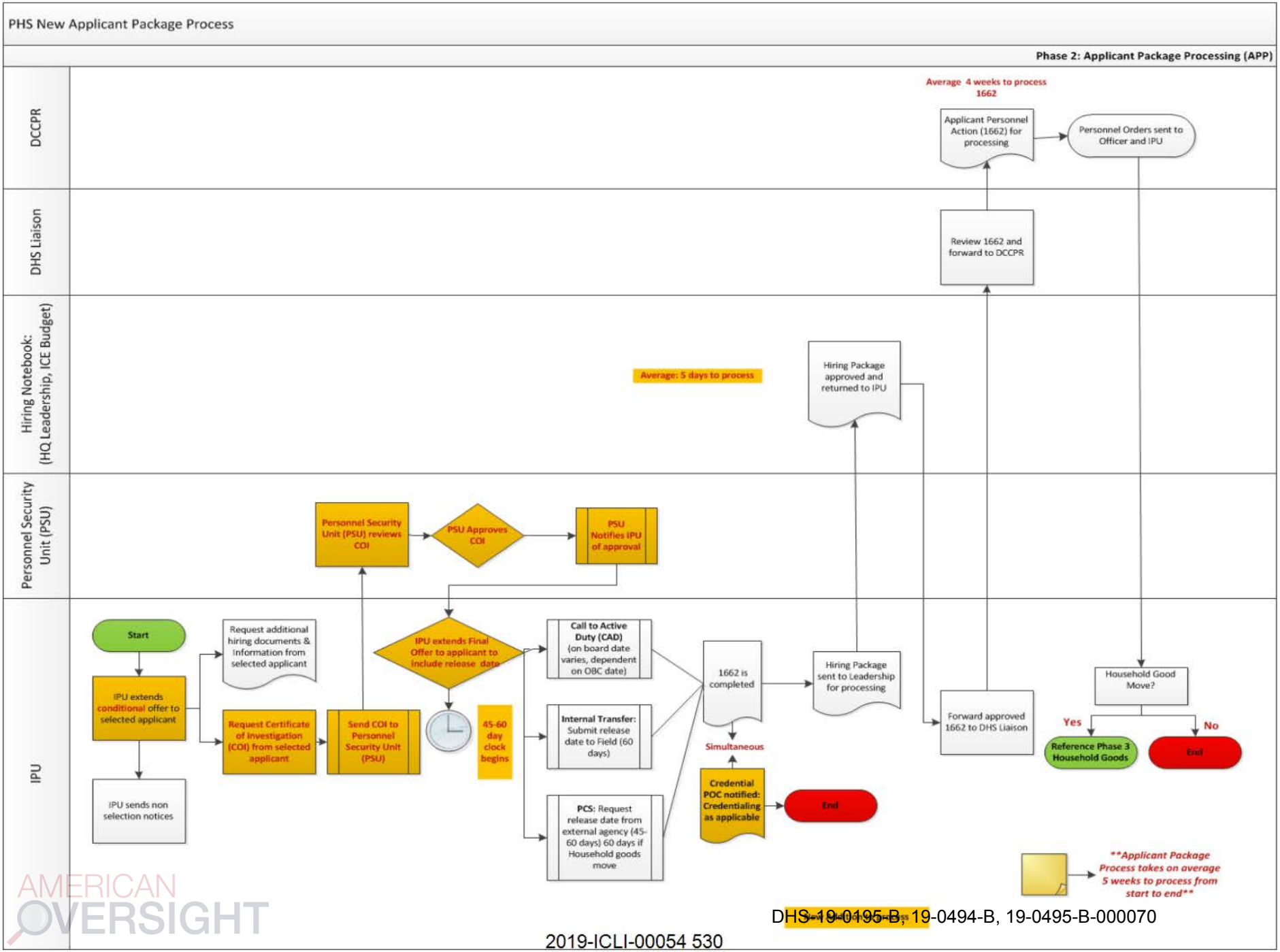
PROVIDER SIGNATURE (AS REQUIRED): _____

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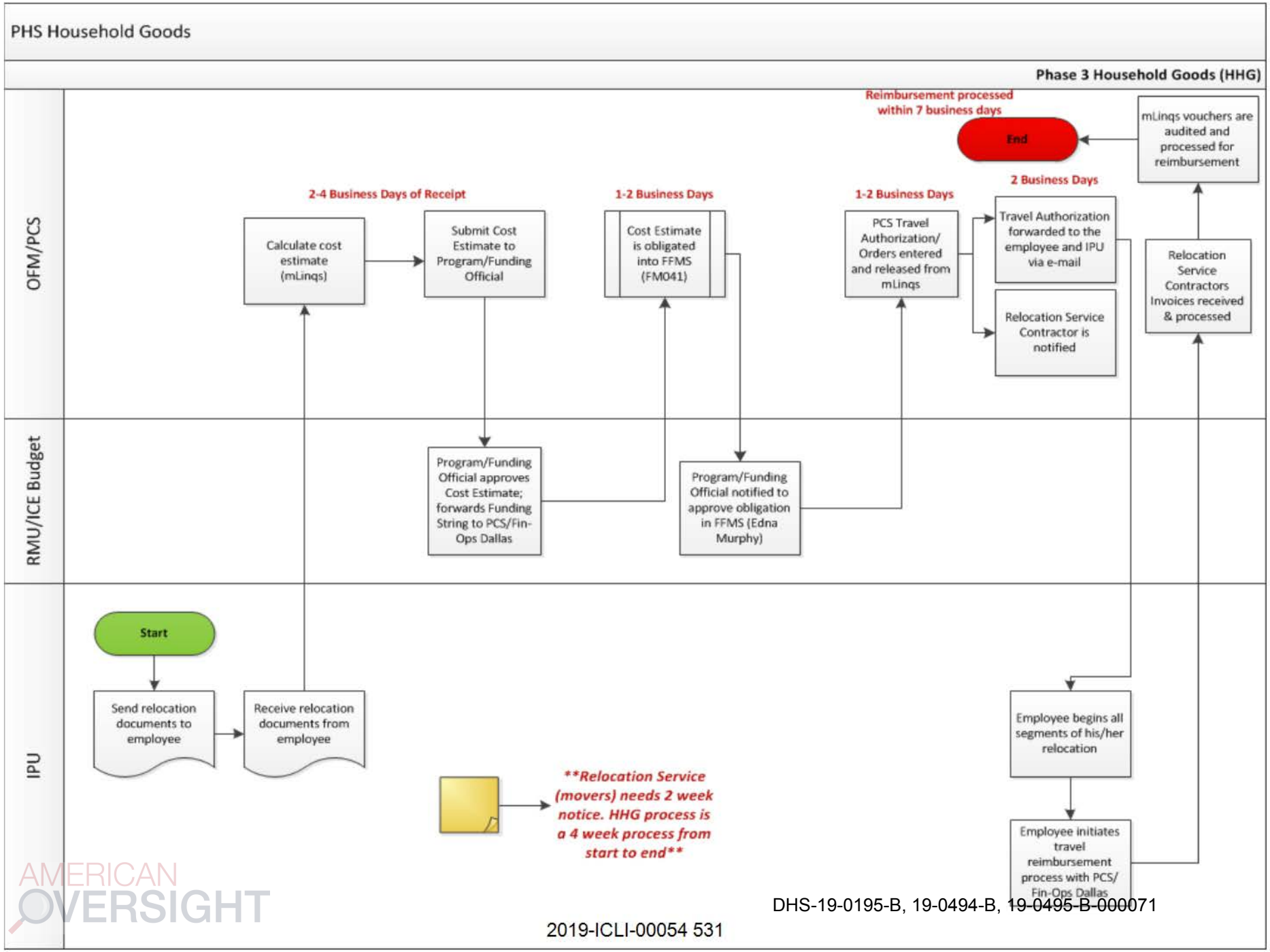
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Task #1:

Records sufficient to show current staffing levels at IHSC, including but not limited to:

- The number of people hired in fiscal years ("FYs")

PHS Officers: 2015-2016 (41), 2016-2017 (36), 2017- 2018(61), and 2018-2019 (18).

GS Employees: 2015-2016 (2), 2016-2017 (4), 2017- 2018(4), and 2018-2019 (4).

- The number of people who have been terminated from or vacated their staff positions in IHSC for FYs

PHS Officers: 2015-2016 (48), 2016-2017 (35), 2017-2018 (31), and 2018-2019 (20). **Termination count include retirements and resignations**

GS Employees: 2015-2016 (0), 2016-2017 (1), 2017-2018 (2), and 2018-2019 (1). **Termination count include retirements and resignations**

- Total full-time equivalents (FTE) for FYs

PHS Officers: 2015-2016 (286), 2016-2017 (291), 2017-2018 (307), and 2018–2019 (316).

GS Employees: 2015-2016 (19), 2016-2017 (23), 2017-2018 (25), and 2018-2019 (29).

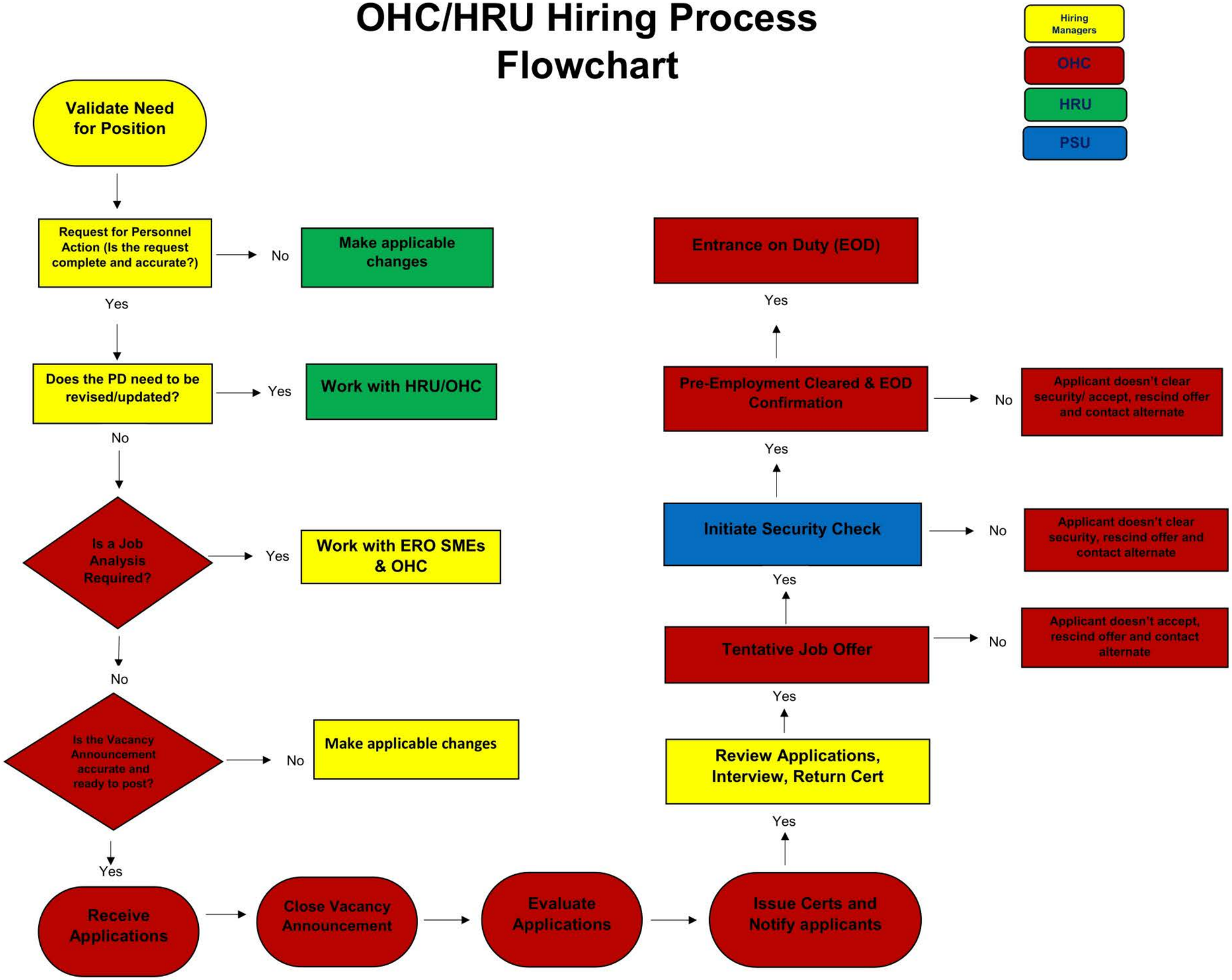
- The number of people employed with IHSC in a mental-health-services-capacity in FYs

PHS Officers: 2015-2016 (15), 2016-2017 (14), 2017-2018 (17), and 2018-2019 (22).

GS Employees: 2015-2016 (1), 2016-2017 (1), 2017-2018 (1), and 2018-2019 (2).

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OHC/HRU Hiring Process Flowchart



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Final Approved Pay Ranges for Physicians and Dentists
Effective January 6, 2019

Pay Table 1	Specialty/Assignment	Pay Table 2	Specialty/Assignment
Tier 1: **$104,843** - 225,000 Tier 2: $110,000 - 234,000 Tier 3: $120,000 - 262,000	Endocrinology Endodontics General Practice – Dentistry Geriatrics Infectious Diseases Internal Medicine/Primary Care/Family Practice Palliative Care Periodontics Podiatry (General) Podiatry (Surgery-Forefoot, Rearfoot/Ankle, Advanced Rearfoot/Ankle) Preventive Medicine Prosthodontics Rheumatology All other specialties or assignments not requiring a specific specialty training or certification	Tier 1: **$104,843** - 264,000 Tier 2: $115,000 - 292,000 Tier 3: $130,000 - 320,000	Allergy and Immunology Hospitalist Nephrology Neurology Pathology PM&R / SCI Psychiatry
Pay Table 3	**Specialty/Assignment**	**Pay Table 4**	**Specialty/Assignment**
Tier 1: **$104,843** - 348,000 Tier 2: $120,000 - 365,000 Tier 3: $135,000 - 385,000	Anesthesiology Pain Management Cardiology (Non-Invasive) Emergency Medicine Gynecology Hematology – Oncology Nuclear Medicine Ophthalmology Oral Surgery Pulmonary	Tier 1: **$104,843** - 400,000 Tier 2: $125,000 - 400,000	Anesthesiology Cardiology (Invasive/Non-Interventional) Cardio-Thoracic Surgery Critical Care Dermatology Dermatology MOHS Gastroenterology General Surgery Interventional Cardiology Interventional Radiology Neurosurgery Orthopedic Surgery Otolaryngology Plastic Surgery Radiology (Diagnostic) Radiation Oncology Urology Vascular Surgery
Pay Table 5	**Specialty/Assignment**	**Pay Table 6**	**Specialty/Assignment**
Tier 1: $150,000 - 309,000 Tier 2: $145,000 - 289,000 Tier 3: $140,000 - 270,000	VHA Chiefs of Staff – Tier assignments are based on published facility complexity level Tier 1 – Complexity Levels 1a & 1b Tier 2 – Complexity Levels 1c & 2 Tier 3 – Complexity Level 3, facilities with no designated level, Deputy Chiefs of Staff at Complexity Levels 1a and 1b	Tier 1: $145,000 - 265,000 Tier 2: $145,000 - 245,000 Tier 3: $130,000 - 235,000	Tier 1 – Principal Deputy; other Deputy Under Secretaries for Health; Chief Officers; Network Directors; Medical Center Directors; Network Chief Medical Officers Tier 2 – Executive Directors; other Assistant Under Secretaries for Health; VACO Chief Consultants; National Directors; National Program Managers Tier 3 – All VACO physicians or dentists not otherwise defined

Minimum annual rates of pay for Pay Tables 1 through 4 adjusted to reflect increase made to the Physician, Dentist, and Podiatrist Base and Longevity Pay Schedule effective Jan 6, 2019.

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ICE

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ICE

IHSC Personnel Unit:

RECRUITMENT

IHSC Hiring Selection Process: Tips and Best Practices

Recruiting Inquiries:
LCDR [redacted] M.B.A.,
Office: [redacted]
IHSCRecruiting@ice.dhs.gov

Last Updated: 3/21/2019

U.S. Immigration and Customs Enforcement

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ICE

Selection/Non-Selection Due Date:

Hiring Package Notification includes:

- ❑ Notice of available hiring package(s) in the Hiring Folder for review.
- ❑ Selection/Non-selection Decision due date.
- ❑ **Link to the Hiring Folder**
  - ❑ **A list of documents contained in the hiring folder**
- ❑ Instructions for completing the selection process.
  - ❑ **Conditional Offer steps and non-selection**
- ❑ Contact information for recruiting and personnel action inquiries.
  - ❑ **Communication**

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FEDERAL OVERSIGHT

ICE

Site/Unit Hiring Folder:

Review Hiring Folder:

Respective site/unit folder include the following documents:

- ❑ **Applicants hiring documents (**uploaded into a single PDF document labeled by the applicant's last name)
- ❑ **Candidate Rank List** (excel spreadsheet with candidates contact and pre-screening information).
- ❑ **IHSC Reference Check Form**
- ❑ **IHSC Interview Checklist**
- ❑ **Position Description as applicable**

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FOR AN OVERSIGHT

ICE

Candidate Package:

Review Hiring Documents:

Ensure the candidate meets the minimum qualifications of the position they are seeking:

PHS Officers:

- ❑ Date of most recent Certificate of Investigation
- ❑ Cover letter-include three (3) professional references, title, and contact information.
- ❑ Curriculum Vitae (CV)-relevant experience, education, training, etc.
- ❑ Three (3) most recent Commissioned Officer Effectiveness Reports (COER)
- ❑ Copies of proof of licensures, degrees, and certificates

New Call to Active Duty (CAD):

- ❑ Cover letter- include three (3) professional references (name, title, and contact information)
- ❑ CV - relevant experience, education, training, etc.
- ❑ Copies of proof of licensures, degrees, certificates
- ❑ USPHS – Appointment Board Decision Letter/Email

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ICE

Candidate Interview:

Schedule Interview:

Conduct interviews within 15 business days of receiving the hiring package:

- ❑ **Interview Attendees/Participants:**
  - Supervisor for the position
  - Unit Chief of the Discipline
  - Facility HSA/AHSA (if applicable)
- ❑ **IHSC Interview Checklists:**
  - IHSC Non-supervisory Interview Checklist and Evaluation Form: to be used for candidate applying to fill a Non-supervisory position.
  - IHSC Supervisory Interview Checklist and Evaluation Form: to be used for candidate applying to fill a Supervisory position.
- ❑ **IHSC Reference Check form:** to be completed and signed by the Hiring Authority when contacting the references, and/or may be sent to reference(s) for completion, and returned signed form to the Hiring Authority.

U.S. Immigration and Customs Enforcement

FEDERAL OVERSIGHT

ICE

Selection/ Non-Selection:

Complete the Selection/Non-Selection process:

Notify IPU IHSCRecruiting@ihs.dhs.gov of the selection/non-selection decision upon completion of the following steps:

- ❑ Complete hiring documents (sign and date interview notes and reference check forms for the selected candidate(s)
- ❑ Upload completed hiring documents to the SharePoint hiring Folder **(**Note-Link provided in notification)** including, interview notes for ALL non-selected candidates.
- ❑ Update the Candidate Rank List (excel spreadsheet) in the SharePoint hiring folder: **(**Note-See ex: slide#7)**
  - **Selected#1**
  - **Selected#2**
  - **Non-selected** where appropriate. (If non-selected, enter reason i.e. not qualified, etc.)
  - Enter Interview date. If not interviewed, enter reason.
  - Reference checked. Confirm all references have been checked.
- ❑ **REPLY ALL to the selection/non-selection email with your final selection(s)**

Conditional Offer:

- ❑ IPU will review the Interview Notes for each candidate
- ❑ IPU will extend a conditional offer to the selected PHS candidate, and communicate with the appropriate persons to negotiate a release date.

Non-selection:

- ❑ IPU will send non-selection notices to non-selectees **after** the selected candidate has accepted the conditional offer, and signed the Service Remaining Requirement agreement. The Hiring Authority will receive an update at this point.

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Candidate List

To be completed by the Hiring authority(s)

HSA San Diego
Open until filled

Completed by IHSC Recruiting

#	NAME	Agency	PHONE	EMAIL	Preference	Submitted Documents	Selected/ Non-Selected If Non-selected, enter reason	Interview Date If not interviewed, enter reason	References Checked
1	LT John Doe	BOP	(520)663-5000 x 6341	Johndoe.hireme.com	Tacoma (O-5)	Yes	Selected	12/2/2018	Yes
2	CAPT Jane Doe	IHS	Office: 907-228-9354 Cell: 520-954-4067	Janedoe.hireme.com	Tacoma (O-5)	Yes	Non-selected	Not interviewed- Selection already made	N/A

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IHSC IPU Recruiting & Personnel Inquiries POC:

LCDR (b)(6); (b)(7)(C)
Office:
HQ Personnel Inquiries:
IHSCIPUHQ@ice.dhs.gov
and;
ISOU Personnel Inquiries:
IHSCIPUISOU@ice.dhs.gov

LCDR (b)(6); (b)(7)(C)
Office:
Central Region Personnel Inquiries:
IHSCIPUCentral@ice.dhs.gov

LCDR (b)(6); (b)(7)(C)
Office:
Western Region Personnel Inquiries:
IHSCIPUWestern@ice.dhs.gov

LCDR (b)(6); (b)(7)(C)
Office:
Eastern Region Personnel Inquiries:
IHSCIPUEastern@ice.dhs.gov

LCDR (b)(6); (b)(7)(C)
Office:
Recruiting Inquiries:
IHSCRecruiting@ice.dhs.gov

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Frequently Asked Questions

Communication:

Q.) Who should the Hiring Authorities contact to receive the status of a selected candidate's conditional offer? (**Note- the respective IPU Regional PMO will notify the Hiring Authority after the selected candidate has *accepted* the conditional offer and *signed* the Service Remaining Requirement agreement, and non-selection notices have been sent to non-selected candidate(s).

A.) The Hiring Authority may contact the appropriate IPU Regional Personnel Management Officer (PMO)/Mailbox

Q.) Who should the Hiring Authorities contact to report a selection decision following completion of the selection process?

A.) The Hiring Authorities must notify IHSCRecruiting@ice.dhs.gov of their selection decision by selecting **"Reply All" to the Hiring Package notification on or prior to the selection due date.** Provide the following information: ***Name of selected candidate(s), Position Grade, Position Location, and confirmation that all required documents have been uploaded to the Hiring Folder.***

Q.) Who should the Hiring Authorities contact to confirm receipt of submitted application(s) ?

A.) The Hiring Authority may notify IHSCRecruiting@ice.dhs.gov for all recruiting and application submission inquiries . (**Note: IPU-Recruitment pre-screens all submitted hiring documents to ensure all required documentation and information are provided. If incomplete, a notification is sent to the applicant to resubmit application with the required information. Therefore, some applications may encounter a delay, pending a complete submission).

Q.) What is the timeline for processing submitted application?

A.) It is our goal in IPU to move candidate actions forward as quickly as possible, and we are constantly evaluating and streamlining our process to better manage the larger volume of applicants. IPU require at least a week to pre-screen candidates/hiring document packages prior to forwarding to the Hiring Authority.

- Candidates responding to "30-Day" announcements or announcements with closing dates, are forwarded to the Hiring Authority as quickly as possible following the announcement closing date.
- Candidates responding to "Open until filled" announcements are forwarded to the Hiring Authority as soon as possible following prescreening and a complete submission of at least one candidate, and/or a batch of candidates, and subsequent candidates are received and screened.

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Proposed updates:

- Updates to Hiring Documents:
  - Make the IHSC Interview Checklists and Reference PDF Forms fillable, and include drop down list values for standard position title, position grade, and facility for consistency and standardization; and to ensure the position title, grade, and location for the selected candidates are recorded and processed accordingly.
  - Add drop-down list values where appropriate on the Candidate List for consistency and standardization of data.
- Updates to the Position Description Review and Approval process:
  - Incorporate a SharePoint approval workflow to store, track, and manage annual and Adhoc PD review and approval. More to be announced as IPU gather and implement requirements.

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Questions:



For more information please contact IHSC Personnel Unit – Recruitment

- IHSCRecruiting@ice.dhs.gov

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and Customs
Enforcement

ICE

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FOIA Request: 2019-ICFO-36404
IHSC Staffing Levels

	FY2015-2016	FY2016-2017	FY2017-2018	FY2018-2019
	# of Staff as of 9/30/2016	# of Staff as of 9/30/2017	# of Staff as of 9/30/2018	# of Staff as of 5/14/19
The number of people hired in the fiscal year [1]	370	331	304	254
The number of people who have been terminated from or vacated their staff positions in IHSC in the fiscal year [1]	243	265	240	191
Total full-time equivalents (FTE) for fiscal year [2]	955	1008	1019	1054
The number of people employed with IHSC in a mental health services capacity in the fiscal year [2]	87	93	88	94

Notes:

1. These numbers include both full-time and PRN (as needed) contract medical staff. Our records for tracking the arrival and departure of contract staff do not differentiate between the work status.
2. These numbers are based upon staffing plans which do not include PRN (as needed) contract medical staff.

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U.S. Public Health Service

ICE Health Service Corps (IHSC)
Enforcement and Removal Operations
Immigration and Customs Enforcement

IHSC Personnel Unit (IPU) Guide

Approved by: (b)(7)(C), (b)(6)

Title: ERO-AD-IHSC

Date signed: 4/2/2015

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Foreword

This IHSC Recruitment and Retention Manual supplements the following IHSC Directive:

01-07, *Human Resources*

The purpose of the *IHSC Personnel Unit (IPU)* Guide is to outline and provide guidance on the essential processes that encompass human resource identification, selection, appointment, and retention of federal civil servants or U.S. Public Health Service (USPHS) Commissioned Officers detailed to the Department of Homeland Security (DHS).

The *IPU Guide* is organized by sections, with subheadings that provide detailed information.

The material in this manual supplements the laws, regulations and instructions for both Federal Civil Servants and USPHS Commissioned Officers found respectively in (1) CFR Title 5 – Administrative Personnel, Chapter I –*Office of Personnel Management* and (2) the *Electronic Commissioned Corps Issuance System (eCCIS)*

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I. Overview

The IPU within the IHSC supports the healthcare delivery system by ensuring that IHSC maintains a competent, responsive, and representative workforce. To support this initiative, all IHSC employees will be afforded the opportunity for personal growth, professional development and upward mobility potential.

The IPU acts as the liaison to the Enforcement and Removal Operations (ERO) Human Resources Unit, which is responsible for hiring and recruiting U.S. Immigration and Customs Enforcement (ICE) federal civil servants.

The IPU Unit Chief is responsible for maintaining and updating this manual and coordinating the annual review of all Position Descriptions (PDs) in the PD database.

The IPU Unit Chief, in coordination with the Deputy Assistant Director (DAD) for Administration and the Chief of Health Operations, will assist IHSC in workforce development and utilization activities. This will include annual and periodic reviews of the staffing plan, maintaining an accurate database on vacancies and personnel actions and identifying and notifying senior staff of staffing trends.

II. Definitions with Expanded Information

Accession – An accession is an appointment and call to extended active duty in the USPHS in the Regular Corps.

Call to Active Duty (CAD) – The issuance of competent orders for an officer to enter on full-time duty in the USPHS Commissioned Corps.

Chief of Staff (CoS) – The CoS represents the Assistant Director (AD) and serves as the principal advisor on major issues and challenges affecting IHSC. The CoS integrates and synchronizes all aspects of mission support and mission operations, as well as the formulation and publication of all governing documents. The CoS oversees and coordinates the efforts of the IHSC Office of Communications (IOC), the Resources Management Unit (RMU) and the IPU. The CoS has a key role in sustaining the IHSC healthcare system. The RMU and IPU are responsible for identifying and developing human and fiscal resource requirements and employing methods to acquire those resources and allocate them consistent with agency goals, mission priorities and all applicable standards and criteria. Through the Taskings Manager (Deputy Chief of Staff or designee), the CoS maintains visibility of all tasks coming in to the IHSC and ensuring responses are timely and accurate. IOC plays a major role in formulating these responses.

Competencies – Competencies are a measurable pattern of knowledge, skills, abilities, behaviors, and other characteristics that an individual needs to perform work roles or occupational functions successfully. Competencies specify the "how" of performing job tasks, or what the person needs to be successful on the job.

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Credentialing – Credentialing is an ongoing process whereby a facility's medical staff obtains, verifies, and assesses an individual's professional credentials. The medical staff and governing body utilize this information to evaluate competencies and appropriately grant medical staff membership and/or clinical privileges to a provider.

Credentials – Credentials are the attestation of qualification, competence, or authority issued to an individual by a third party with the authority or assumed competence to do so. Examples of credentials include the documents that constitute evidence of practitioner training, licensure, experience, and expertise.

Entry on Duty (EOD) – EOD is the first day an employee begins performance at a designated duty station.

Hiring Authority – Individual responsible for completing a tasking and/or coordinating the completion of the tasking related to the hiring, transfer or separation of personnel.

IPU – The IPU develops and implements recruiting and retention strategies to identify potential USPHS officers and federal civil servant candidates for employment within the IHSC. The recruitment strategies include the team's execution of personnel actions (CAD, transfers, amendment to orders, retirements, etc.) and other mission critical activities related to this effort to include: attendance at conferences, job fairs and university presentations and the management of recruitment goals. The retention strategies include: the teams participation in the ongoing development and maintenance of an employee recognition program, coordination of loan repayment programs, submission specialty pay packages and incentives, professional development/career counseling/mentorship, and oversight of the employee appraisal and evaluation process.

Licensed Independent Practitioners (LIPs) – LIPs include physicians, dentists, Nurse Practitioners/Mid-wives or other individuals permitted by law to provide care and services without direction or supervision that is within the scope of the individual's license and consistent with individually granted privileges.

Personnel Action – Action taken to place an employee in a position or remove an employee from a position (e.g., by appointment, promotion, reassignment, demotion, or separation).

Personnel Action Form – Specific mechanism whereby a staff vacancy including requirements for the position is communicated to the IPU Chief for further action and activation of the screening, interviewing, and hiring process.

Position Description (PD) – A PD is a statement of the major duties, responsibilities, and supervisory relationships of a position. The PD specifies the work required by the position.

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Privileging – The process through which the health care practitioner is granted authority to provide certain care and services to patients within the healthcare facility or clinic. Privileging is a step beyond credentialing for LIPs to provide services within IHSC clinics.

Senior Staff – Leadership within IHSC includes the AD, DADs, and the CoS.

Suitability Clearance Process – The hiring agency initiates the suitability clearance process prior to hire:

- The Division of Commissioned Corps Personnel and Readiness (DCCPR) has the responsibility to initiate suitability clearances for all incoming PHS officers. The ICE Personnel Security Unit (PSU) verifies the officers' suitability determination from DCCPR.

- Officers may be upgraded to a higher level clearance based on their position, which will be determined by the mission requirement, as authorized by the AD.

- The ICE PSU initiates suitability clearances, and security clearance upgrades, for all incoming federal civil servants IHSC staff.

- The contracted staffing agency makes arrangements with the assigned IHSC Contracting Officer Representative to ensure suitability clearances are conducted on all contract staff.

III. Recruitment

The IPU has the responsibility of developing and executing an IHSC Recruitment Strategy that includes near and mid-term recruitment and advertising options that enable IHSC to more effectively communicate its mission to recruit, maintain and sustain a trained, ready and equipped force of medical, administrative and management professionals (USPHS and federal civil servants).

Note: Refer to IHSC Strategic Recruitment Plan for further guidance.

IV. USPHS Pre-Employment Processes

A. Delegation

The AD delegates the authority to take action on the appointment, direction, reassignment and general administration of personnel to the Chief of IPU through the CoS.

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B. Vacancy Verification

Responsible Parties

Unit Chiefs

- Are responsible for forecasting and identifying vacancies within their areas of responsibility.
- Report staffing needs to the Chief of IPU by submitting an IHSC Personnel Action Form. The personnel action will be based on the needs and mission of the agency.

The Chief of IPU

- Reviews and designates staff to initiate procedures for hiring action.

Senior Staff

- Reviews hiring notebooks and approves hiring action.

C. Posting of Vacancy Position

Upon receipt of the IHSC Personnel Action Form, IPU will:

- Coordinate posting the vacancy position on USAJobs (https://www.usajobs.gov/) with ICE Office of Human Capital (OHC), Human Resources Specialist or other designated recruitment tool.
- Allow vacancy announcement to post for at least 30 days with longer increments if necessary due to limited response.
- Post positions internally within IHSC and notify the DHS Commissioned Corps Liaison who will coordinate the distribution of the announcement(s) to the Commissioned Corps Professional Advisory Committees, Chief Professional Officers, and agency Liaisons. Prospective candidates are to adhere to the guidelines for submission of the application package.

D. Application Review Process

Upon notification that IPU, or other designated recruitment tool for prospective candidates, has completed the pre-screening process, the Hiring Authority will:

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- Review the hiring package (resume/Curriculum Vitae (CV), cover letter, three most recent Commissioned Officer Evaluation Reports, and references) to ensure the candidate meets the minimum qualifications of the position they are seeking.

- Schedule an interview with the candidate(s). The Supervisor for the position, the Unit Chief of the specific discipline, and the facility HSA/AHSA (if applicable) will participate in the interview and evaluation of candidate(s).

- Conduct interviews within 15 business days of receiving the hiring package from USAJobs, IPU and/or other designated recruiting tool.

- Provide IPU with the selected candidates' interview dates. Any exceptions will be reported to IPU.

- Rank order the candidates based on the results of the IHSC Interview Checklist and Evaluation Form.

- Provide IPU with the rank order list of eligible candidates and the IHSC Interview Checklist and Evaluation Form within 5 business days after the completion of the interview.

E. Selection of Candidate

Upon notification from the Hiring Authority on the selected candidate, IPU will:

- Have the selected candidate complete the Personnel Security Data Form and request a copy of the most recent Certificate of Investigation/security document from their Electronic Official Personnel Files (eOPF) (Not applicable to CAD) to ensure the respective officer's suitability determination is within periodicity before proceeding with the selection notification process.

- Send a copy of the selected candidate's Certificate of Investigation and Personnel Security Data Form to ICE PSU for verification of suitability clearance.

- If the candidate does not meet the security requirements the Hiring Authority will be notified and IPU will contact the next eligible candidate from the rank order list or re-post the vacancy in the event there were no other eligible candidates.

- Send a selection notification to the candidate and obtain written confirmation of the candidate's acceptance of the position. If the candidate does not accept, IPU will notify the Hiring Authority and will contact the next eligible candidate from the rank order list or re-post the vacancy in the event there were no other eligible candidates.

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- Request the following information from the selected candidate which is necessary to complete the hiring process:
    - Current license/Certification.
    - Confirmation of Basic Life Support (at a minimum) certification.
    - Mode of travel: Personal Vehicle (POV) or Air.
    - Copy of most recent orders with present duty station address (Not applicable to CAD).
    - Confirmation of household goods movement.
    - Current mailing address.
    - Name and contact information of the individual with the authority to provide a release date. (not applicable to CAD).
- Send the non-selected candidates a notification letter.
- Notify OHC that a selection has been made and the vacancy announcement can be closed.
- Assign an IHSC staff member to serve as the selectees sponsor/Point of Contact

F. Administrative Hiring Action

Current USPHS Officer as selected candidate

If the selected candidate is a current PHS officer, IPU will:

- Contact the releasing authority (e.g. first line supervisor, agency liaison, etc.) to negotiate and finalize an effective transfer date not greater than 60 days from the date of the offer.
- Contact the selected candidate with the approved report date.
- Notify the Chief of Health Operations Unit, HSA/AHSA at the facility(if applicable), and Unit Chief (if applicable) of the Officers report to duty date.
- Complete personnel action request (see Personnel Action Request section G).
- If applicable, coordinate movement of household goods.

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Call to Active Duty

If the selected candidate is a new CAD, IPU will:

- Complete personnel action request (see Personnel Action Request section G).
- Coordinate with DCCPR to confirm CAD is professionally boarded, medically cleared and has a favorable suitability clearance.
- Forward orders to selected candidate with effective report date.
- Notify the Chief of Health Operations Unit, HSA/AHSA at the facility (if applicable), and Unit Chief (if applicable) of the Officers report to duty date.
- If applicable, coordinating movement of household goods.

Current IHSC Officer as selected candidate - Transfer

If the selected candidate is a current IHSC officer, IPU will:

- Contact the officer's releasing authority (e.g., first line supervisor, agency liaison, etc.) to negotiate and finalize an effective transfer date not greater than 60 days from date of the offer.
- Contact the selected candidate with the approved report date.
- Notify the Chief of Health Operations Unit, HSA/AHSA at the facility (if applicable), and Unit Chief (if applicable) of the Officers report to duty date.
- Complete personnel action request (see Personnel Action Request section G).
- If applicable, coordinating movement of household goods.

G. Personnel Action Request

The IPU will:

- Complete the Request for Personnel Action – Commissioned Officer form (PHS-1662).
- Prepare and routes hiring notebook for approval and signature by the Chief of IPU, Chief of Health Operations Unit, Chief of RMU, DAD – Administration, DAD – Clinical Services, CoS, and the AD.

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- Hiring Notebook Documents:
  - PHS -1662 form.
  - CV or Resume.
  - Billet Description and Position number.
  - IHSC Interview Checklist and Evaluation Form.
  - Reference check form.
  - Director's Welcome Letter (CAD and new IHSC employees).
  - Sponsorship Letter (CAD, new IHSC employee or Transfer).
  - CAD Justification Letter (CAD).
  - Justification for billet change/update (if applicable)

  Note: Approval authorities are responsible for endorsing hiring action and returning to IPU within seven business days.

- Coordinate approval and signature of PHS-1662 with ERO Budget.

  Note: ERO is responsible for signing and returning the PHS-1662 to IPU within seven business days.

- Forward signed PHS-1662 to the DHS Commissioned Corps Liaison for signature and forwarding to DCCPR for processing.
- Check the DCCPR database to retrieve PHS Orders.
- Send the Officer a copy of their orders.
- Archive the contents of the hiring notebook.

H. Federal Civil Servant Employees as Selected Applicants

All administrative actions pertaining to federal civil servant employees are handled by the ICE/ERO Human Resources Unit and ICE Office of Human Capital.

Refer to ICE Hiring Process Map (https://insight.ice.dhs.gov/mgt/hc/Pages/recruitment/index.aspx) for additional guidance.

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I. Contract Employees as Selected Applicants

All administrative actions pertaining to contract employees are handled by the contracting agency.

V. Personnel Folders

A. USPHS Local Personnel Files

IPU maintains local personnel files that will include the contents of the hiring notebook, PDs, approval of outside activity form, approval of IHSC official passport, IHSC orientation checklist, and other related documents.

B. Electronic Official Personnel Folder (eOPF)

USPHS Commissioned Corps Officers

USPHS Commissioned Corps Officers are detailed to ICE and are employees of the U.S. Department of Health and Human Services (DHHS); however, per the Memorandum of Agreement (MOA) between the DHS and the DHHS, officers are expected to adhere to relevant DHS Policy as it pertains to the workplace.

The information below is excerpted from: Commissioned Corps Personnel Manual - Official Personnel Folder - CC28.1 (http://dcp.psc.gov/eccis/documents/CCPM28_1_1.pdf)-

- Authority. Authority to administer the PHS Commissioned Corps includes the authority governing the custody, use, and preservation of PHS records, papers, and property (42 U.S.C. 216 (b)). Authority to maintain the OPF for PHS commissioned officers has been delegated to the Director, Commissioned Personnel Operations Division (CPOD), Office of Personnel Management (OPM), Office of Management (OM), and PHS.

- Purpose and Use of OPF. The OPF is the official depository for the records and reports of personnel actions effected during an officer's service in the PHS Commissioned Corps. The personnel action reports and other documents, filed as permanent records in the folder (see Section H of this INSTRUCTION), give legal force and effect to personnel actions, are used to determine eligibility or entitlements of dependents, and establish an officer's rights and benefits under the pertinent laws and regulations governing service in the PHS Commissioned Corps.

- Establishment and Maintenance of OPF. CPOD maintains an OPF for each officer in active, inactive, and retired status. The OPF is established when the officer is appointed. It is maintained by CPOD until two years after the officer's commission is terminated or he/she dies, except that in the case of the

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deceased officer who has a designated beneficiary receiving an annuity or other benefit from PHS, the OPF is maintained until the annuity payments or benefits terminate (see Section H of this INSTRUCTION concerning disposition of OPFs after the CPOD retention period). If however, there is an action pending settlement at the end of the retention period (e.g., collection of indebtedness, litigation, or request for correction of records) the OPF will be retained by CPOD until the case is settled.

IPU authorized personnel are granted access to the eOPF to obtain official documents necessary to support the management of Commissioned Corps officers assigned to IHSC.

C. Federal Civil Servant Employee Personnel File

Supervisors of GS employees are required by the Office of Personnel Management to maintain employee personnel files. Instructions for maintaining those files are found at the Employee Performance File (EPF) page:
http://intranet.ice.dhs.gov/hc/hrpractioners/per_mgt_awards/epf-guidance/
GS employees should maintain their own eOPF (e.g., Performance Work Plan, appraisals).

VI. Orientation for New IHSC Employees

The IPU has the responsibility of ensuring that all new Headquarters (HQ) IHSC employees are assigned a sponsor and complete their orientation within 30 days of entry on duty. A signed statement that all checklist items have been completed will be kept in the employee's file.

HSAs are responsible for orienting staff at their medical facilities and are to forward the signed checklist/statement to the attention of the Chief of IPU for tracking purposes. See *IHSC Field Orientation Guide* for field employees.

All employees will receive a basic orientation related to policy and facility familiarization upon arrival to the duty station.

In additional, field staff will receive a more in-depth training within 90 days with a focus on the health care delivery system within the detention environment in accordance with accreditation and all applicable ICE detention standards. Completion of orientation training will be kept on site at a readily accessible location. See Orientation for New IHSC HQ Employees, IHSC Directive: 01-19 effective 1 SEP 2013 for further guidance.

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VII. Transfers, Separations, and Retirement

It is the responsibility of the immediate supervisor to ensure that the guidelines regarding the clearance of the duty station are followed and that it is appropriately documented.

A. PHS Transfers within the IHSC

IPU will provide the officer with a copy of their orders. The officer is responsible for the following when clearing the site:

- If applicable, coordinating movement of household goods with IPU.
- Returning any local identification cards and keys to local ICE/ERO.
- Completing and submitting outstanding travel vouchers.
- Hand carrying official passport and pertinent documents to new duty station.

B. Separation and Retirement

- Officers will refer to PAM 32- Separation/Book: 8 Chapter: 3, Section 1, Instruction: 03 for information on Separation and PAM 24-Retirement/Book: 8, Chapter 3, Section 1, and Instruction: 02 for information about Retirement
- No administrative leave or financial support will be allowed for Continuing Medical Education for staff within six months of a permanent change of station or retirement.
- Federal civil servant employees will refer to ICE Policy and the ICE Office of Human Capital for guidance and direction.
- Contract staff will notify their Human Resource Department for instruction and notify the local HSA. Contract staffing issues are handled by the Health Operations Unit.

The following administrative actions will be completed to process Separation of Commissioned Officer, PHS Form 1373:

- Supervisor signs PHS Form 1373 and sends to IPU for review and approval
- IPU will:
    - Route the form to the Chief of RMU for signature.
    - Retain a copy of the form.
    - Route the form to the DHS Commissioned Corps Liaison for DCCPR processing.

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The following administrative actions will be completed to process Retirement of Commissioned Officer:

- Officer prepares retirement package consisting of:
  - PHS Form 1373 signed by Supervisor.
  - Request and Authority for Leave of Absence, PHS Form 1345.
  - Request for Voluntary Retirement memo.
  - Supervisor Voluntary Retirement Endorsement memo
- Officer will send completed package to IPU for review and coordination.
- Supervisor prepares and signs Voluntary Retirement Endorsement memo
- IPU will:
  - Review retirement package.
  - Route PHS Form 1373 to the Chief of RMU for signature.
  - Coordinate signature of voluntary Retirement Endorsement Memo from IHSC AD
  - Retain a copy of retirement package.
  - Route the form to the DHS Commissioned Corps Liaison for DCCPR processing.

VIII. IHSC Out-processing

All IHSC staff is responsible for completing the DHS Exit Clearance Form, ICE Form G-559 and returning it to IPU.

IX. Commissioned Corps Officer Evaluations

All IHSC supervisors will evaluate USPHS officers on an annual basis in accordance with DCCPR policy. Mid-term evaluations will be conducted in accordance with IHSC Operations Memorandum, Mid-term Counseling Guidance.

IPU will track all paper Commissioned Officer Evaluation Reports (COERS) and Reviewing Officer Statements (ROS) for submission to the DHS Commissioned Corp Liaison.

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A. Annual COER

The COER serves as the evaluation instrument that becomes a part of the officer's OPF. Supervisors, IPU, and other IHSC staff must handle and transmit the COER as confidential information which may be disclosed within IHSC only to individuals who have an official need to know in compliance with the Privacy Act of 1974. IHSC first line supervisors evaluate all IHSC Commissioned Corps officers annually on their performance and effectiveness.

- The rating cycle is October 1 through September 30.
- IHSC raters/supervisors should discuss the officer's performance with the officer at least once during the rating cycle, near the mid-cycle point.
- The Annual COER is a Web-based process accessed from the Commissioned Corps Management Information System (CCMIS) at http://dcp.psc.gov.
- Annual COERS are required of all IHSC Commissioned Corps officers with the following exceptions:
    - Officers called to active duty on or after July 1 of the COER cycle.
    - Officers retiring prior to July 1of the COER cycle.
    - Officers who transfer on or after July 1 of the COER cycle may perform a Transfer COER, which serves as the Annual COER.
- Non-Concurrence with COER. An officer may provide a written rebuttal concerning information entered on the COER, if the officer is in disagreement with the contents of the document. The written rebuttal becomes a part of the officer's eOPF.

B. Transfer COER

A Transfer COER is an optional COER initiated by the officer. The Transfer COER is completed at the time of an officer's transfer to another post to document performance at the previous post. A Transfer COER may also be completed if an officer's Rater transfers, separates, or retires. The Rater/Reviewing Official/Liaison at the previous post must complete the Transfer COER.

A Narrative COER is a type of Transfer COER that can be used when the Rater has supervised the officer for less than six months. In the case of a Narrative COER, the Performance Evaluation (Section 1) and Rater's Comments (Section 2) of the COER are completed, but not Section 3.

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C. Interim COER

An Interim COER is initiated by the officer or the Rater to document performance during the COER cycle when the Annual COER is not yet available or required. An officer may initiate an Interim COER for the purposes of special pays, promotion, or to fill in gaps in his or her evaluation period. Raters may initiate an Interim COER to document performance for the purposes of remedial or disciplinary action.

Note: Officers should refer to the annual Personnel Operations Memorandum and any additional DCCPR instructions, available on the CCMIS website for additional guidance.

C. ROS

ROS

The ROS is a one-page document completed by the Reviewing Official, typically the same as the COER Reviewing Official that allows the agency to provide input to the Promotion Board regarding the officers' readiness for promotion. The Reviewing Official may solicit input from the officer or other sources for his/her use in completing the ROS. Organizations are given discretion to solicit higher level concurrence of the Reviewing Official's assessment. However, the Promotion Board will only review the official 1-page ROS. Once signed, the original ROS is sent to the IPU team for forwarding to the DHS Commissioned Corps Liaison.

Refer to Commissioned Corps Personnel Manual – Permanent Grade Promotions CC23.4.1 and Commissioned Corps Instruction – Temporary Promotions CC23.42 for further guidance.

X. Federal Civil Servant Employee Performance Management Program

Supervisors of GS/GP employees are required to conduct a mid-cycle and annual review. Further guidance can be found at the Office of Human Capital (OHC) Employee Performance Management & Awards intranet page at:
https://insight.ice.dhs.gov/mgt/hc/Pages/epma/index.aspx

IPU will track the completion of the Perforamance Work Plan, mid-cycle, and annual review.

XI. Special Pays

The USPHS officer is responsible for the completion of all paperwork necessary to request specialty pay and/or bonuses. IPU will coordinate the submission of Special Pay/Bonuses paperwork to the DHS Commissioned Corp Liaison for processing.

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A. Accession Bonus

The purpose of Special Pay is to aid DHHS and programs to which USPHS officers are assigned, in recruiting and retaining qualified health professionals. Recruitment of qualified health professionals is critical to the mission of DHHS in meeting the public health needs of the Nation. The following references provide additional guidance:

- Commissioned Corps Personnel Manual – Accession Bonus CC22.2.7 (http://dcp.psc.gov/eccis/documents/CCPM22_2_7.pdf).
- Nurse Accession Bonus - Personnel Policy Memorandum (PPM) 08-010, 19 February 2008 (http://dcp.psc.gov/eccis/documents/ppm08_010.pdf).
- Dental Officer Accession Bonus - PPM 08-008, 29 January 2008 (http://dcp.psc.gov/eccis/documents/ppm08_008.pdf).

B. Specialty Based Pays

- **Medical Special Pay (MSP)** - MSP is an annual bonus payable to eligible medical officers who agree to serve on active duty for at least one year in the USPHS Commissioned Corps. MSP consists of three separate contractual pays: (1) Retention Special Pay (RSP), designed to attract and retain qualified physicians;(2) Multiyear Retention Bonus (MRB), designed to enhance retention of trained specialists; and (3) Incentive Special Pay (ISP), designed to make the compensation levels of qualified specialists competitive with the private sector. Medical officers may be eligible for RSP on a case by case basis. Medical officers who are medical specialists are eligible to apply for MRB and/or ISP. For further guidance reference the following documents:
    - Commissioned Corps Personnel Manual –Retention Special Pay CC22.2.3 (http://dcp.psc.gov/eccis/documents/CCPM22_2_3.pdf).
    - Commissioned Corps Personnel Manual – Multiyear Retention Bonus CC22.2.9 (http://dcp.psc.gov/eccis/documents/CCPM22_2_9.pdf)
    - Commissioned Corps Personnel Manual – Incentive Special Pay CC22.2.10 (http://dcp.psc.gov/eccis/documents/ccpm22_2_10.pdf).
    - Fact Sheet for Completing Medical Special Pay Contract (http://ccmis.usphs.gov/CCMIS/MSP_fact_sheet.aspx).
- **Dental Officer Special Pay (DSP)** - DSP is authorized for dental officers who are called to active duty for a period not less than 1 year and who hold a current valid license. Dental officers must execute a DSP contract to remain on active duty for one year, if only eligible for Additional Special Pay, or two, three, or four years, if eligible for MRB.

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- Commissioned Corps Personnel Manual – Dental Officer Additional Special Pay CC22.2.2 (http://dcp.psc.gov/eccis/documents/CCPM22_2_2.pdf).
- Fact Sheet for Completing Dental Special Pay Contract (http://ccmis.usphs.gov/CCMIS/DSP_fact_sheet.aspx).

- **Nurse Category Special Pays (NAB)** - Commissioned Corps Personnel Manual – Nurse Category Special Pays CC22.2.14 (http://dcp.psc.gov/eccis/documents/CCPM22_2_14.pdf).
- **Health Services Category Special Pays** - Commissioned Corps Personnel Manual – Health Services Category Special Pays CC42.2.111 (http://dcp.psc.gov/eccis/documents/ccpm42_2_11.pdf) – includes Nonphysician Board Certified Pay.
- Health Professions Special Pays – Commissioned Corps Directive – Health Professions Special Pays CCD151.05 (http://dcp.psc.gov/eccis/documents/CC151.05.pdf).
- **Pharmacist Special Pay** – Commissioned Corps Personnel Manual – Pharmacist Special Pays CC22.2.8 (http://dcp.psc.gov/eccis/documents/CCPM22_2_8.pdf).

C. National Health Service Corps

IPU will coordinate and verify program requirements with HSA for entry into the National Service Corps Customer Service Portal.

XII. Awards

Awards are given to recognize and promptly reward employees who have made exemplary contributions to the organization's efficiency and effectiveness. Merit should be the sole basis for granting the award.

IPU will track and coordinate ICE and IHSC Award nominations. Commissioned Corps individual and unit awards will be submitted to the DHS Commissioned Corps Liaison for signature and processing.

Refer to IHSC Awards Program IHSC Directive: 01-34 effective 9 Jul 2014 and ICE Employee Performance Management and Awards program (https://insight.ice.dhs.gov/mgt/hc/Pages/epma/manager.aspx) for further guidance.

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XIII. Professional Conduct

The Chief of IPU will be notified of any and all pending disciplinary actions and investigations for coordination with the AD, CoS and DHS Commissioned Corp Liaison.

A. Standards of Conduct

All employees are expected to abide by Standards of Conduct prescribed by law, to include regulations set forth in Part 45, title 28 Code of Federal Regulations, which prescribe policies, standards and instructions regarding conduct and behavior of employees and former employees of the Government. Among other topics the regulations address:

- Conflicts of Interest.
- Unauthorized private practice of profession outside of employment.
- Misuse of official position and coercion.
- Misuse of federal property.
- Conduct prejudicial to the Government.
- Procurement integrity.

B. Equal Employment Opportunity

- All employees in IHSC will be provided equal opportunity and fair treatment without regard to race, color, religion, gender, or national origin and that IHSC will exemplify an environment free from sexual harassment, prejudice, verbal abuse, discrimination, insensitivity, offensive behavior, and basic thoughtlessness.
- Employees of IHSC will not be assessed, classified, trained, assigned, promoted, or otherwise managed on the basis of race, color, religion, gender, or national origin.
- The supervisory chain is the best means for addressing Equal Opportunity (EO) complaints, for Commissioned Corps Officer or Equal Employment Opportunity (EEO) complaints, for civilian employees. It is preferred that complaints be addressed at the lowest level whenever possible.
- Complaints that employees feel cannot be addressed at the local level are encouraged to submit a complaint to the IHSC Hotline at IHSCHotline@dhs.gov. Civilian employees may also file complaints with the EEO representatives. Complaints may also be submitted to the Joint Intake Center (JIC) or through the mechanisms outlined in the applicable labor agreement.

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- Commissioned Corps Officers detailed to this agency (DHS) may file a complaint (Grievances and EEO actions) in accordance with guidelines established by the MOA between the DHHS and the DHS.

- All personnel and family members are protected from reprisal or retaliation for filing complaints. No Commissioned Corps officer, civilian, or contracted employee may take, or threaten to take, an unfavorable personnel action, or withhold or threaten to withhold a favorable personnel action, in reprisal against any person for filing a complaint. If such a reprisal should occur or be threatened, it must be reported to the supervisory chain, to the individual, the JIC, or to the Inspector General.

- Execution: The principles of EO and EEO are inherent in IHSC's core values of respect, loyalty and integrity. All personnel should ensure that these principles govern their daily behavior. Supervisors must set a positive example in this regard and must take appropriate action whenever allegations of discrimination are brought to their attention. Working together, we all can ensure that equal opportunity is a basic and fundamental part of life at IHSC.

- Questions or comments about the policy or procedures in this memorandum should be addressed to the IHSC Medical Quality Management Branch.

C. Administrative Inquiries Involving Employee Misconduct

All employees are to report allegations of misconduct to the Office of Professional Responsibility's (OPR) or to the Office of the Inspector General. OPR will then contact the Office Director to conduct an administrative inquiry or choose to resolve the issue independently (refer to ICE Distribution policy no: 1-18.0

XIV. Personnel Manuals

The following manuals provide guidance and are the authority for all personnel issues.

- USPHS Commissioned Corps Officers. *e*CCIS is the portal used for policies, procedures and operations updates for USPHS officers.

- Civil Servants. The Office of Personnel Management establishes the guidance for civil service employees. Refer to ICE inSight Employee Self-Service (https://insight.ice.dhs.gov/ess/Pages/index.aspx) for additional guidance.

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MISSION ACTION PLAN		
KPI : 1.2.5 Publish IHSC Recruitment and Marketing Strategy		
Submitted by:		
Submission Date: 4/5/2019	**Target Complete Date: CY2021**	**Last Update:** 4/5/2019

DISCUSSION

1. **Description of the KPI**:
   Publish IHSC Recruitment and Marketing Strategy

2. **The problem that this KPI addresses**:
   - Recruitment and Hiring: IHSC is not getting the Return on Investment (ROI) when selecting candidates for positions; there is a rise in PHS Fit for Duty, counseling and Performance Improvement Plans due to selecting candidates to fill a position that they are not qualified for which results in decreased productivity, cost increases and wasted time (TDYs/ITOS, increased staffing contract costs, position vacant for extended periods of time due to sickness/stress, current employees are burned out due to staffing shortages)
   - Marketing: IHSC does not currently have a published marketing strategy that encompasses initiatives (CCHQ Pilot Program, CoStep Program, Conferences, Social Media, Website, etc.) – KPI 1.2.3/CY 2019 *Establish Recruitment Webpage* will assist with the development of the marketing strategy

3. **When successful, this KPI will…**:
   Recruitment: Provide a roadmap for hiring authorities to follow when filling vacant positions; increase ROI when determining selections. IHSC will increase ROI by selecting top notch candidates and learning forward thinking when selecting candidates vs. selecting a warm body to fill a position.

   Create position descriptions that clearly define the duties, responsibilities and qualifications for a position, developing Best Practices to implement Division wide.

   Marketing: Develop and implement a marketing strategy and mechanism to market IHSC mission, initiatives and career opportunities.

4. **Project Strategy (summary of project execution with detail support provided at Appendix C):** *We must place the right people, into the right position, in the right place, at the right time*

Recruitment and Hiring Gap Analysis to determine:
- Trends and outliers in IHSC recruitment process for civil service and PHS
- Trends and outliers in IHSC hiring process for civil service and PHS
- Effective interviewing techniques for civil service and PHS
- Publish recruitment and hiring refresher toolkit for supervisors

Marketing Analysis to determine:
- Effective ways to market IHSC positions and programs to attract top notch candidates, bolster recruitment/increase staffing numbers and retention

Key Performance Indicator (KPI) Tasks: These are a quantifiable measures used to evaluate the success in meeting objectives for performance.

- **1.2.5.1 Enhance the IHSC Recruitment process; decrease IPU Recruitment Managers workload by 25%**

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- 1.2.5.1a: Coordinate with ICE HR to leverage the Management Program Analyst and Mission Support Specialist/Direct Hire appointment authority mass recruitment to fill IHSC civil service positions as applicable
- 1.2.5.1b: Advertise critical PHS vacancies "Open Until Filled" aligned with civil service Direct Hire authority; ability to fill critical vacancies quickly; will save the hiring manager time to go through the process
- 1.2.5.1c: Utilize USA Staffing database to house recruitment actions in one central location; promote awareness to interest externally, streamline recruitment processing by automatically reposting positions; automatically closing out positions; candidate applications are uploaded by ICE HR.
- 1.2.5.1d: Develop position descriptions that clearly define the duties, responsibilities and qualifications for a position

- **1.2.5.2 Develop effective interviewing resources**
  - 1.2.5.2a: Create a supervisory Interview questionnaire form to ensure the top candidates are considered and selected
  - 1.2.5.2.b: Create a non-supervisory Interview questionnaire form to ensure the top candidates are considered and selected
  - 1.2.5.2.c: Develop PHS application prescreening critieria that is aligned with civil service criteria
  - 1.2.5.2.d: Develop Panel interview criteria
- **1.2.5.3 Publish recruitment and hiring refresher toolkit for supervisors**
  - 1.2.5.3a: Develop hiring process training for IHSC hiring authorities
  - 1.2.5.3b: Execute recruitment and hiring process map and plan
- **1.2.5.4 Develop effective ways to market IHSC positions and programs to attract top notch candidates, bolster recruitment/increase staffing numbers and retention**
  - 1.2.5.4a: Develop a marketing strategy and mechanism to market IHSC mission, initiatives and career opportunities; market opportunities via USA Jobs, PHS PACs and Max.Gov
  - 1.2.5.4b: Utilize IHSC Internet Website to market career opportunities and initiatives (*ref. KPI 1.2.3 Establish Recruitment Webpage*): Sr. CoStep, CCHQ Pilot Program, Academic Affiliation, career opportunities

KPI TASKS	
KPI: 1.2.5	**Last Update: 3/28/18**

KPI: 1.2.5 Publish IHSC Recruitment and Marketing Strategy	Weight
MAP Completed	**Yes**
1.2.5.1 Enhance the IHSC Recruitment process; decrease IPU Recruitment Managers workload by 25%	**30%**
○ 1.2.5.1a: Coordinate with ICE HR to leverage the Management Program Analyst and Mission Support Specialist/Direct Hire appointment authority mass recruitment to fill IHSC civil service positions as applicable	5%
○ 1.2.5.1b: Advertise critical PHS vacancies "Open Until Filled" aligned with civil service Direct Hire authority; ability to fill critical vacancies quickly; will save the hiring manager time to go through the selection process	5%
○ 1.2.5.1c: Utilize USA Staffing database to house recruitment actions in one central location; promote awareness to interest externally, streamline recruitment processing by automatically reposting positions; automatically closing out positions; candidate applications are uploaded by ICE HR.	10%
○ 1.2.5.1d: Develop position descriptions that clearly define the duties,	10%

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responsibilities and qualifications for a position	
1.2.5.2 Develop effective interviewing resources	**30%**
○ 1.2.5.2a: Create a supervisory Interview questionnaire form to ensure the top candidates are considered and selected	10%
○ 1.2.5.2.b: Create a non-supervisry Interview questionnaire form to ensure the top candidates are considered and selected	10%
○ 1.2.5.2.c: Develop PHS application prescreening critieria that is aligned with civil service criteria	5%
○ 1.2.5.2.d: Develop Panel interview criteria	5%
1.2.5.3 Publish recruitment and hiring refresher toolkit for supervisors	**10%**
○ 1.2.5.3a: Develop hiring process training for IHSC hiring authorities	5%
○ 1.2.5.3b: Execute recruitment and hiring process map and plan	5%
1.2.5.4 Develop effective ways to market IHSC positions and programs to attract top notch candidates, bolster recruitment/increase staffing numbers and retention	**30%**
○ 1.2.5.4a: Develop a marketing strategy and mechanism to market IHSC mission, initiatives and career opportunities; market opportunities via USA Jobs, PHS PACs and Max.Gov	15%
○ 1.2.5.4b: Utilize IHSC Internet Website to market career opportunities and initiatives (*ref. KPI 1.2.3 Establish Recruitment Webpage*): Sr. CoStep, CCHQ Pilot Program, Academic Affiliation, career opportunities	15%
	100% (1.0)

STAKEHOLDER AND WORKGROUP INFORMATION	
KPI: 1.2.5	**Last Update:** 4/5/2019

1. Stakeholder Register

Stakeholder	Internal/ External	Interest (support, neutral, influence, executor)
AD	Internal	Support and Influence
DADs	Internal	Support and Influence
ICE HR	Internal	Executor
Discipline Chiefs	Internal	Influence, Support

2. Integrated Process Team

MEMBER	TITLE/OFFICE	ROLE
IPU (CDR C-R, LCDR Jenkins, LT Tsige)	IPU	Recruitment Strategy
CAPT Presley, Shurina, Miranda, Dr. Rivera	DADs	Influence
Tasha Valentine	ICE HR	HR Consultant
Freddy Padgett	ICE HR	Position

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		Descriptions/Classification
Michelle Daily	ICE HR	Human Capital
Simone Nelson	OHA Human Capital	Title 38 compensation

EXECUTION	
KPI: 1.2.5	**Update:** 4/5/2019

1. Risk Register:

Event	Impact on Project (L,M,H)	Response/Status
Reruitment Training	High	Hiring Authorities not attending training or following the process

2. Resource Implications (identify fiscal concerns: real and personal property, IT, supplies, personnel, contract, travel):

3. Communication Strategy (identify methods for communicating information: mode, frequency, audience, by whom):
    a. Communicate with ICE HR and OHA monthly to discuss recruitment strategies
    b. Monthly personnel meeting with Sr. Leadership

4. Training (identify training requirements and methods to develop and deploy):
    a. ICE HR train IPU on USA Staffing Database via conference call and email
    b. IPU train hiring authorities on recruitment and hiring process

5. Operational Integration: (describe how solution will be deployed and integrated into standard practice and routine operations):
    a. Upload hiring refresher toolkit to IPU SharePoint page
6. Operations and Maintenance (identify transition to operations and maintenance (O&M) and sustainment requirements):
    a. Sustainment of training and update of hiring refresher toolkit as needed

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KPI REVIEW	
KPI: Publish IHSC Recruitment and Marketing Strategy	**Update:** 4/5/2019

(***Refer to IHSC SharePoint site for template***)

KPI Task Accomplishments

Quarterly Tasks (January-February 2019):

- 1.2.5.1a: Coordinate with ICE HR to leverage the Management Program Analyst and Mission Support Specialist/Direct Hire appointment authority mass recruitment to fill IHSC civil service positions as applicable
- 1.2.5.1b: Advertise critical PHS vacancies "Open Until Filled" aligned with civil service Direct Hire authority; ability to fill critical vacancies quickly; will save the hiring manager time to go through the selection process
- 1.2.5.1d: Develop position descriptions that clearly define the duties, responsibilities and qualifications for a position
- 1.2.5.2a: Create a supervisory Interview questionnaire form to ensure the top candidates are considered and selected
- 1.2.5.2.b: Create a non-supervisry Interview questionnaire form to ensure the top candidates are considered and selected

Quarterly Task Accomplishments:

- 2019 Q1 subtasks completed in CY2018 Q2
  - 1.2.5.1a: Coordinated with ICE HR to leverage the Management Program Analyst and Mission Support Specialist/Direct Hire appointment authority mass recruitment to fill IHSC civil service positions as applicable (advertised and selected candidate for RMU)
  - 1.2.5.1b: Advertised critical PHS vacancies "Open Until Filled" aligned with civil service Direct Hire authority; ability to fill critical vacancies quickly; will save the hiring manager time to go through the selection process (nursing, medical officer and APP are Open Until Filled)
  - 1.2.5.1d: Developed position descriptions that clearly define the duties, responsibilities and qualifications for a position (peformed PHS PD scrub; revised and or developed: CD, IPU-PM, Public Health Analyst, MAST, ID APP, Program Analyst, HSA, AHSA, BHU, RN)
- 2019 Q2 subtasks completed in CY2018 Q2
  - 1.2.5.2a: Created a supervisory Interview questionnaire form to ensure the top candidates are considered and selected (created, piloted and forwarded to ICE Forms for review and Branding)
  - 1.2.5.2.b: Created a non-supervisry Interview questionnaire form to ensure the top candidates are considered and selected (created, piloted and forwarded to ICE Forms for review and Branding)

Roadblocks to Scheduled Task Accomplishments:

- None

Mitigation Plan for Roadblocks:

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- N/A

Quarterly Task Accomplishments:

- 2019 Q1 subtasks completed in CY2018 Q2
  - 1.2.5.1a: Coordinated with ICE HR to leverage the Management Program Analyst and Mission Support Specialist/Direct Hire appointment authority mass recruitment to fill IHSC civil service positions as applicable (advertised and selected candidate for RMU)
  - 1.2.5.1b: Advertised critical PHS vacancies "Open Until Filled" aligned with civil service Direct Hire authority; ability to fill critical vacancies quickly; will save the hiring manager time to go through the selection process (nursing, medical officer and APP are Open Until Filled)
  - 1.2.5.1d: Developed position descriptions that clearly define the duties, responsibilities and qualifications for a position (peformed PHS PD scrub; revised and or developed: CD, IPU-PM, Public Health Analyst, MAST, ID APP, Program Analyst, HSA, AHSA, BHU, RN)

Roadblocks to Scheduled Task Accomplishments:

- 1.2.5.1c: Utilize USA Staffing database to house recruitment actions in one central location; promote awareness to interest externally, streamline recruitment processing by automatically reposting positions; automatically closing out positions; candidate applications are uploaded by ICE HR.

Mitigation Plan for Roadblocks:

- Requires collaboration with ICE HR. Working towards completion and proper permissinos for all IHSC GS positions.

Scoring the KPI

Formula: Weight x Criteria = Score *(**Note: refer to page 24 for example**)*

KPI: 1.2.5	**Weight**	**Criteria** (On target (OT)/Mitigation Plan(MP)/ Below Target (BT) 1 = OT/ 0.5 = MP/0 = BT	**Score**
Complete MAP		**N/A**	**Yes**
1.2.5.1 Enhance the IHSC Recruitment process; decrease IPU Recruitment Managers workload by 25%	**30%**		
○ 1.2.5.1a: Coordinate with ICE HR to leverage the Management Program Analyst and Mission Support Specialist/Direct Hire appointment authority mass recruitment to fill IHSC civil service positions as applicable	5%	1	.05
○ 1.2.5.1b: Advertise critical PHS vacancies "Open Until Filled" aligned with civil service Direct Hire authority; ability to fill critical	5%	1	.05

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vacancies quickly; will save the hiring manager time to go through the selection process			
○ 1.2.5.1c: Utilize USA Staffing database to house recruitment actions in one central location; promote awareness to interest externally, streamline recruitment processing by automatically reposting positions; automatically closing out positions; candidate applications are uploaded by ICE HR.	10%	0.5	.05
○ 1.2.5.1d: Develop position descriptions that clearly define the duties, responsibilities and qualifications for a position	10%	1	.10
1.2.5.2 Develop effective interviewing resources	**30%**		
○ 1.2.5.2a: Create a supervisory Interview questionnaire form to ensure the top candidates are considered and selected	10%	1	.10
○ 1.2.5.2.b: Create a non-supervisry Interview questionnaire form to ensure the top candidates are considered and selected	10%	1	.10
○ 1.2.5.2.c: Develop PHS application prescreening critieria that is aligned with civil service criteria	5%		
○ 1.2.5.2.d: Develop Panel interview criteria	5%		
1.2.5.3 Publish recruitment and hiring refresher toolkit for supervisors	**10%**		
○ 1.2.5.3a: Develop hiring process training for IHSC hiring authorities	5%		
○ 1.2.5.3b: Execute recruitment and hiring process map and plan	5%		
1.2.5.4 Develop effective ways to market IHSC positions and programs to attract top notch candidates, bolster recruitment/increase staffing numbers and retention	**30%**		
○ 1.2.5.4a: Develop a marketing strategy and mechanism to market IHSC mission, initiatives and career opportunities; market opportunities via USA Jobs, PHS PACs and Max.Gov	15%		
○ 1.2.5.4b: Utilize IHSC Internet Website to market career opportunities and initiatives (ref. KPI 1.2.3 Establish Recruitment Webpage): Sr. CoStep, CCHQ Pilot Program, Academic Affiliation, career opportunities	15%		
KPI score potential this quarter (Month)	**.00**	**Total Score ->**	
	100% (1.0)	**Sum of Scores**	

Note: Sub Task score accumulation should equal to the related task

Way Ahead

Projected Next Quarter (Month-Month) KPI Milestones:

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- 1.2.5.2.c: Develop PHS application prescreening critieria that is aligned with civil service criteria
- 1.2.5.2.d: Develop Panel interview criteria

Risks:

MISSION ACTION PLAN

KPI : 1.2.5

Milestones Roadmap. This roadmap maps out the date to have an action or event, marking a significant change or stage in the development and accomplishment of the KPI. It is meant to be detailed. *Note: Below provides a sample.* ***An Excel template can be accessed on SharePoint.***

Goal Title		CY19				CY20				CY21			
		Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
MAP Completed													
Start of Action		X											
1.2.5.1 Enhance the IHSC Recruitment process; decrease IPU Recruitment Managers workload by 25%													
○ 1.2.5.1a: Coordinate with ICE HR to leverage the Management Program Analyst and Mission Support Specialist/Direct Hire appointment authority mass recruitment to fill IHSC civil service positions as applicable		X											
○ 1.2.5.1b: Advertise critical PHS vacancies "Open Until Filled" aligned with civil service Direct Hire authority; ability to fill critical vacancies quickly; will save the hiring manager time to go through the selection process		X											
○ 1.2.5.1c: Utilize USA Staffing database to house recruitment actions in one central location; promote awareness to interest externally, streamline recruitment processing by automatically reposting positions; automatically closing out positions; candidate applications are uploaded by ICE HR.		X											
○ 1.2.5.1d: Develop position descriptions that clearly define the duties, responsibilities and qualifications for a position		X											
1.2.5.2 Develop effective interviewing													

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resources															
○ 1.2.5.2a: Create a supervisory Interview questionnaire form to ensure the top candidates are considered and selected			X												
○ 1.2.5.2.b: Create a non-supervisry Interview questionnaire form to ensure the top candidates are considered and selected			X												
○ 1.2.5.2.c: Develop PHS application prescreening critieria that is aligned with civil service criteria					X										
○ 1.2.5.2.d: Develop Panel interview criteria					X										
1.2.5.3 Publish recruitment and hiring refresher toolkit for supervisors															
○ 1.2.5.3a: Develop hiring process training for IHSC hiring authorities						X									
○ 1.2.5.3b: Execute recruitment and hiring process map and plan							X								
1.2.5.4 Develop effective ways to market IHSC positions and programs to attract top notch candidates, bolster recruitment/increase staffing numbers and retention															
○ 1.2.5.4a: Develop a marketing strategy and mechanism to market IHSC mission, initiatives and career opportunities; market opportunities via USA Jobs, PHS PACs and Max.Gov							X								
○ 1.2.5.4b: Utilize IHSC Internet Website to market career opportunities and initiatives (ref. KPI 1.2.3 Establish Recruitment Webpage): Sr. CoStep, CCHQ Pilot Program, Academic Affiliation, career opportunities									X						
Completion of Goal										X					
Deliverable Closeout															

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Juvenile and Family Residential Management Unit Field Office Juvenile Coordinator Handbook Enforcement and Removal Operations

APRIL 2018

U.S. Immigration and Customs Enforcement

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DHS-19-0195-B, 19-0494-B, 19-0495-B-000119

2019-ICLI-00054 579

How to Use This Handbook

This handbook is designed to help you quickly locate information you need to perform your FOJC duties. Please take a few moments to review the following guidance on how to navigate this interactive Field Office Juvenile Coordinator Handbook.

- Words that are blue and underlined link to an external website, or e-mail within this handbook. So, you must have an Internet connection to access these links.
- **Bold underlined black** words within the text link within the document.
- Scroll or hover over words that are orange to see what an acronym stands for, or to learn the name of an important form.

All of this means the handbook is more useful in digital form. The Table of Contents, Glossary, and Resources pages are also interactive, designed to help you track down specific information with the click of a button if you are using the digital version.

TOC Glossary Acronyms

WELCOME



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FOREWORD



U.S. Immigration and Customs Enforcement

This handbook was developed by the Juvenile and Family Residential Management Unit (JFRMU), Enforcement and Removal Operations (ERO) as an operational guide for Field Office Juvenile Coordinators (FOJC).

This handbook guides ERO staff in processing, transporting, managing, and removing minors encountered by the Department of Homeland Security (DHS). It is based on current U.S. Immigration and Customs Enforcement (ICE) policies and procedures and will assist ERO employees in adhering to legislative mandates when encountering minors and unaccompanied alien child/children (UAC).

This handbook refers to current policies, field guidance, and best practices. As there may be amendments or updates to current policies or memorandums, always refer to the most current document. Each field office may have geographic or operational variances that require alterations to certain best practices; ensure all such adjustments comply with the *Flores* Settlement Agreement and the William Wilberforce Trafficking Victims Protection Reauthorization Act of 2008 (TVPRA), and receive concurrence from your respective chain of command.

Finally, this handbook is an internal product of ICE. This document provides only internal ICE policy guidance, which may be modified, rescinded, or superseded at any time without notice. It is not intended to, does not, and may not be relied upon to create or diminish any rights, substantive or procedural, enforceable at law or equity by any party in any criminal, civil, or administrative matter. Likewise, no limitations are placed by this guidance on the otherwise lawful enforcement or litigative prerogatives of ICE.

Matthew T. Albence
Executive Associate Director

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U.S. Immigration and Customs Enforcement

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GLOSSARY



Accompanied Alien Child: A non-citizen, juvenile who is encountered and who does not fall into the category of Unaccompanied Child or Family Unit.

Adult: Any person 18 years of age or older.

Alien: Any person who is not a United States citizen or national.

Contraband: Any item that aliens are not authorized to have in his or her possession while in the custody of ICE.

Detainee: Any alien booked into an ICE detention facility.

Escort: An officer who accompanies any person who has been arrested and/or detained under the authorities of ERO during transport or movement.

Exigent Circumstances: A situation requiring unusual or immediate action or aid and that may require ERO officers to circumvent usual procedures (e.g., to prevent imminent danger to life or safety of an officer, the alien or other detainee, or the public; serious damage to property; to forestall the imminent escape of a person in custody; or destruction of evidence).

Family Unit: An adult alien parent or legal guardian accompanied by their own juvenile alien child(ren).

Flight Risk: An alien who the officer believes may attempt to flee from ICE custody after arrest or in any form of detention, if he or she is not otherwise prevented from doing so.

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GLOSSARY

Full Restraints: ICE-approved handcuffs, waist/belly chain, and leg irons.

Immigration Officer: An employee of the Department of Homeland Security designated as immigration officers authorized to exercise the powers and duties of such officers as specified by Act (e.g., Border Patrol agent, Deportation Officer, special agent, CBP Officer).[1]

Juvenile: Any person who has not reached 18 years of age.

Pat-down Search: When an officer inspects an alien using his or her hands. The inspector uses his or her sense of touch when patting or running the hands over the clothed alien's body. It is considered the least intrusive of the body searches and should only be conducted by a staff member of the same gender. A pat-down does not require the alien to remove clothing, although the inspection includes a search of the alien's clothing and personal effects.

Search: An inspection of the alien's person and property for contraband in order to maintain good order and security.

Tender Age: Any juvenile alien under 10 years of age.

Transport: Using a vehicle to move any person arrested or detained.

Unaccompanied Alien Child: A minor who has no lawful immigration status in the United States, has not attained 18 years of age, and has no parent or legal guardian in the United States (or no parent or legal guardian in the United States who is available to provide care and physical custody).[2]

Weapon: Any object, item, or device that may be used to cause physical injury, incapacitate, or diminish a person's capability, either temporarily or permanently.

NOTE

For the purpose of this document, "minors" refers to all individuals under the age of 18, to include both unaccompanied alien children (UAC) and minors accompanied by their parent and/or legal guardian. Minors, children, and juveniles are used synonymously. "UAC" is referenced wherever processing requirements are specific to them.

[1] 8 CFR § 1.2

[2] § 462(g) of the Homeland Security Act of 2002 (6 U.S.C §279(g)(2)

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ACRONYMS



AOR	Area of Responsibility
ATD	Alternatives to Detention
BP	U.S. Border Patrol
CBP	Customs and Border Protection
COR	Contracting Officer Representative
CPS	Child Protective Services
DACA	Deferred Action for Childhood Arrivals
DCO	Docket Control Office
DHS	Department of Homeland Security
EABM	Enforce Alien Booking Module
EADM	Enforce Alien Detention Module
EARM	Enforce Alien Removal Module
EOIR	Executive Office for Immigration Review
ERO	Enforcement and Removal Operations
FFS	Federal Field Specialist
FOD	Field Office Director
FOIC	Flight Officer in Charge
FOJC	Field Office Juvenile Coordinator
HHS	Department of Health and Human Services
HSI	ICE Homeland Security Investigations
I-213	Record of Removability
I-770	Notice of Rights
I-830	Change of Address
I-862 or NTA	Notice to Appear
IAO	ICE Air Operations
ICE	Immigration and Customs Enforcement

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ACRONYMS

IHSC	ICE Health Services Corps
IJ	Immigration Judge
INA	Immigration and Nationality Act
JFRMU	Juvenile and Family Residential Management Unit
LEA	Law Enforcement Agency
LEO	Law Enforcement Officer
LPR	Lawful Permanent Resident
NCIC	National Crime Information Center
NGO	Non-Governmental Organization
NTA	Notice to Appear
OFO	Office of Field Operations
OPLA	Office of the Principal Legal Advisor
OREC	Order of Recognizance
ORR	Office of Refugee Resettlement
OTM	Other than Mexican
PEP	Priority Enforcement Program
POE	Port of Entry
PREA	Prison Rape Elimination Act of 2003
SAAPI	Sexual Abuse and Assault Prevention and Intervention
SDDO	Supervisory Detention and Deportation Officer
SIJS	Special Immigrant Juvenile Status
SIR	Serious Incident Report
TD	Travel Document
TECS	Treasury Enforcement Communications System
TVPRA	William Wilberforce Trafficking Victims Protection Reauthorization Act of 2008
UAC	Unaccompanied Alien Child/Children
USCIS	U.S. Citizenship and Immigration Services
VAS	Victim Assistant Specialist
VAWA	Violence Against Women Act Reauthorization of 2013

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RESOURCES



JFRMU

JFRMU E-mail: JFRMU@ice.dhs.gov

UAC Portal

If UAC Portal is unavailable, the UAC Initial Placement Referral Form is located here on the JFRMU intranet: https://insight.ice.dhs.gov/ero/custody/Pages/jfrmu.aspx

ORR

ORR Intakes: orrducs_intakes@acf.hhs.gov (send with read receipt)
Phone: (202) 401-5709
Fax: (202) 401-1022
Placement hours: 9:00 a.m. – 9:00 p.m. EST. After hours placement in emergency or tender age situations.

Legal Authorities

1. 8 C.F.R. § 208.6 and §1208.6.
2. 8 C.F.R. § 236.3(h)
3. 8 CFR § 1.2
4. 8 U.S.C. § 1232(a)(2)(A)
5. Flores Stipulated Settlement Agreement (January 17, 1997)
6. Flores v. Lynch – July 2016 appellate court opinion
7. Homeland Security Act of 2002
8. Immigration and Nationality Act

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RESOURCES

Legal Authorities (continued)

9. *Perez-Funez v. District Director,* 611 F. Supp. 990 (C.D. Cal. 1984) (preliminary injunction ordered), 619 F. Supp. 656 (C.D. Cal. 1985) (permanent injunction ordered)
10. Prison Rape Elimination Act of 2003
11. DHS Standards to Prevent, Detect, and Respond to Sexual Abuse and Assault in Confinement
12. William Wilberforce Trafficking Victims Protection Reauthorization Act of 2008 (TVPRA)
13. Violence Against Women Act Reauthorization of 2013 (VAWA)

ERO Broadcasts, Field Guidance, Policies, Manuals/Handbooks

1. Broadcast: Interim Guidance Regarding the Use of Restraints while Transferring Minors on ICE Air Flights.
2. Broadcast: Screening of Unaccompanied Alien Children (UAC) Apprehended by ICE for Human Trafficking Indicators, Department of Homeland Security, Immigration and Customs Enforcement, Office of Enforcement and Removal Operations, February 4, 2016.
3. Broadcast: Tracking ORR Runaway Cases, Department of Homeland Security, Immigration and Customs Enforcement.
4. Broadcast: UAC Shelter Book Out Procedures, Department of Homeland Security, Immigration and Customs Enforcement, Office of Enforcement and Removal Operations, March 21, 2015.
5. Broadcast: Unaccompanied Alien Children (UAC) Book-ins, Department of Homeland Security, Immigration and Customs Enforcement, Office of Enforcement and Removal Operations, July 23, 2015.
6. ERO Broadcast: "Service of the Notice to Appear (NTA) on Unaccompanied Alien Children (UAC)," August 22, 2016
7. ERO Deferred Action for Childhood Arrivals Checklist" for guidance arresting/removing individuals under the age of 31 as of June 15, 2012
8. Field Guidance for the William Wilberforce Trafficking Victims Protection Reauthorization Act of 2008 (TVPRA) & Violence Against Women Reauthorization Act of 2013 (VAWA), § E, Department of Homeland Security, Immigration and Customs Enforcement, Office of Enforcement and Removal Operations, January 13, 2016.
9. Age Determination Procedures for Custody Determination, Policy Number ERO 113014, Department of Homeland Security, Immigration and Customs Enforcement, Office of Enforcement and Removal Operations, December 11, 2015.

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ERO Broadcasts, Field Guidance, Policies, Manuals/Handbooks (continued)

10. ICE Policy Directive No. 11062.1: Sexual Abuse and Assault Prevention and Intervention (SAAPI) (May 11, 2012).
11. ICE Policy Directive No. 11087.1: "Operations of ERO Holding Facilities" (September 22, 2014)
12. ICE Policy No. 10074.2: "Issuance of Immigration Detainers by ICE Immigration Officers"
13. James M. Chaparro, Sharing Information with the Department of Health and Human Services Office of Refugee Resettlement, Department of Homeland Security, Immigration and Customs Enforcement, Office of Enforcement and Removal Operations, November 30, 2010
14. Memorandum issued February 20, 2017 by DHS Secretary Kelly entitled "Enforcement of the Immigration Laws to Serve the National Interest"
15. Repatriation and Custody Transfer of UAC in ICE Custody to Foreign Government Officials, Policy 11049.1, Department of Homeland Security, Immigration and Customs Enforcement, Office of Enforcement and Removal Operations, April 17, 2008
16. UAC A-file process: https://insight.ice.dhs.gov/ero/custody/Documents/jfrmu/pdf/JFRMU%20UAC%20A-file%20process%208-18-2015.pdf
17. Use of Restraints, Policy ERO 11155.1, Department of Homeland Security, Immigration and Customs Enforcement, November 19, 2012.
18. John P. Torres: "Update to the Detention and Deportation Officers Field Manual: Appendix 16-4, Part 2; Enforcement Standard Pertaining to the Escorting of Aliens", January 31, 2008



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ERO Broadcasts, Field Guidance, Policies, Manuals/Handbooks (continued)

19. Update to the Detention and Deportation Officers Field Manual: Appendix 16-4, Part 2; Enforcement Standard Pertaining to the Escorting of Aliens, Department of Homeland Security, Immigration and Customs Enforcement, January 31, 2008.
20. Enforcement and Removal Operations: Fugitive Operations Handbook, July 23, 2014.

Executive Orders

1. Executive Order 13767, "Border Security and Immigration Enforcement Improvements" (January 25, 2017)
2. Executive Order 13768, "Enhancing Public Safety in the Interior of the United States" (January 25, 2017)

Other

1. Enforce Alien Detention Module (EADM)
2. Verify validity of an address: https://tools.usps.com/go/ZipLookupAction!input.action?mode=0&refresh=true.

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SECTION 1



1. Introduction to JFRMU

The Juvenile and Family Residential Management Unit (JFRMU) is a dedicated, high-level operational unit created to manage issues related to detaining alien minors and families by Immigration and Customs Enforcement (ICE). Within Enforcement and Removal Operations (ERO), JFRMU manages the needs of Unaccompanied Alien Children (UAC) and family groups who enter ERO custody. JFRMU supports ERO's mission: to enforce the nation's immigration laws in a fair and effective manner. JFRMU helps to identify removable aliens, detains these individuals when necessary, and removes illegal aliens from the United States. JFRMU works primarily with recent border entrants and individuals seeking asylum, and ensures that these individuals receive due process and just treatment as they move through immigration proceedings.

In addition to supporting ERO's mission, JFRMU focuses on creating policy and issuing field training regarding best practices and appropriate interactions with all children and families according to their developmental needs. Additionally, JFRMU is the business owner of the Family Residential Standards, and oversees an independent compliance program that inspects family residential centers. JFRMU established and now oversees transportation of UAC and family units, and is responsible for nearly all UAC transports nationwide. JFRMU implemented a language services program providing indigenous language

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interpretation for residents in family residential centers, to improve meaningful access to services within the facilities.

ERO complies with the Department of Homeland Security (DHS) regulations implementing the Prison Rape Elimination Act, "Standards To Prevent, Detect, and Respond to Sexual Abuse and Assault in Confinement Facilities," 6 CFR Part 115 et seq. (DHS PREA), as well as ICE Directive No. 11062.2, "Sexual Assault and Abuse Prevention and Intervention" (May 22, 2014). JFRMU team members monitor facility compliance with these rules and regulations. Team members coordinate with investigative bodies and work with ERO field offices to implement new operational protocols in response to investigative and/or compliance related findings.

Externally, JFRMU coordinates with DHS's Customs and Border Protection (CBP), the Department of Health and Human Services' (HHS) Office of Refugee Resettlement (ORR), and non-governmental organizations (NGOs). Internally, JFRMU trains, monitors, and advises Field Office Juvenile Coordinators (FOJCs), who serve as their field offices' subject-matter experts on juvenile and family matters. JFRMU coordinates trainings and issues guidance on appropriate case management for children and families in ICE custody, and FOJCs in turn advise their ICE colleagues and others who support JFRMU in fulfilling ICE's mission.

JFRMU's experienced and diverse staff embodies the spirit of this mission. Our National Juvenile Coordinators provide guidance and technical assistance to ERO field officers located throughout the United States. The National Family Coordinator and Compliance Officers provide ongoing and independent review of facility operations and compliance with the FRS. JFRMU's administrative staff oversees contracts, drafts and issues policy, and manages internal and external communications. Highly trained and specialized contract staff support various initiatives.

1.1 Processing Minors

FOJCs are responsible for identifying, processing, transporting UAC, and managing UAC caseloads, and must take into account the unique needs and differences minors have from traditional adult populations.

Because of minors' unique needs and developmental differences, processing and issuing minors' charging documents takes priority over all other immigration processing, with very young children receiving the highest priority.[3] Placing tender-age UAC into appropriate housing, in cooperation with ORR, is the highest priority.

[3] ERO Broadcast: "Service of the Notice to Appear (NTA) on Unaccompanied Alien Children (UAC)," August 22, 2016

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1.2 Interaction with Minors

Minors think, act, and react differently from adults. Developmentally speaking, minors do not have the same comprehension levels as adults, and comprehension levels vary greatly from very young children to teenagers. ERO officers and contractors are required to consider language, culture, and possible prior traumatic experiences during encounters with minors. In addition, like adults, many minors may have been preconditioned to respond to police and other government authority figures with distrust and/or fear.

When speaking to a UAC, use plain language expressed in an age-appropriate tone. The FOJC may be the first plain-clothes officer that a UAC interacts with; it's recommended that the officer take the opportunity to build rapport with the UAC and help the child feel safe while in ERO custody.

1.3 UAC Operational Process

Several DHS components retain responsibilities for apprehending and managing UAC, Family Unit (FAMU), and other accompanied minors. CBP, including its U.S. Border Patrol (BP) and Office of Field Operations (OFO), and ICE's ERO apprehend, detain, process, transport, and repatriate these groups. ICE's Homeland Security Investigations (HSI) also apprehends these groups; however, ERO retains immigration-related responsibilities such as case management for all individuals placed in immigration proceedings.

Upon a UAC's arrival to a DHS processing area, the apprehending DHS officer takes fingerprints of UAC 14 years and older and initiates a search in the IDENT system to determine any prior apprehensions and to verify identity. The officer also initiates a criminal record check to verify if the UAC had any previous criminal history.

1.3.1 Screening

The TVPRA requires all UAC who are apprehended at a land border or Port of Entry (POE) from a country contiguous with the United States, to undergo a screening process (within 48 hours) prior to repatriation if they express a wish to withdraw their request for admission.[4] As a matter of policy, CBP also screens all UAC that they encounter in order to identify any indicators of human trafficking or fear of return to their home country. CBP will refer potential human trafficking cases to HSI for further investigation.

ERO officers screen any newly encountered UAC in the interior for indicators of human trafficking. If the UAC indicates potential victimization within the United States during screening or at any time, the Human Smuggling and Trafficking Center, the local HSI office, and ORR must be notified.

[4] (8 U.S.C. § 1232(a)(2)(A))

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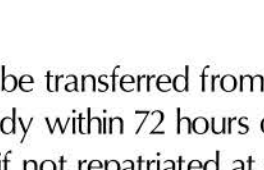
Under the TVPRA, Mexican and Canadian UAC may be permitted to withdraw their application for admission if they meet the following criteria: is able to make an independent decision to withdraw the application for admission to the United States, does not have a fear of returning to his or her country of origin, and has not been a victim of trafficking and there is no credible evidence the child is at risk of being trafficked if returned to the country of origin. All UAC whom DHS seeks to remove from the United States should be placed in removal proceedings under § 240 of the Immigration and Nationality Act (INA). The TVPRA prohibits ERO from granting Voluntary Return, effecting Expedited Removal, or reinstating the prior removal order of any UAC.

1.3.2 UAC Processing Timelines

Processing requirements differ for UAC. By law, all UAC must be transferred from DHS custody, except in the case of exceptional circumstances, to ORR custody within 72 hours of their identification as an unaccompanied minor. Upon apprehension—and if not repatriated at the border—once processed, all UAC placed in immigration proceedings are transferred to ORR.

Once ORR designates placement of UAC, in accordance with local agreements, CBP or ERO transport UAC to ORR custody. CBP conducts most local transport in South Texas, and ERO conducts long-distance transports (per local agreements). ORR houses UAC in children's shelters, staff-secure, and secure facilities. ORR also maintains bed space in residential treatment facilities for children with special needs. ORR places young children or UAC who are accompanied by their own children in foster care or facilities with permits to house young children and infants.

The UAC will remain in ORR custody until released to a sponsor or transferred to foster care. ERO initiates § 240 proceedings, maintains general UAC case management, resolves any issues with the A-File and Notice to Appear (NTA) to ensure proper service, and works with the Office of



Requirements for screening UAC are covered in greater detail in Section 3 of the handbook.

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Chief Counsel (OCC) to file the NTA with the Executive Office for Immigration Review (EOIR). UAC may apply for various immigration benefits through U.S. Citizenship and Immigration Services (USCIS), including asylum, visas designed to assist victims of crime, abuse and neglect, domestic violence, and human trafficking.

Although CBP may repatriate some Mexican and Canadian UAC at the border, ERO retains responsibility for repatriating UAC ordered removed by an Immigration Judge (IJ). ERO no longer offers, as a matter of law, voluntary return or voluntary departure to any UAC apprehended in the United States from non-contiguous countries. ERO may, under limited circumstances, allow a UAC from a contiguous country who is apprehended at a land border or POE to withdraw his or her application for admission, if the UAC is properly screened and if return occurs within 48 hours of apprehension. In these situations, ERO should contact CBP for assistance in processing and repatriation.

1.3.3 ERO Responsibilities

Because of their unique needs, minors in ICE custody must be given special consideration as to their safety, security, immediate physical and mental health needs, and well-being. All minors and family units are to receive priority for processing and transportation above all other aliens in ICE custody. Additionally, ERO will process and transport verified family units including adult parent(s) and/or legal guardian(s) with their own minors together and with special consideration. This includes minors who may be accompanied by their own child(ren).

1.4 Roles and Responsibilities of a FOJC

FOJCs play an integral role in apprehending and processing UAC. FOJCs serve as the local subject-matter experts who provide policy guidance within their respective areas of responsibility. FOJCs are on call 24/7, as call-outs may be necessary to assist with the processing and placement of UAC. FOJCs are also responsible for facilitating arrangements between the arresting agencies, CBP or ICE, and the placement agency, ORR.[5]

When a UAC is encountered and transported to a hold room, the FOJC is responsible for ensuring that staff separate minors from unrelated adults. The FOJC must also account for the minor's age, gender, and criminality when processing and placing the UAC. Per the

[5] Per the Homeland Security Act of 2002, HHS was given sole authority to make decisions on placement, transfer, and release of any UAC. The FOJC can recommend a placement location; however, ORR will ultimately make the determination on where a UAC will be placed.

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Flores Settlement Agreement,[6] it is the responsibility of the FOJC to ensure that minors are held in appropriate temporary holding cells that are safe, sanitary, and that provide access to toilets and sinks. The FOJC must ensure that the temporary hold room has adequate temperature control and provides adequate supervision to protect minors from others. In addition, the FOJC must also ensure that the UAC have access to drinking water, juice, milk, food, and snacks. The UAC should also have access to medical assistance if the minor is in need of emergency services. The FOJC should also assist juveniles by providing them a phone call to their parent, guardian, consular officer, or legal representative, and provide them with a list of free or low-cost legal service providers.

The FOJC is also responsible for managing the dockets of UAC in their Area of Responsibility (AOR), including:

- Following proper book-in and book-out procedures;
- Coordinating with ORR facilities during custody transfers of UAC;
- Coordinating with other FOJCs about A-file transfers, including sending A-files via express mail to the receiving FOJC;
- Ensuring that service of the NTA on UAC is proper;
- Cancelling a NTA if service is not proper, and issuing a new NTA;
- Working with the Office of Chief Counsel to file NTAs with the EOIR court; and
- Coordinating with UAC's consulate for travel documents, including making travel arrangements for the UAC to get repatriated safely to their home country.

An FOJC will also assist with case review and custody redetermination. Other duties include responding to inquiries from parents, legal guardians, legal counsel, case workers, ORR federal field specialists, and consulate representatives. An FOJC may also assist in coordinating with ORR shelters for UAC who have aged out, and assisting with age redeterminations.

1.5 Training Requirement

The TVPRA of 2008 requires specialized training for personnel:

The Secretary of State, the Secretary of Homeland Security, the Secretary of Health and Human Services, and the Attorney General shall provide specialized training to all federal personnel, and upon request, state and local personnel, who have substantive contact with unaccompanied alien children. Such personnel shall be trained to work with unaccompanied

[6] On July 6, 2016, the Ninth Circuit Court of Appeals issued its ruling on DHS' appeal, affirming in part and reversing in part the July and August 2015 orders issued by the United States District Court for the Central District of California. See *Flores v. Lynch*, No. 15-56434, 828F.3d 898 (9th Cir. Jul. 6, 2016). ICE continues to act as expeditiously as possible to process families in ICE Family Residential Centers, by generally limiting the average time in detention for all accompanied minors in the credible fear process to a target of 20 days. ICE also continues to seek licensing for the Family Residential Centers.

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alien children, including identifying children who are victims of severe forms of trafficking in persons, and children for whom asylum or special immigrant relief may be appropriate including children described in subsection (a)(2). [7]

JFRMU provides this national training annually. JFRMU's training provides an overview of all requirements for processing UAC cases as well as identifying victims of trafficking, assault, or abuse, and requesting ORR placement. To keep FOJCs updated with the most recent policy and regulation changes, each FOJC will attend annual training held by JFRMU. FOJCs are expected to conduct additional training, either formal or informal, in their field offices to educate fellow ERO officers and staff.

FOJCs must also participate in monthly conference calls with JFRMU.

[7] The William Wilberforce Trafficking Victims Protection Reauthorization Act of 2008, Pub. L. No. 110-457, 122 Stat. 5075 (December 23, 2008); 8 U.S.C. § 1232(e).

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2. Legislation and Judicial Matters

2.1 The *Flores* Agreement

In 1997, the *Flores* Settlement Agreement (*Flores* Agreement)[8] was signed as a result of a class-action lawsuit filed against the Immigration and Naturalization Service (INS). Under the conditions of the *Flores* Agreement, the INS agreed to uphold the following conditions among other things:

- Minors are placed in the least restrictive detention setting appropriate to the UAC's age and special needs;
- Minors are segregated from unrelated adults during transport and temporary detention;
- Minors are transferred out of temporary location to a permanent location within 72 hours;
- Minors are treated with "dignity, respect, and with special concern due to vulnerabilities;"
- Minors have free and ready access to drinking water, food, and snacks;
- Attorney-client visits are permitted in juvenile facilities; and
- Minors must be placed in a licensed program (i.e., residential center) within 3 to 5 days and such facilities must be non-secure as required by state law, except that minors deemed to

[8] *Flores* Stipulated Settlement Agreement, January 17, 1997 and *Flores v. Lynch*, No. 15-56434, 828 F.3d 898 (9th Cir. Jul. 6, 2016).

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be delinquents, criminals or meeting other specific factors under the *Flores* Agreement may be placed in secure facilities.

Adherence to the *Flores* Agreement conditions extends to INS' successor, DHS. While not a party to, HHS' ORR generally follows the provisions of the Agreement. Recent litigation and court rulings have determined that the Flores Agreement applies to accompanied minors as well, including those who enter as members of family units. In addition to those items listed above, additional *Flores* advisals and Notice of Right to Judicial Review are required (See *Flores v. Lynch*, No. 15-56434, -828 F.3d 898 (9th Cir. Jul. 6, 2016)).

2.2 Homeland Security Act of 2002

On March 1, 2003, pursuant to the Homeland Security Act of 2002 (6 U.S.C. § 279), ORR assumed the authority for decisions related to the care and placement of UAC in federal custody. ORR takes the child's best interests into consideration by:

- Making placement determinations for all UAC;
- Identifying a sufficient number of qualified individuals, entities, and facilities to house UAC;
- Overseeing the infrastructure and personnel of facilities in which UAC reside;
- Reuniting UAC with a parent abroad in an approved case; and/or
- Reuniting UAC with parents or legal guardians within the United States.

While UAC are in the agency's care, ORR must ensure that the UAC:

- Appear for all immigration hearings/proceedings in which they are involved;
- Remain protected from smugglers, traffickers, or others who might seek to victimize or otherwise engage them in criminal, harmful, or exploitive activity;



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- Are placed in a setting in which they are not likely to pose a danger to themselves or others.[9]

2.3 *Perez-Fuñez*

Perez-Fuñez[10] is a class action lawsuit challenging the manner in which INS implemented voluntary departure procedures and resulted in both a preliminary injunction and a permanent injunction issued in 1984 and 1985 respectively. The case involves two consolidated actions against INS: *Jose Antonio Perez-Fuñez, v. District Director* and *Yanira Pena and Claudia Pena v. Immigration and Naturalization Service*. The two plaintiffs challenged the way INS implemented its voluntary departure procedure as it pertained to UAC. The injunction orders that any person taken into custody by the INS who is under the age of 18 and not accompanied by at least one of their lawful parents:

- Be verbally advised of rights verbatim, in English, Spanish or any language understood by the UAC;
- Be provided a copy of the written notice and a copy of a list of free or low-cost legal services; and
- Sign the acknowledgement on a separate copy of the notice indicating provision and understanding of notices.

It also outlines the UAC's rights to be represented by an attorney, to a hearing before an Immigration Judge (IJ), to apply for asylum, and to apply for voluntary departure.[11]
Pursuant to 8 C.F.R. § 236.3(h) Notice of Rights (Form I-770) must be issued to all juveniles apprehended by DHS. The I-770 also provides instructions to DHS officers on meeting their obligations under the purview of law. See **Section 3.1.3.2 "Form I-770 Notice of Rights and Disposition"** for additional instruction.

2.4 Trafficking Victims Protection Reauthorization Act

Signed into law on December 23, 2008, and reauthorized in 2013, the TVPRA is the most recent and comprehensive law that governs the apprehension, detention, and processing of UAC.[12] Where Flores applies to any minor in ICE custody, TVPRA specifically governs detention conditions for UAC in ORR custody. The TVPRA significantly affects DHS operations at ports of entry (POEs), at the northern and southern borders of the United States, and in the interior of the United States.

[9] The Homeland Security Act of 2002, Pub. L. No. 107-296, November 25, 2002..

[10] Perez-Funez v. District Director, 611 F. Supp. 990 (C.D. Cal. 1984) (preliminary injunction ordered), 619 F. Supp. 656 (C.D. Cal. 1985) (permanent injunction ordered)

[11] *Perez-Fuñez v. District Director*, 611 F. Supp. 990 (C.D. Cal. 1984).

[12] The William Wilberforce Trafficking Victims Protection Reauthorization Act of 2008, Pub. L. No. 110-457, 122 Stat. 5077 (December 23, 2008); 8 U.S.C.

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The provisions of the TVPRA:

- Define an unaccompanied alien child/children;
- Establish age determination procedures;
- Define the conditions of release reunification;
- Establish a screening process and eligibility for UAC from contiguous countries who may request voluntary return/withdrawal of application;
- Establish the time limit after screening process to notify HHS upon the initial encounter of UAC (48 hours);
- Establish in law the maximum transfer time for custody transfer of UAC to ORR (generally 72 hours, with some exceptions);
- Establish requirements for UAC to be placed in removal proceedings under § 240 of the INA;
- Transfer Special Immigrant Status authorization from DHS to ORR;
- Eliminate expedited removal proceedings, reinstatement of prior removal orders, and voluntary return (without seeing a judge).



Check out the TVPRA Time Requirements for Unaccompanied Alien Children (UAC) Flowchart on the JFRMU intranet page.

2.5 Violence Against Women Act Reauthorization of 2013

The Violence Against Women Act Reauthorization of 2013 (VAWA) affords services and protections to specific populations of juvenile aliens, such as trafficking victims. VAWA § 1261 addresses settings for unaccompanied minors who reach the age of maturity (18 years) while in federal custody, and explains that minors transferred from the HHS to the DHS at the age of 18 shall be considered for placement in the least restrictive setting. Such placements should be considered after evaluating the individual's danger to self and the community, and risk of flight. These individuals are eligible to participate in programs such as Alternatives to Detention (ATD), using a continuum

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of alternatives based on the need for supervision.[13]

2.6 The Prison Rape Elimination Act (PREA) of 2003

PREA was signed into law in 2003 and promulgated in the 2014 DHS regulation titled, "Standards to Prevent, Detect, and Respond to Sexual Abuse and Assault in Confinement Facilities". ICE has a zero tolerance policy for all forms of sexual abuse or assault. It is ICE policy to provide effective safeguards against sexual abuse and assault of all individuals in ICE custody. Directive 11062.2: Sexual Abuse and Assault Prevention and Intervention (SAAPI) establishes ICE policies and procedures to implement the DHS regulation. The SAAPI Directive contains responsibilities for reporting; protection; response; and medical, mental health, and rape crisis advocacy representatives for victims. Further information regarding ICE's PREA requirements are available here: https://spapps.ice.dhs.gov/sites/SAAPICM/SitePages/Home.aspx.

2.6.1 Allegations of Sexual Abuse and Assault

Definitions of sexual abuse and assault are set forth in Directive 11062.2: Sexual Abuse and Assault Prevention and Intervention, 3.

All allegations of sexual abuse and assault will be reported immediately in accordance with Directive 11062.2: Sexual Abuse and Assault Prevention and Intervention, 5.3 and 5.7.

Directive 11062.2: Sexual Abuse and Assault Prevention and Intervention 5.4 requires that if an ICE employee has a reasonable belief that anyone is subject to a substantial risk of imminent sexual abuse or assault, the employee will take immediate action to protect the individual.

2.6.2 PREA Reporting for Individuals with Disabilities or Limited English Proficiency (LEP)

In accordance with Directive 11062.2: Sexual Abuse and Assault Prevention and Intervention 5.6, individuals with disabilities or LEP shall have an equal opportunity to participate in, or benefit from, all aspects of ICE's efforts to prevent, detect, and respond to sexual abuse and assault.

In-person or telephonic interpretive services shall be provided as set forth in Directive 11062.2: Sexual Abuse and Assault Prevention and Intervention 5.6.

[13] The Violence Against Women Reauthorization Act of 2013, Pub. L. No. 113-4 § 1261, March 7, 2013.

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3. Operational Requirements

3.1 Processing a UAC

3.1.1 Apprehension at the Border

Most UAC are apprehended by CBP at points along the Southwest border and at POEs. CBP will process and house UAC until such time as ORR identifies bed space for the juvenile. It is ICE policy not to accept the custody of UAC from CBP until bed space has been designated. Transportation from CBP housing to ORR shelters is a shared responsibility between CBP and ERO. FOJCs will coordinate extensively with CBP and ORR regarding the custody transfer and transport of UAC.

3.1.1.1 CBP Voluntary Return following Apprehension at the Border

The TVPRA allows for special rules for children from contiguous countries to the United States (Mexico/Canada). A UAC who is a national of either of these countries, once screened by CBP for human trafficking or fear of return, may be permitted to withdraw his or her application for admission to the United States.

Through a detailed screening process, CBP will determine whether a UAC has been a victim trafficking, and whether there is credible evidence that the juvenile will be trafficked upon returning to his or her home country. CBP also takes into consideration if the UAC is able to

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make an independent decision and without fear of returning home or fear of persecution.

An immigration officer, in most cases, a CBP officer, who finds that a UAC meets the above criteria at a land border or POE of the United States, and determines that such a child is inadmissible under the Immigration and Nationality Act (8 U.S.C. 1101 et seq.), may:

- Permit such a child to withdraw his or her application for admission (voluntary return) pursuant to § 235(a)(4) of the Immigration and Nationality Act (8 U.S.C. 1225(a)(4)); and
- Return such a child to his or her country of nationality or country of last habitual residence.[14]

If the UAC does not meet such criteria or if no determination can be made within 48 hours of apprehension, the UAC must be immediately transferred to ORR.[15]

The TVPRA prohibits ERO from granting voluntary return, effecting expedited removal, or reinstating the prior removal order of any UAC. To pursue a UAC's removal from the United States, DHS must serve an NTA and place him or her in removal proceedings under § 240 of the INA.[16]

3.1.2 Age Determination Procedures

In cases where the age of a subject is in question, the TVPRA requires that age-determination procedures include reviewing multiple forms of evidence. Under these procedures, each case must be evaluated carefully based on the totality of all available evidence, including the statement of the individual in question.

Determining the age of an individual can prove challenging for many reasons, including:

- Lack of documentation;
- Contradictory or fraudulent identity documentation or statements;
- Physical appearance of the alien; and/or
- Diminished capacity of the alien.

Until a determination can be made, the subjects must also immediately be separated from unrelated adults and other minors.[17] ERO

[14] The William Wilberforce Trafficking Victims Protection Reauthorization Act of 2008, Pub. L. No. 110-457, 122 Stat. 5075 (December 23, 2008); 8 U.S.C. § 235(a) (2) (B).
[15] The William Wilberforce Trafficking Victims Protection Reauthorization Act of 2008, Pub. L. No. 110-457, 122 Stat. 5076 (December 23, 2008); 8 U.S.C. § 235(a) (4).
[16] Field Guidance for the William Wilberforce Trafficking Victims Protection Reauthorization Act of 2008 (TVPRA) & Violence Against Women Reauthorization Act of 2013 (VAWA), § E, Department of Homeland Security, Immigration and Customs Enforcement, Office of Enforcement and Removal Operations, January 13, 2016.
[17] Note: Follow the regulatory confidentiality protections afforded to asylum seekers and other protected classes when interacting with third parties, as provided in 8 C.F.R. § 208.6 and §1208.6.

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determines the age of individuals in custody consistent with "ORR Policy Guide Children Entering the United States Unaccompanied, 1.6: Determining the Age of an Individual without Lawful Immigration Status" (August 28, 2015). When an individual claims to be a juvenile, they must be provided all of the services provided to minors until a formal age determination can be made. Although minors must be separated from adults, the use of traditional segregation is to be avoided.

Acceptable documentation for age determination includes:

- Official government-issued documents, including birth certificates. If a document's authenticity is in question, or the alien does not possess documentation, verify the validity of the alien's claim by contacting government officials of the alien's home country; and
- Other objective documentation (e.g., baptismal certificates, school records, medical records) that indicate the alien's date of birth.

Acceptable statements by individuals (including the one whose age is in question) asserting personal knowledge of the alien's age, and who ERO concludes can credibly attest to the person's age include:

- Statements provided by the individual regarding his/her age or birth date (an alien's uncorroborated declaration regarding his/her age should not be used as the sole basis for an age determination);
- Statements from the alien's parent(s) or legal guardian(s), if such persons can be identified and contacted; and
- Statements from other persons.

Information from another government agency (federal, state, local, or foreign) may include:

- State/local arrest records;
- Child welfare agency records; and
- Consular records.

As a last resort, age assessment procedures (e.g., dental and skeletal [bone] maturity assessments using x-rays or other medical techniques identified by the Age Determination Procedures for Custody Determination TPU 3 medical community as appropriate) may be used when no conclusive information is available.

- The examination will be performed by a medical professional experienced in age assessment method(s), taking into account the individual's ethnic and genetic background.

As no medical assessment method can determine an exact age, ORR policy uses the estimated probability in determining the age of the individual in making the age determination based on the totality of the evidence.

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The FOJC can request assistance with medical age assessment from the Immigration Health Services Corps (IHSC) by initiating a "Medical Payment Authorization Request" through the IHSC Managed Care Branch. IHSC will coordinate with a licensed and credentialed forensic practitioner, and will provide a written report to the case officer on the same day as the examination, if possible. The report will detail the forensic method used to determine age, and the probability that the alien is a juvenile or an adult.

The medical age assessment reporting process is as follows:

- The examining doctor submits a written report indicating the probability percentage that the individual is a juvenile or an adult;
- The Field Office Director (FOD) or designee Supervisory Detention and Deportation Officer (SDDO) reviews the medical report; and
- If the probability of an individual being 18 years old or older is 75 percent or greater, and the totality of the evidence suggests the person is an adult, process the individual as an adult.

The final age determination will be made by the FOD, or designee, based on the totality of evidence provided. The FOD will promptly evaluate new information regarding the age of the individual in ERO custody if presented by the individual or his/her legal representative. The FOJC maintains a record of results, especially radiographic (x-ray) results, in appropriate fields of the ENFORCE Custody Actions and Decisions Screen, and maintains a copy in the alien's A-file. The FOJC documents all information relied upon to determine age (the information referenced, data systems used, individuals or agencies consulted, statements, and conclusions) in accordance with local procedure using Form I-213, Record of Inadmissible/Deportable Alien; Form G-166C, Memorandum of Investigation; or memorandum to file.[18]

3.1.3 Screening of a UAC

Although the TVPRA requires that CBP screen UAC from contiguous countries for trafficking indicators, as a matter of policy, CBP screens all UAC it encounters.

3.1.3.1 Form CBP-93

CBP developed Form CBP-93-UAC Screening Addendum to assess the likelihood that a UAC has been a victim of trafficking or is at risk of being trafficked, fear of return due to credible fear of persecution, and assesses ability for independent decision-making, If the

[18] Age Determination Procedures for Custody Determination, Policy Number ERO 113014, Department of Homeland Security, Immigration and Customs Enforcement, Office of Enforcement and Removal Operations, December 11, 2015.

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UAC claims to have been a victim, or appears to be at risk, removal proceedings will be initiated under INA § 240 and the UAC will be transferred to ORR custody. CBP will refer these cases to HSI for further investigation.

3.1.3.2 Form I-770 Notice of Rights and Disposition

The apprehending DHS component must provide all encountered unaccompanied minors with Form I-770 Notice of Rights and Disposition and an opportunity to express a fear of returning. The TVPRA stipulates that the USCIS Asylum Office has initial jurisdiction over all UAC who indicate a fear of return.[19]



8 C.F.R. § 236.3(h) requires that a juvenile be given Form I-770 Notice of Rights and Disposition. If the child is younger than 14 years of age or unable to understand the notice, it must be read and explained to the juvenile in a language he or she understands.

3.1.4 Screening of ICE Apprehended UAC: Human Trafficking

With the continued influx of UAC into the United States, increasing the number of daily encounters and apprehensions, ICE officers must remain cognizant of the possible signs of human trafficking.

ICE officers must screen any newly encountered UAC, regardless of their citizenship or nationality, for potential trafficking indicators. This requirement includes all interior ICE apprehensions, including minors who may have been previously encountered by CBP (but not those UAC who were apprehended by CBP and are being transferred by ERO to ORR custody). ICE should also apply this screening for those individuals who are identified as minors while in ICE custody, but may previously have been processed by CBP as an adult.

[19] The William Wilberforce Trafficking Victims Protection Reauthorization Act of 2008, Pub. L. No. 110-457, 122 Stat. 5079 (December 23, 2008); 8 U.S.C. § 1158(b)(3)(C).

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Processing officers must now screen every UAC for trafficking indicators using the questions below as a guide. While interviewing the UAC, ICE officers should engage with the UAC in a tone and manner appropriate for his or her age and level of development.

Processing officers should engage with the local FOJC whenever a UAC is encountered to ensure proper processing actions are taken. Interview questions include the following:

- (b)(7)(E)

- (b)(7)(E)

Note: The above questions may need to be worded differently based on the UAC's age and ability to understand the question. Should the UAC's answer(s) indicate potential victimization, the FOJC should attempt to ascertain if the activity occurred within the United States or abroad. If affirmative responses appear to indicate the UAC may be a victim of trafficking within the U.S., the officer must notify:

- The Human Smuggling and Trafficking Center at HSTC@ice.dhs.gov;
- The duty officer at the local HSI office; and
- The local HSI Victim Assistance Specialist (see JFRMU intranet page for current list).

The FOJC should update the "comments" section of the ENFORCE Alien Removal Module (EARM) to include any pertinent trafficking-related information. When making the referral to ORR, the FOJC should provide detailed information regarding any signs of potential victimization, regardless of where this victimization occurred, within the ORR Bed Space Placement Request Form.

For further guidance on identifying human trafficking, take the Human Trafficking Awareness Training and review the brochures in the

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appendix on the ICE Victim Assistance Program.[20]

3.1.5 HSI Operations Referrals

HSI special agents are sometimes required to arrest and detain family units pending an arraignment with the local federal magistrate. In other instances, HSI may encounter UAC incidental to an ongoing investigative or enforcement action. In these instances, minors must be issued charging documents and transferred to ORR custody.

HSI Victim Assistant Specialists (VAS) may contact the FOJC with a specific case requiring action. The FOJC should advise the HSI VAS of the necessary operational processes specific to minors and families. When a juvenile *who has not been placed in removal proceedings* must be transferred to ORR, it is at the discretion of the ERO field office to assist with the transport request. It is highly recommended that local management have an existing plan in place with regard to how best to handle vulnerable cases.

When HSI special agents alert a FOJC that a juvenile has come into custody due to one of the above scenarios, the FOJC should

seek answers to the following questions to help determine the best course of action:

- What status does the juvenile have?
- Is the juvenile unaccompanied?
- Was the juvenile apprehended with family? If so, was he or she with a parent or legal guardian?
- What is the criminal or delinquent history, if any?

To help answer these questions, the FOJC must review the I-213 to help determine if the UAC traveled to the United States, or was recently living, with a family member. If the minor is determined to be accompanied, ICE should seek reunification with a parent or legal guardian as soon as possible, consistent with DHS enforcement priorities. **Refer to Section 3.1.10 "Reunification Before ORR Transfer".** Seek JFRMU assistance for referrals that do not fit the above scenarios.

3.1.6 Minors Who Surrender Themselves to Law Enforcement

On occasion, minors may surrender themselves to local law enforcement, requesting to be turned over to ERO. The FOJC should first determine whether or not the juvenile is a foreign national. If a foreign national, and the juvenile has no lawful status, he/she is subject to removal proceedings. If the FOJC determines the juvenile meets the definition of a UAC, initiate 240 proceedings and refer

[20] Broadcast: Screening of Unaccompanied Alien Children (UAC) Apprehended by ICE for Human Trafficking Indicators, Department of Homeland Security, Immigration and Customs Enforcement, Office of Enforcement and Removal Operations, February 4, 2016.

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the juvenile to ORR.

If the FOJC determines that the juvenile is accompanied and meets the criteria of Executive Order 13767, "Border Security and Immigration Enforcement Improvements" (January 25, 2017) or Executive Order 13768, "Enhancing Public Safety in the Interior of the United States" (January 25, 2017) and has criminal convictions, delinquency findings, or pending charges, the FOJC should seek JFRMU assistance. **Refer to Section 3.5.6 "Accompanied Minors Who Are Delinquent or Are Chargeable as Delinquent"** for further information.

In each of the above instances, both unaccompanied and accompanied juveniles must be screened for human trafficking. **Refer to Section 3.14 "Screening of ICE Apprehended UAC: Human Trafficking".**

3.1.7 Child Protective Services

In rare instances, local Child Protective Services (CPS) authorities may have custody of a juvenile whose parent or legal guardian is in ICE custody. In these instances, seek JFRMU assistance: JFRMU@ice.dhs.gov.

3.1.8 Operations of ERO Staging/Holding Areas

ERO established comprehensive standards for hold rooms during processing of minors, as directed in ICE Policy Directive No. 11087.1: "Operations of ERO Holding Facilities" (September 22, 2014). A staging/holding facility is a facility that contains hold rooms that are primarily used for the short-term confinement of individuals who have recently been detained, or are being transferred to or from a court, detention facility, another holding facility, or other agency. Individuals may not be placed in hold rooms for periods exceeding 12 hours.

3.1.8.1 Monitoring Minors within Hold Rooms

Please refer to Section 3.1.8.3 "Separation of Minors by Age, Gender, and Criminality" for considerations of least restrictive setting.

- Staff must maintain continuous, close, and direct visual monitoring of all minors. When the hold room is not in direct line of sight, visual checks must be performed at least every 15 minutes.
- If the hold room is not equipped with restroom facilities, the supervisor must position an officer within sight or hearing of each hold room so minors can be escorted to the restroom when requested. If there are no toilets in the hold room, staff should advise those being held that restrooms are available for use at any time and that they should notify any officer when they need to use the facilities.
- It is recommended that each field office purchase and maintain a supply of clothing for minors (e.g., shirts, sweat-

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shirts, shoes, diapers). However, if the circumstances of the encounter prevent access to clothing or footwear and there is no readily available supply, arrangements must be made to purchase these items for the juvenile.

- Staff must maintain a separate juvenile detention log, or designated equivalent for every juvenile brought into ERO custody regardless of purpose (e.g., new arrivals, awaiting legal visitations, awaiting interviews, etc.).
- Staff assigned to monitoring minors in hold rooms must sign in before documenting the details of each "check-in" in the juvenile daily log or equivalent.
- All times must be documented when meals, drinks, snacks and when applicable, other items (e.g., blankets, sweaters, etc.) are provided or distributed.
- If a juvenile complains of harassment or any other safety issue with another juvenile, immediately separate the minors and notify the duty supervisor. Record all incidents into the juvenile log.

NOTE

Check out the Hold Room Poster on the JFRMU intranet page.

3.1.8.2 Sexual Abuse and Assault Prevention and Intervention

Each ERO staging/holding area designated for the processing of UAC and/or family units must adhere to the zero-tolerance policy for sexual abuse or sexual assault. ICE policy on SAAPI[21] establishes an integrated and comprehensive system of preventing and responding to sexual abuse or assault. The policy includes all phases of custody from initial encounter to transportation and final release from ERO custody. The SAAPI policy directive was established to be consistent with the PREA.[22] SAAPI regulations are guidelines to prevent, detect, and respond to sexual abuse and assault of any individual, regardless of age, in ERO custody.

NOTE

Logged "check-ins" verifies compliance with standard operating procedures, creating a legally defensible historical record of the juvenile while in ERO care and custody.

[21] ICE Policy Directive No. 11062.1: Sexual Abuse and Assault Prevention and Intervention (SAAPI) (May 11, 2012).
[22] Prison Rape Elimination Act of 2003, Pub. L. No 108-79, 117 Stat. 972 (2003).

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UAC and/or parents with accompanied children should not be confined in the same hold room as other detainees. Additionally, all juveniles must be detained in the least restrictive setting appropriate to the juvenile's age and special needs.

3.1.8.3 Separation of Minors by Age, Gender, and Criminality

ERO will not co-locate unaccompanied minors with unrelated adults in hold rooms. FAMU groups may be housed together under ICE supervision.

The layout of a holding area and the amount of traffic in the holding area will determine the least restrictive setting(s) in which to hold minors during processing. Every effort must be taken to ensure that the safety and well-being of the UAC.

Using available spaces (benches, interview rooms, break rooms, etc.), group the minors as follows:

- Ensure separation of those unrelated minors age 14 years and older from younger minors; and, whenever possible, separate the minors 10-to-13 year-olds from those age 9 and younger
- Separate males from females, and assign same-gender monitoring staff whenever feasible
- Whenever possible, keep siblings together (same and opposite-sex siblings) while in ERO custody. This is especially important when one sibling is young and the other sibling is older and may be the younger sibling's caretaker (note "caretaker" does not mean legal guardian). This will also better ensure that siblings are transported together
- If an arriving juvenile appears at higher risk of sexual or other form of abuse, separate the at-risk juvenile from potential aggressor(s). For example, minors with developmental delays or those lacking mental or physical maturity commensurate with their age should be separated from potential aggressors. In these instances, officers and staff should consider whether the special-needs juvenile requires additional supervision/observation beyond the required 15-minute checks discussed below.
- UAC who are accompanied by their own children should be housed together. They should not be housed with other UAC or unrelated adults. I some instances, it may be appropriate to house the minor and his/her child with other FAMU, under ICE supervision.
- Separate delinquent/criminal minors from other minors;
- For UAC referred to ORR, notify ORR in all instances when a referred UAC has a history of and/or has been convicted or found delinquent of a crime related to sexual abuse or any other serious offense(s). ORR must be notified of all reasons pertaining to placement.

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3.1.8.4 *Minors with Special Needs*

If a disabled child arrives with an adult caregiver, staff may allow the adult to care for the child until their identity is verified. Additional supervision in these instances may be required. Often, ORR may be able to provide additional licensed staff to assist with special-needs children. For assistance and/or additional recommendations in cases such as these, contact the National Juvenile Coordinator.

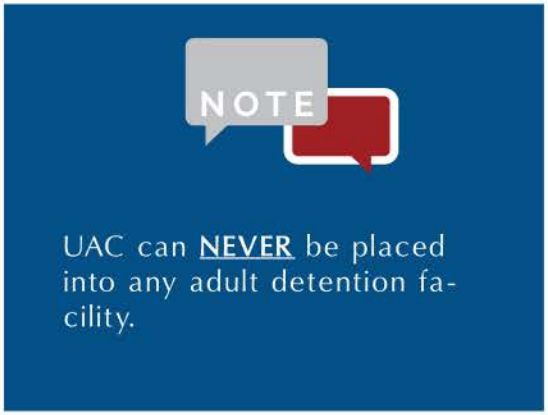
3.1.8.5 *Temporary Housing (Custody Determination or Placement Pending after 12 Hours)*

Processing and issuing UAC charging documents takes priority over processing all adult detainees. Placing tender-age UAC into appropriate housing is ICE's highest priority. If placement is not possible before this 12-hour deadline because of limited resources or operational limitations:

- ERO must move UAC to a hotel or a JFRMU-approved under 72-hour local group home, shelter, or juvenile detention facility.

Field offices are encouraged to have standing contractual agreements with local hotels. UAC placed in hotels may be supervised by ICE officers and/or approved ICE contractors.

- **Hotel rooms:** When using a hotel temporarily to house one or more UAC pending placement, have the individuals bring sufficient clothing and toiletries for the duration of their stay.
- **Under 72-hour facilities:** JFRMU maintains a list of approved facilities that may be used to house UAC. **If the local field office would like to propose a group home or juvenile-detention facility for use in the AOR, contact JFRMU at JFRMU@ice.dhs.gov.**



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3.1.8.6 Searches

Only when there is a reasonable suspicion that the UAC is concealing contraband should ERO officers conduct a search. Use the least intrusive search method practical—such as clothed pat-down searches, intake questioning, x-rays and metal detectors, etc.—to detect contraband. When operationally feasible, a same-gender officer shall conduct the search. At least one witness will observe if an opposite-gender officer search is necessary.

Do not subject anyone 14 years of age or younger to a pat-down search without explicit authorization from a supervisor. If a supervisor authorizes the pat-down, the approving supervisor's name, date, and time of authorization will be documented in the daily intake log.[23]

3.1.9 Meals and Snacks During Transport

ERO officers must inquire and identify any special dietary needs for those requiring transport. The local food service provider must be notified of any special dietary needs prior to departure, to ensure that suitable food is available during the trip. The originating field office must provide meals for minors during transport whenever the time in transit will exceed four hours. The provided meals must be nutritional (of sufficient calories for the age/size of the minor). In accordance with ERO policies, and regardless of the trip's duration (or the time of day), snacks and drinks must remain available the entire time.



Follow local procedures—including use of a government purchase card or other reimbursement procedures—when paying for meals.*

Additional stipulations for meal/snack provisions are as follows:

- A constant supply of drinking water, along with cups or bottles suitable for the juvenile's

[23] Operations of ERO Holding Facilities, Policy 11087.1, Department of Homeland Security, Immigration and Customs Enforcement, Office of Enforcement and Removal Operations, September 22, 2014.

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ease of use, must always be available;
- Consider the timing of the most recent meal when deciding when to serve the next meal;
- Observe safe food-handling procedures, including proper temperatures and refrigeration, personal hygiene, and general sanitation (cleaning and sterilization);
- If meals have not been provided because of an emergency or other ICE management-approved decision, purchase meals from a commercial source.

3.1.10 Reunification Before ORR Transfer

If ERO encounters a child who identifies a parent or legal guardian who, within 24-48 hours, can provide care and physical custody, ERO may release the child to that parent or legal guardian if the FOJC can verify the relationship through supporting documentation. The parent/legal guardian must provide at least one document from each of the five categories, A – E, below:

A. Identity document:
- Passport;
- Consular Identification card;
- Notice to Appear; or
- Government-issued document.

B. Legal document establishing the relationship:
- Birth Certificates (sponsor's and minor's); or
- Court order granting custodial rights for child(ren).

Note: a notarized letter is unacceptable.

C. Proof of employment:
- Letter from employer on letterhead stationery.

D. Affidavit of support (I-134) establishing financial support from head of household.

E. Proof of residence:
- Lease/rental agreement; or
- Utility bill.

If there are doubts about any of the above-listed documents and a supervisor approves further investigation, the FOJC should ask the local consulate for help with verification/authentication.

ERO must transfer custody to ORR within 72 hours of determining the child is unaccompanied (which generally means within 72 hours of apprehension) if a parent/legal guardian cannot meet the reunification requirements.

Even if the parent/legal guardian proves the relationship, he/she must physically reunite with the child within 24-48 hours; however, the logistics of travel might make that impossible. Because the

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time constraint may prevent an intended reunification, the FOJC must make contingency plans to facilitate timely transfer to ORR. ERO must comply with the TVPRA's requirement to transfer and must transfer unaccompanied children from ERO custody within 72 hours of determining that the child is unaccompanied.[24]

3.1.11 Request for ORR Placement

Once a UAC has been identified, a request for ORR placement should be submitted via ORR's UAC Portal. Generally, it is the apprehending agency's responsibility to refer the child to ORR via the Portal. CBP has developed an electronic process where information entered in its system of record (E3) is automatically transferred into ORR's Portal. Because this process is automatic, no interaction is required on the part of ERO. In limited cases, ERO may need to assist non-DHS federal agencies in completing the referral process.



For UAC apprehended by CBP, ICE is not to take physical custody of the UAC until ORR has designated bed space for that juvenile.

All FOJCs and FOJC Supervisors should have access to the UAC Portal. To request access, please contact JFRMU at JFRMU@ice.dhs.gov.

In the event that the UAC Portal is not available, a placement request can be submitted by completing the UAC Initial Placement Referral Form and submitting to the ORR Intakes mailbox. This form is available on the JFRMU Intranet site: https://insight.ice.dhs.gov/ero/custody/Pages/jfrmu.aspx.

Complete the UAC Initial Placement Referral Form in its entirety, including as much detail as possible. Review and verify all information to ensure accuracy. Any identification documents (e.g., birth certificates, baptismal certificates, etc.) relating to the UAC should be submitted along with

[24] https://insight.ice.dhs.gov/ero/custody/Documents/jfrmu/pdf/tvpra-field-guidance.pdf

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the form. Be sure to include any available contact information for parents, legal guardians, or adult relatives, as this information can assist in ORR's reunification process. Also include information related to medical conditions and criminal history, to allow ORR to place each UAC in a facility that is equipped to handle that UAC's specific needs.

A completed UAC Initial Placement Referral Form, along with any supporting documentation, should be scanned and emailed to orrducs_intakes@acf.hhs.gov (with read receipt), or faxed to (202) 401-1022. If there are concerns regarding the placement request, please call ORR Intakes directly at (202) 401-5709.

3.1.11.1 Criminality Information and Documents

ORR may request additional information that cannot be found in the National Crime Information Center (NCIC) criminal history or in the UAC's Form I-213 within the A-file. If the UAC has a criminal record, ORR may request copies of court documents, police reports, indictments, and documentation on gang affiliations and/or ties to cartels. DHS officers cannot provide copies of these reports without the consent of the originating agency (often this is the juvenile probation officer). DHS officers can contact the probation officer and request verbal consent, noting whom they spoke with and the date the consent was given, or provide the name and contact number for the probation officer for ORR to contact them directly.

The UAC Initial Placement Referral Form includes a field to document the contact information for the juvenile probation officer.

If a UAC has a criminal or delinquent record or is coming from a State or local jail, record the I-213 with information regarding crimes committed, sentences served, as well as use of weapons or suspected gang affiliation (including gang-related tattoos). Provide ORR with any information regarding behavioral problems or disciplinary action prior to transfer to ICE custody. Provide this information as promptly as possible.

3.1.11.2 Medical Documents

ORR may request copies of medical documents, particularly in cases of contagious disease, pregnancy, or physical disability. These documents should be submitted to ORR along with the UAC Initial Placement Referral Form. Often the medical documentation (or medical transfer summary) is not available prior to the UAC's transfer to ICE custody; if not, please indicate such on the UAC Initial Placement Referral Form. Provide updates to ORR as needed if DHS officers learn the UAC has a medical condition after the placement request was already submitted.

3.1.12 ERO Required Transportation Notifications

FOJCs are required to carry out the following notifications when

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coordinating and conducting transport of a UAC:

- Notify the component staging the UAC of the intended time of travel;
- Notify the FOJC of the designated ORR shelter location AOR that the shelter is receiving a UAC;
- Notify the designated ORR shelter of the UAC's estimated time of arrival at the shelter.

3.1.13 Transportation Request

After a UAC has been screened, or 48 hours have passed since the UAC was apprehended, CBP will request that ERO transport the UAC. ERO officers are instructed to only accept custody of a UAC for purposes of transportation to ORR designated shelters for placement. ERO will accept custody of the UAC from CBP **only after** the following conditions have been satisfied:

- UAC has been processed; charging documents have been issued and served; ORR shelter placement and bed space is confirmed.
- NTA has been reviewed for legal sufficiency, including confirmation that the certificate of service has been signed by the appropriate party.
  - The certificate of service can only be signed by UAC 14 years of age and older, and must be left blank for UAC 13 years of age and under.
  - For UAC under 14 years old, the NTA must be personally served on the "conservator." In most cases, the conservator will be the person in charge of the ORR facility in which the UAC is housed (or an ORR case manager). The FOJC is responsible for visiting the ORR facility to personally serve the conservator, ensuring that the conservator legibly signs the NTA and prints his or her name and title beneath the signature. This requirement will ensure that ICE can demonstrate proper service to the immigration court.
  - FOJCs should establish a local procedure for coordinating the transportation of UAC to the placement location. Some offices have local agreements with CBP and do not take



Do not send a copy of the I-213 or NCIC criminal history to ORR, as they are not authorized to receive law enforcement sensitive information.* Describe any issues and include necessary information on the UAC Initial Placement Referral Form and in the body of the email if necessary.

* James M. Chaparro, Sharing Information with the Department of Health and Human Services Office of Refugee Resettlement, Department of Homeland Security, Immigration and Customs Enforcement, Office of Enforcement and Removal Operations, November 30, 2010.

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custody of a UAC until time of transport. The coordinating field office is still responsible to provide all notifications (e.g., placement notification, itineraries for flights, etc.). These notifications ensure that transporting officers are aware of the travel arrangements and help to avoid travel delays or cancellations.

3.1.14 Transport Documents

When traveling by bus or van, officers must complete Form G-391, Official Detail ("Trip Ticket") or equivalent, recording the names of the escorting ERO officers or contract officers, type of transport vehicle, and mileage at the start and end of the trip. In addition to recording the time in custody for every juvenile on the manifest (I-216, Record of Persons and Property Transferred) in the ENFORCE Alien Booking Module (EABM), the transporting office must send the receiving FOJC a copy of the I-216, along with the estimated time of arrival.[25]

3.1.15 Escort Requirements

The following requirements must be met during the transportation of UAC:

- Although the preferred practice is a minimum of (b)(7)(es-corts for one UAC, if necessary and with supervisory approval, (b)(7)(E) of the same gender can escort
- (b)(7)(escorts may transport up to (b)(7)(E)
- Female UAC must be escorted by at least one female officer;
- Each additional group of (b)(7)(E) minors requires (b)(7)(E) escort;
- Instances in which both male and female minors are being transported will require (b)(7)(E) of each gender;[26]
- Additional escorts may be necessary when very young children are being transported as part of a group (e.g., an infant will require one officer). Toddlers and children in diapers will require additional assistance from escort staff—adjust escort to UAC ratios accordingly.

3.1.16 Requirements for Transfer of Custody to ORR

FOJCs must ensure that a custody-transfer packet is prepared and completed, prior to the UAC getting transported, and that the packet is given to the ORR shelter that is receiving the UAC.
The custody-transfer packet includes the following:

- I-862, Notice to Appear (or charging document);

[25] John P. Torres: "Update to the Detention and Deportation Officers Field Manual: Appendix 16-4, Part 2; Enforcement Standard Pertaining to the Escorting of Aliens", January 31, 2008
[26] Update to the Detention and Deportation Officers Field Manual: Appendix 16-4, Part 2; Enforcement Standard Pertaining to the Escorting of Aliens, Department of Homeland Security, Immigration and Customs Enforcement, January 31, 2008.

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- I-770, Notice of Rights and Request for Disposition for Minors;
- DIHS-794, In-Processing Health Screening Form;
- Medical paperwork (e.g., hospital records), if any;
- List of medications, if any;
- List of free legal service providers, if applicable; and
- Orantes advisals notification, if applicable.

Although it is standard operating procedure for ERO to deliver custody-transfer packets in the manner prescribed in this section, no ORR shelter can refuse to accept UAC because of limited or missing DHS-issued paperwork.[27]

3.1.17 Medical Screening and Medications

UAC cannot travel without a recent medical summary (IHSC 795-A (adult) and IHSC 795-J (juvenile) Intake Screening or similar form). If a UAC comes into ERO custody without a medical summary and the local ICE Health Services Corps (IHSC) officers do not work with UAC, contact the IHSC Field Medical Coordinator (FMC) or Health Services Administrator (HSA) to coordinate with a local practitioner.

- When a UAC is encountered by ERO (or another agency) and is in possession of an unfilled prescription, IHSC or a medical provider must determine the validity of the prescription. If the medication is determined to be bona fide and properly prescribed, it must be filled prior to transport. ERO should contact IHSC to administer medication and/or monitor the UAC taking the medication, as directed by the prescribing medical authority.



Check out the ORR Transfer Packet Checklist Job Aid on the JFRMU intranet page.

[27] Field Guidance for the William Wilberforce Trafficking Victims Protection Reauthorization Act of 2008 (TVPRA) & Violence Against Women Reauthorization Act of 2013 (VAWA), § H, Department of Homeland Security, Immigration and Customs Enforcement, Office of Enforcement and Removal Operations, January 13, 2016.

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- Prior to transporting any UAC from a holding facility, attach a list of all medications or prescriptions to the I-216 manifest. In addition, note any medications in the manifest comments section in EABM.

3.1.18 Money, Valuables, and Other Personal Property

At the beginning of, during, and upon completion of each transport, ERO officers are required to verify that all items listed on the manifest are accounted for. If a UAC claims missing funds, valuables, identity documents, or personal property, that UAC should remain in the staging/holding area while completing the required paperwork (SF-95 and I-387, or equivalent) to note what is missing. The transfer may proceed once copies of the completed forms are placed in the A-file and provided to the UAC. UAC should not have access to personal property while in transit from a holding facility to another location. However, unless there are safety concerns, the following items may remain on person:

- Contact's phone number(s);
- Eyeglasses and/or contact lenses;
- Receipts for money and property (forms G-589 and I-77);
- Copies of charging documents and identity documents (e.g., I-200, I-286, I-862, I-770, list of legal services, birth certificates, and government IDs).

NOTE

Although custody of UAC is transferred to ORR, case management remains with ERO. Original documents may be needed to secure travel documents if UAC is ordered to be removed. A copy can be provided to ORR and the individual at the time of transfer.

3.1.19 Driving Hours

With full consideration for officer safety and security, transporting officers will make a reasonable, but limited, number of rest stops, taking into account the ages of any minors being transported.

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Younger children may require more frequent restroom use, and these needs should be anticipated and accommodated. Before allowing those being transported to leave the vehicle during a rest stop, transporting officers will secure the area. After disembarking a transport vehicle, the transport officers will keep all minors under constant observation to prevent external contact(s) or contraband smuggling. If one or more individual remains inside or near the vehicle during a rest stop, at least one escorting officer must stay with the vehicle.

Prior to commencing a transport, escorting officers must be cognizant of travel times and ensure adherence to **Section 3.1.9 "Meals and Snacks During Transport"** regarding the availability and timing of meals and snacks during transport.

- UAC will not be transported by bus if the trip would normally exceed six hours, except under exigent circumstances. If the bus route is likely to exceed six hours, transportation by auto or van is required with frequent breaks as indicated above. When exigent circumstances occur and transportation by bus will exceed six hours, refer all requests for authorization to JFRMU. When transporting minors, follow all state laws and regulations regarding child restraints and car seats.
- When officers are transporting individuals of the opposite gender, transport staff is required to call in their time of departure and odometer reading to the originating field office's transport supervisor. The transporting officers will provide the same trip details upon arrival at their destination. All trip logs including method of travel, dates, times, locations, and designated supervisory official are to be maintained in accordance with ICE record retention policies.



Check out the Rules of UAC Ground Transportation Job Aid on the JFRMU intranet page.

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3.1.20 Use of Restraints

Officers will not transport anyone without considering the person's risk to ICE staff, the public, himself or herself, and the likelihood of escape. The use of restraints should be on a strict case-by-case basis and not as a general practice. As a rule, do not handcuff juveniles during transport unless there is evidence or a perceived threat of violent behavior, a history of criminal activity, or other reasons to believe the alien is an escape risk. Any child deemed not to pose a threat of harm or escape by an officer will not be restrained.[28]

If it is necessary to restrain a juvenile, always consider size, age, gender, and comprehension level when considering the type of approved restraints to apply. Juveniles under 12 years of age will never be placed in full restraints. As a rule, full restraints should never be used on juveniles over the age of 12 unless (b)(7)(E)

(b)(7)(E)

(b)(7)(E) Treat all juveniles with courtesy and respect, but do not sacrifice or compromise security to do so. The use of restraints on a juvenile must be approved by a supervisor in all cases. The use of full restraints on a juvenile must be approved at the AFOD or Unit Chief level.

Use of restraints on any juvenile must be fully documented with an after-action report. Juveniles who are pregnant will never be placed in restraints, unless deemed to pose a threat of harm or escape.

3.1.20.1 Use of Restraints while Transferring Minors on ICE Air Flights

Except in exigent circumstances, juveniles being transported by IAO flights shall not be handcuffed or restrained, unless an individual juvenile has demonstrated or threatened violent behavior has a history of criminal activity, or demonstrates a likelihood of escape. In these instances, the use of restraints should be on a strict case-by-case basis and not as a general practice.

If a Flight Officer in Charge (FOIC) determines it necessary to restrain an entire group of minors on an ICE Air Operations (IAO) flight, that decision must be approved at/or above the Unit Chief level and an After-Action Report must be completed. The same process must be followed when any juvenile under the age of 12 is restrained in any manner.[29]

3.1.21 Contractor-Led Transport

JFRMU now operates a UAC and Family Group transportation initiative to support ERO field offices in moving these populations

[28] Use of Restraints, Policy ERO 11155.1, Department of Homeland Security, Immigration and Customs Enforcement, November 19, 2012.
[29] Broadcast: Interim Guidance Regarding the Use of Restraints while Transferring Minors on ICE Air Flights.

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to ORR shelters or ICE family residential centers within the interior of the United States. JFRMU's contractor coordinates directly with CBP and HHS for operational arrangements and estimated time of arrival notices. To meet the statutorily mandated 72-hours transfer requirement, JFRMU's vendor tracks movements beginning with the arresting agency's time of apprehension. Operations are currently headquartered in McAllen, Texas, with sub-offices in San Antonio, Texas; and Phoenix, Arizona.

Once travel arrangements are finalized, the vendor will ask the apprehending agency to meet their staff at the airport for a commercial flight. The vendor will forward all UAC placement information to the appropriate FOJC.

To request assistance through this initiative, please contact JFRMU at (b)(7)(E)

3.1.22 Emergency Situations

ICE officers should refer to procedures established in PBNDS 2011 and the Family Residential Standards regarding escapes/attempted escapes, hostage-taking, illness, death, fire, riots, traffic accidents, special needs, and other medical issues (e.g., emergency plans, terminal illness, advance directives, and death).

3.2 Case Management

Although UAC are placed in the care and custody of ORR, ERO retains responsibility for immigration case management. Proper case management includes such activities as monitoring the status of immigration proceedings, and documenting case updates in the A-file. Once a UAC is transferred to ORR custody, his or her case is to be maintained on a separate juvenile docket until such time as ORR releases him or her to a sponsor. At that time, the case may be transferred to a non-detained docket. The case should be managed on a separate juvenile non-detained docket.

3.2.1 Book-In Procedures

FOJCs, or assigned officers, must immediately book each UAC into the ENFORCE Alien Detention Module (EADM) upon that UAC's transfer into ERO custody (including the custody of ICE transportation contractors). In the event that operational logistics prevent immediate EADM book-in, no more than four hours may elapse without recording the time in ERO custody. All UAC book-ins must record the actual day and time in custody to account for a proper detention record. FOJCs, or assigned officers, must also ensure that the "transfer to Docket Control Office (DCO) is changed to the location where the UAC is being transferred and that the "book-out comments" indicate the exact location of the transfer. Transferring

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FOJCs must notify the receiving FOJC via email of the transfer, to avoid "hanging transfers" in the EADM system.[30]

3.2.2 Book-Out Procedures

Upon receiving notification from ORR that a UAC will be released to a sponsor:

- (b)(7)(E)
- (b)(7)(E)
- After the record has been updated, verify that all other biographical information is correct, including the individual's "Person Details"—name and date of birth. Update case comments to reflect current case information. Then proceed to EADM to book subject out on an "Order of Recognizance" (OREC).
- (b)(7)(E)



Reference Enforce Alien Detention Module (EADM) Section 6 on page 17.

[30] Broadcast: Unaccompanied Alien Children (UAC) Book-ins, Department of Homeland Security, Immigration and Customs Enforcement, Office of Enforcement and Removal Operations, July 23, 2015.
[31] Broadcast: UAC Shelter Book Out Procedures, Department of Homeland Security, Immigration and Customs Enforcement, Office of Enforcement and Removal Operations, March 21, 2015.

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3.2.3 Alien File Process

A-files will remain with the FOJC located in the AOR of the child's first ORR designation. The FOJC will retain docket control over each A-file regardless of any subsequent transfer of the UAC to a second AOR, or until one of the following occurs:

- UAC makes a request for an expedited immigration court hearing;
- UAC is released to a sponsor; or
- UAC is in ORR custody for 60 days.[32]

Once one of the above conditions is met, the A-file must be sent via next day air to the appropriate AOR of the child's release or where the child currently resides.

Different procedures are applied to UAC under the age of 14 who are transferred to a new ORR facility. In these cases, the A-file should be sent to the new AOR FOJC within 10 days of the ORR transfer, regardless if transfer occurs prior to the 60 day mark.[33]

UAC A-files will be maintained and transferred in accordance with the most recent ERO-approved UAC A-file Process, available on the JFRMU intranet site.

3.24 Reviewing Charging Documents

UAC not allowed to withdraw an application for admission into the United States will be placed in § 240 proceedings. (For limited exceptions, refer to the TVPRA.) When accepting custody of a UAC from an outside agency, verify A-file(s) for issued and served charging documents. Form I-213 should be contained in the A-file for proper processing, and should include:

- Alienage and removability (including notation of documents, if any, provided by UAC to establish alienage, i.e. birth certificate, passport):
  - Country of birth;
  - Country of citizenship;
  - Date of entry;
  - Port of entry; and
  - Manner of entry.
- Signature of issuing officer;
- Designation as UAC;
- Notation of other family members and their A-numbers (i.e. UAC traveling with their own children, UAC siblings);
- Location of immediate family with contact information (if possible);
- Location of intended parties or destination in the United States;

[32] "Unaccompanied Alien Children (UAC) A-File Process"
[33] Service of the Notice to Appear (NTA) on Unaccompanied Alien Children (UAC), August 22, 2016.

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- Length of time in transit to the United States;
- Financial support or monies on person;
- Medical issues (e.g., medications, pregnancy, medically issued items [walker, shoes, prescribed glasses]);
- Mental health (e.g., medications, behavioral, monitoring requirements);
- Notation of special needs (e.g., dialect, language barrier, age, vulnerabilities);
- Notation if family contact was made and duration of the call;
- Notation if consulate/attorney contact was made and duration of the call;
  - Consulate contact required for mandatory notification countries; for all other cases, consulate notification is available upon request and local agreement.

While interviewing a UAC received from another Federal agency or DHS component, and encountering new information that is necessary to include in Form I-213, add to the bottom of the current Form I-213 as an addendum/addition in order to maintain the integrity of the initial encounter record. Do not remove or change the other component's narrative.

The I-862 NTA should also be contained in the A-file for proper processing. Verify the following:

- Name and alias(es) are included on NTA;
- A-number is accurate and comports with number listed elsewhere in/on A-file;
- The UAC's address corresponds with the placement location:
  - File an I-830 (Notice to EOIR: Alien Address) to correct the address if this is the only error;
  - If local EOIR does not accept an I-830 with initial filing, an NTA may have to be superseded by ERO to place correct address;
- Certificate of Service is signed by UAC (older than 14 years of age):



Once an AOR no longer needs an A-file, the A-file should be transferred to the receiving office; other DCO, Records, NRC, or USCIS. Follow the local best practices.

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- If younger than 14 years, NTA should read: "Served on conservator";
- It may be necessary to serve the NTA on the conservator for UAC older than 14 years of age if his or her comprehension level is insufficient or the child is developmentally delayed;

- Allegations should concur with the local OCC legal sufficiency.

The A-file also requires the following additional documentation:

- I-770 Notice of Rights and Request for Disposition (this form is in lieu of an I-826 Notice of Rights issued to adults);
- I-200 Warrant of Arrest;
- I-286 Notification to Alien of Custody/Conditions of Release;
- I-217 Information for Travel Document (other than Mexican (OTM) cases);
- List of Legal Services;
- Form CBP-93--UAC Screening Addendum, if applicable;
- Orantes advisals notification, if applicable.

If the UAC is apprehended at the POE:

- Depending on the ERO field office location and local agreements with CBP/OFO, encounters with UAC may vary. Local arrangements may include UAC taken directly to ORR placement from CBP, therefore A-file verification may be challenging.

The NTA packet should have two copies with the original signed documents in the A-file. The A-file should be created by USCIS (Records Dept.), if available, in the local field office. Ensure the following steps are taken:

- Assign the UAC to the appropriate juvenile docket;
- Ensure each UAC is booked into the correct "detention" location;
- Ensure your DCO has a "DET LOC" (drop down for all of your ORR facilities);
- Update all Actions and Decisions, as well as Case Category;
  - Charging documents filed with EOIR;
  - Change of Venues (COV) (I-830 if necessary);
- Final Orders: Voluntary Departure/Removal/Proceedings Terminated;
- Call-Ups;
  - Status of case: Hearing Pending/COV Pending/Pending Travel Documents (TD);
  - All relevant information for anyone reviewing the case;
- Comments;
  - Identify juvenile at an adult detention facility;
  - Age out/ adult verification from ORR;
  - Attorney/family contacted ERO;
  - Release to sponsor—name and address;

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- Escape/AWOL details: provide Police Department (PD) contact info;
- Any additional information that will aid future review;

- Ensure proper Book-in and Book-out;
  - "Release/Transfer";
  - "Final Order";
  - "Final Orders: VD/Removal/Proceedings Terminated."

3.2.5 Docket Management

It is important that FOJCs conduct proper Docket Management, as seen in Table 1.

TABLE 1: RESPONSIBILITIES OF PROPER DOCKET MANAGEMENT

COORDINATE	VERIFY	RESPOND	COMPLETE
• With FOJCs at receiving AORs when receiving and/or sending A-files. • With ORR facilities during custody transfers of UAC. • ORR shelter site visits with ORR program managers, as needed. • With consulates for travel documents and repatriation efforts.	• All UAC in ORR shelters in the AOR are properly booked-in and out of EADM. • All required documents and case actions are complete in A-file.	• To inquiries from the consulates in regard to UAC. • To parents', legal guardians', or legal representatives' inquiries regarding UAC. • To requests from case workers, program managers, or ORR staff.	• And create case call-ups for all required actions (e.g., hearing updates, travel documents, age outs). • Forwarding of all A-files for transferred UAC to the receiving FOJC immediately by express mail. • Maintenance of case management of juveniles in EARM and if necessary, transfer the case to a detained or non-detained docket. • Custody redetermination and case review when necessary.

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3.3 Age-Outs

3.3.1 ICE Custody

The Violence Against Women Reauthorization Act of 2013 directs that UAC aging out of ORR custody on their 18th birthday ("age out") be placed in the least restrictive setting available, taking into account the UAC's danger to self, danger to community, and risk of flight.[34]

- The FOD may consider releasing the age-out to an organizational sponsor, a supervised group home, or foster care.

To ensure compliance with VAWA, JFRMU will begin tracking the custodial disposition of UAC in ORR care who reach their 18th birthday of ORR care and are referred back to ICE for custody determinations as adults. Each field office must report these data to JFRMU on a monthly basis.

The recent reauthorization of VAWA, specifically § 1261, includes language pertaining to minors who reach the age of 18 while in the custody of ORR. This language requires ICE consider least restrictive settings when making custody determinations of this group. Determinations should be made considering the circumstances of each individual case. This unique population of aliens may also be eligible to participate in the ATD programs based on the alien's need for supervision.

For minors in ICE custody who have not yet been turned over to the custody of ORR when an "age out" occurs, the FOJC has several options with regard to custodial placement.

- The alien (now adult) can be transferred to adult ICE detention, depending on whether the individual's continued detention meets the current agency enforcement and detention guidelines.
- Because a change in circumstances occurs, ICE can make a custody redetermination in the alien's case, and release under an order of recognizance, release under ATD, or release upon the payment of a custody bond.
- The subject may be reprocessed (as long as they are not yet in removal proceedings) for expedited removal, voluntary return, or stipulated order of removal, and removed from the United States, under advise of local OCC, supervisory officers, and the request of the alien.

3.3.2 Post-18 Plans

The ORR facility case workers will attempt to seek reunification with a sponsor residing in the United States. At times ORR is unable to complete the process prior to the UAC reaching his or her 18th

[34] The Violence Against Women Reauthorization Act of 2013, Pub. L. No. 113-4 § 1261, Subtitle D Unaccompanied Alien Children, § 1261, March 7, 2013.

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birthday. Although the juvenile will no longer qualify to remain with ORR when they turn 18 years of age, the case workers may continue to identify potential organizations to care for him or her in the event they are eligible for release from ICE custody. ORR is required notify the FOJC when there is an age-out so the alien can return to ERO for custody determination. As a best practice a post-18 plan, also known as a recommendation of release, is submitted by the case worker or Federal Field Specialist (FFS) to the FOJC.

A post-18 plan will be submitted to the FOJC at least two weeks prior to the UAC reaching his or her 18th birthday in order to give time to review the plan and determine custody. The following entities may provide a statement for recommendation of release:

- Letter from ORR shelter staff (case worker or program manager);
- ORR Federal Facility Specialist;
- Attorney of Record;
- Sponsor/Organization.

The documents collectively will provide a summary of cooperation while in ORR care, and the commitment to appear at all immigration proceedings and abide by all local, state, and federal laws while on release.

When reviewing these documents, consider the VAWA as it reads:

> *If a juvenile reaches their 18 years of age while in HHS/ORR custody and is transferred back to the custody of the ICE/ERO, the Secretary shall consider placement in the least restrictive setting available after taking into account the alien's danger to self, danger to the community, and the risk of flight. Such aliens shall be eligible to participate in alternatives to detention programs, utilizing a continuum of alternatives based on the alien's need for supervision, which may include placement of the alien with an individual or an organizational sponsor, or in a supervised group home.*

Based on the totality of all the information and in order to make all appropriate notifications (e.g., OCC, EOIR) in a timely manner, a custody determination should be made prior to transfer back to ICE custody.

3.4 Removals and Returns

In accordance with the TVPRA, repatriation will be effected at no cost to the child. Associated costs will be borne by ERO, which will coordinate and arrange all travel plans with the UAC, consulate, ORR shelter (if any), UAC's sponsor, and family in home country.

ERO is obligated to provide a safe and supervised return of UAC. When an IJ issues a final order of removal or grants voluntary departure, follow standard removal procedures.

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ERO's priority is to preserve family unity during repatriation. To best preserve family unity while protecting children:

- Verify kinship with the consulate to safeguard minors from smugglers or other threats before repatriation;
- Coordinate with each consulate to verify citizenship before transporting a family to the country of origin;
- Prior to transporting a UAC or family unit to the land border, verify with the local FOJC the established hours of operation for receiving UAC or family units. Minors and females have special limitations on when (time of day) they are able to cross from the United States.

Minors must be repatriated under additional safeguards, including:

- Allowing the UAC to communicate with a consular official before departure;
- Upon arrival at the destination, the receiving official acknowledging the custody transfer by signing the I-216;
- Forwarding the signed I-216 to the originating FOJC to update their records;
- Per ERO policy, returning each UAC in the appropriate outerwear for the current climate conditions.[35]

Most UAC repatriations occur via commercial air, with two escort officers assigned to one UAC and an additional officer assigned for subsequent groups of five or more. When the transport includes both males and female UAC, the escort must include officers of each gender whenever possible.

In some cases, the receiving country of nationality or citizenship may request to escort the UAC on a return flight. These types of escorts may be granted on a case-by-case basis.

- For repatriation requirements specific to Mexico, including the daylight hours during which custody transfers may occur, see your "Local Arrangement for Repatriation of Mexican Nationals or Memorandum of Understanding" and the ICE Air Operations Handbook.
- Consult with Removal and International Operations for guidance on repatriations to El Salvador, Honduras, or Guatemala.

Current policies regarding repatriation are outlined in the TVPRA, "Local Repatriation Agreements", and the "April 2008 Repatriation and Custody Transfer of UAC in ICE to Foreign Officials Policy".

[35] Field Guidance for the William Wilberforce Trafficking Victims Protection Reauthorization Act of 2008 (TVPRA) & Violence Against Women Reauthorization Act of 2013 (VAWA), § F, Department of Homeland Security, Immigration and Customs Enforcement, Office of Enforcement and Removal Operations, January 13, 2016.

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The following list of established requirements is derived from ERO policies:

- Return the UAC only during daylight hours (local agreements are in effect for each receiving government authority);
- Return the UAC through a port designated for repatriation; and
- Provide the UAC the opportunity to communicate with a consular official prior to departure for the home country, preserving the unity of families during removal.

All escorting officers removing UAC to a country of origin are required to have the receiving government official or designee sign Form I-216, indicating the safe transfer of custody for all UAC listed. Once the appropriate foreign government official or designee signs the form, the I-216 will serve to document the safe repatriation and transfer to a government authority for all UAC listed. A copy of this form will be placed in the UAC's A-files after the officer/agent returns to their field office or forwarded to the A-file controlling office.

Should the foreign government official or designee refuse to sign Form I-216, the officer/agent will document the official's name (if known), date, time, and port, and will note the refusal. A copy of this form will be placed in the UAC's A-files after the officer/agent returns to their field office, or forward it to office controlling the A-file.[36]

When a UAC has been issued a Voluntary Departure or Removal Order, the coordination of repatriation will begin with updating the case category. For each type of repatriation, steps are outlined below.

Consulate Travel Document Request:



ICE will incur all travel expenses for UAC, regardless of the type of order issued by an IJ.

[36] Repatriation and Custody Transfer of UAC in ICE Custody to Foreign Government Officials, Policy 110491, Department of Homeland Security, Immigration and Customs Enforcement, Office of Enforcement and Removal Operations, April 17, 2008.

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- Submit via eTD;
- ORR can facilitate the interview;
  - Notify ERO when travel document can be picked up.

Local Repatriation:

- Consulate notification;
- Transportation Arrangements;
- Repatriation must take place within regular business hours;
- Place copy of I-216 in A-file.

International Repatriation:

- Request escorting officer;
  - Ensure at least one officer is the same gender.
- Coordinate with Omega for itinerary;
- Submit Threat Assessment to HQ Travel Unit (submit assessment 10 business days prior to the transport);
  - Risk assessment;
  - Flight itinerary;
  - Threat assessment;
- HQ Removal Unit will provide the country clearance notification;
- Coordinate with consulate and/or legal representative so family in home country can be contacted;
- Have a consular/government official sign for juvenile and upon return, place copy of I-216 in A-file.



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ICE Air Charter flights:

- Check for charter flights going to the country to which the UAC has been ordered removed. Consult the Travel Document Unit for any needed assistance. There is a local unit within each AOR responsible for coordinating ICE Air Charter flights.

Prior to executing a removal order, ERO will coordinate fully with the appropriate agencies, foreign officials, and attachés (if applicable).

Refer to the Field Manual: *Enforcement Standard Pertaining to Escorting of Aliens* and the *ICE Air Operations Handbook* for further inquiry on escorts. As each field office differs on best practices, follow the respective local process as well.

3.5 Specific Case Scenarios

3.5.1 Law Enforcement Agency Referrals

On occasion, a local law enforcement agency (LEA) may contact a FOJC to request that a detainer be placed on a juvenile in its custody.

Runaways: If the juvenile is a runaway from an ORR facility, the FOJC should alert ORR Intakes to designate a new secured facility placement, if the subject still meets the definition of a UAC. The FOJC will need to coordinate with the transportation unit to have the UAC transferred to ORR custody.

Minors with Criminality: If the referral is from an officer at a juvenile detention facility, the FOJC should refer the case to the Criminal Alien Program Unit so they can conduct an interview and

NOTE

It is important to maintain positive liaison with the consulates in your AOR because they also work with your ORR facilities in verifying their respective nationals, conducting interviews, and at times they may even provide further assistance when repatriation notification has been given.

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place a detainer, if necessary.

Non-Arrested Minors: If the FOJC is contacted by a LEO to pick up a juvenile who was encountered in the field and is believed to be a foreign national, but not formally charged with any crime, the FOJC should check to see if the juvenile is removable from the United States. If the juvenile is removable from the United States, even in the absence of a criminal charge, ICE can take custody of the juvenile and refer to ORR if the minor is a UAC for placement housing. If the minor is not a UAC, the matter can be referred to JFRMU to find placement if the case meets the criteria laid out in the Flores Settlement agreement. If the juvenile is not deemed removable, refer the LEO to the consulate representative who can best assist with contacting family for reunification or locating an NGO as a potential sponsor. If these options cannot be pursued, refer the juvenile to the local Child Protective Services office so they can take custody of the juvenile.

3.5.2 Interior ERO Apprehensions

In some cases minors are apprehended within the United States interior through enforcement actions on the part of ICE or by other federal, state, or local agencies. During enforcement actions, once immigration status is determined, FOJCs will be responsible for ensuring bed space is requested within established protocols for both UAC and accompanied minors. Depending on the arresting agency, ICE will make sure the minor is processed and transported to the appropriate placement, if necessary once space has been designated.

Fugitive Operations teams must notify the appropriate FOJC when preparing for a potential minor apprehension. During such apprehensions, the FOJC must:

- Determine whether the juvenile is accompanied[37] or unaccompanied;
- Seek contact information for a parent or guardian (if not present at the juvenile's apprehension);
- Provide the family with contact information so the family can contact the FOJC regarding the juvenile's immigration and detention status;
- Obtain any medications currently prescribed to the juvenile and ensure any medical concerns expressed by the juvenile are addressed appropriately.

Fugitive Operations teams are responsible for fully processing and serving all charging documents. Both the FOJC and ERO officers are responsible for ensuring the juvenile is processed in accordance with TVPRA and/or Flores guidelines. If the juvenile is determined

[37] Field Offices must receive JFRMU approval before taking an accompanied juvenile into custody as required by *Flores*.

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to be a UAC, the FOJC must contact ORR to request shelter placement.[38]

3.5.3 UAC with Convictions

All minors who meet the UAC criteria are to be referred to ORR for placement.[39]

When referring a UAC with a conviction for ORR placement:

- Include the UAC's criminal history on the ORR Placement Referral Form. Include all arrests and convictions, delinquency findings, including charges that were dismissed and arrests without a disposition.
- Provide relevant agency (e.g., probation office) point of contact information with ORR to enable ORR to follow up when necessary.

NOTE

The field operations worksheet must be approved by a supervisor in concurrence with enforcement priorities.

3.5.4 Sponsorship Breakdown after ORR Release

Sometimes sponsorship breaks down once ORR releases a child from its care. ERO may be made aware of these situations by the sponsor themselves, the UAC, local law enforcement, and/or local child protection agencies. When ERO becomes aware of a case involving a sponsorship breakdown, immediately contact ORR for assistance. ORR may require a new referral (submitted through their Portal) from a federal agency prior to again taking custody of the UAC. In some instances, particularly when a child's safety may be at risk, the local ERO office may, at the discretion of the FOD, assist and re-refer the child to ORR care. With FOD approval, the FOJC may arrange to transport the UAC from their current location to a newly designated ORR shelter.

NOTE

ORR may request additional information that cannot be found in the NCIC criminal history. If this happens, respond to ORR to assist in placing UAC in the appropriate facility placement type.

[38] Enforcement and Removal Operations: Fugitive Operations Handbook, July 23, 2014.

[39] Field Guidance for the William Wilberforce Trafficking Victims Protection Reauthorization Act of 2008 (TVPRA) & Violence Against Women Reauthorization Act of 2013 (VAWA), § A-D, Department of Homeland Security, Immigration and Customs Enforcement, Office of Enforcement and Removal Operations, January 13, 2016.

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Should sufficient resources not be available to assist, or when the child's safety is not in imminent danger, the FOJC may:

- Recommend that the sponsor refer the UAC to local CPS;
- Contact the respective consulate to identify an NGO willing to sponsor the UAC;
- Recommend that the sponsor contact local authorities if the sponsor thinks they or the UAC are in danger;
- Advise the current sponsor to notify the court of the change so that the IJ is aware of the situation;
- Notify the OCC trial attorney of the sponsorship breakdown prior to the next EOIR hearing; and
- Note the issue in the EARM comments section for future reference.

When the FOJC becomes aware that a child's safety is at risk and ICE declines to intervene directly as described above, the FOJC must contact local child welfare authorities and/or local law enforcement authorities.

3.5.5 Non-UAC Minors with Status

A legal permanent resident (LPR) juvenile may not be taken into ICE custody unless they have been convicted of a crime as an adult that makes them removable from the United States. If an LPR juvenile has been convicted of crime as an adult that makes him or her removable, he or she may be housed at a JFRMU-inspected and -approved juvenile facility. To house an LPR juvenile who has been deemed removable from the United States at an approved facility, the FOD and JFRMU must review and approve the case.



If a juvenile has *any* legal status in the United States, he or she is not considered a UAC.*

* Field Guidance for the William Wilberforce Trafficking Victims Protection Reauthorization Act of 2008 (TVPRA) & Violence Against Women Reauthorization Act of 2013 (VAWA), § A, Department of Homeland Security, Immigration and Customs Enforcement, Office of Enforcement and Removal Operations, January 13, 2016.

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3.5.6 Accompanied Minors Who Are Delinquent or Are Chargeable As Delinquent

The *Flores* Agreement sets specific rules regarding the detention of accompanied minors. The criteria for secure custody are listed under paragraph 21 of the *Flores* Agreement:

A minor may be held in or transferred to a suitable State or county juvenile detention facility or a secure INS detention facility, or INS-contracted facility, having separate accommodations for minors, whenever the District Director or Chief Patrol Agent determines that the minor:

A. has been charged with, is chargeable, or has been convicted of a crime, or is the subject of delinquency proceedings, has been adjudicated delinquent, or is chargeable with a delinquent act; provided, however, that this provision shall not apply to any minor whose offense(s) fall(s) within either of the following categories:

i. Isolated offenses that (1) were not within a pattern or practice of criminal activity and (2) did not involve violence against a person or the use or carrying of a weapon (Examples: breaking and entering, vandalism, DUI, etc. This list is not exhaustive.);

ii. Petty offenses, which are not considered grounds for stricter means of detention in any case (Examples: shoplifting, joy riding, disturbing the peace, etc. This list is not exhaustive.);

As used in this paragraph, "chargeable" means that the INS has probable cause to believe that the individual has committed a specified offense;

B. has committed, or has made credible threats to commit, a violent or malicious act (whether directed at himself/herself or others) while in INS legal custody or while in the presence of an INS officer;

C. has engaged, while in a licensed program, in conduct that has proven to be unacceptably disruptive of the normal functioning of the licensed program in which he or she has been placed and removal is necessary to ensure the welfare of the minor or others, as determined by the staff of the licensed program (Examples: drug or alcohol abuse, stealing, fighting, intimidation of others, etc. This list is not exhaustive.);

D. is an escape-risk; or

E. must be held in a secure facility for his or her own safety,

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such as when the INS has reason to believe that a smuggler would abduct or coerce a particular minor to secure payment of smuggling fees.

In addition to those items listed in **Section 2.1 "The Flores Agreement"**, *Flores* advisals and Notice of Right to Judicial Review are required (See *Flores v. Lynch*, No. 15-56434, 828 F.3d 898 (9th Cir. Jul. 6, 2016)).

In all instances when ICE seeks to detain an accompanied minor under this provision, JFRMU guidance/concurrence is required.

Note: When authorized, and upon the minors placement in an ICE-approved over-72 hour facility, the FOJC retains case management responsibilities for that minor. In addition to A-file management responsibilities **(See Section 3.2.4 "Reviewing Charging Documents")** the FOJC must conduct regular and ongoing site visits of the facility to meet with the detained minor. These visits should occur no less than monthly but may be more frequent based on the specifics of each case. The FOJC should be available to answer any questions or concerns the minor might have and should ensure the minor has received a list of free or low-cost legal services and other locally available legal-orientation materials. The FOJC should engage with program staff to obtain information regarding the minor's conditions of detention and acclimation to the Center which include but are not limited to the minor's educational progress and information obtained through facility administered needs assessments and other screenings. The FOJC will update EARM case comments with relevant information as appropriate.

3.5.7 Non-UAC Minors and Notice of Rights to Bond Redetermination

A non-UAC in removal proceedings will be afforded a bond hearing before an IJ. The juvenile can indicate on the Notice of Custody Determination that he or she refuses the hearing. The juvenile has the right to change his or her mind after issuance to seek a bond.

3.5.8 Emancipated Minors

Juvenile emancipation is a legal mechanism by which a juvenile is freed from parental or guardian control. In many instances, emancipated minors are considered adults in the eyes of the law but this varies from state-to-state. For immigration purposes, ICE should consider all individuals under the age of 18 as a juvenile for custody purposes.

There are no exceptions to the statutory definition of UAC for emancipated minors under age. If a juvenile qualifies as a UAC under the definition of a UAC, ORR is responsible for the care and custody of the UAC and the emancipated juvenile UAC should be

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treated as a UAC and transferred to ORR within 72 hours.

3.5.9 Married UAC

A juvenile can be married and therefore emancipated before turning 18. In this situation, the married juvenile UAC should be treated as a UAC for care and custody purposes because they still meet the statutory definition.

There are no exceptions for married minors under the UAC definition. If a juvenile qualifies as a UAC under the definition of a UAC, ORR is responsible for the care and custody of the UAC and the emancipated juvenile (UAC) should be treated as a UAC and transferred to ORR within 72 hours.

3.5.10 ORR Runaway Cases

If a UAC becomes a runaway and departs from an area without authorization, the agency with custody will immediately notify local law enforcement agencies. ICE will prepare and complete a Serious Incident Report (SIR) in all cases of UAC escapes, even when those escapes occur while in ORR care.

FOJCs must request an incident report number from a JFRMU National Juvenile Coordinator immediately upon learning of an ORR runaway. Within 24 hours of receiving ORR's formal SIR, the FOJC must return the ORR Runaway Worksheet and the ORR-generated SIR to the JFRMU mailbox at: JFRMU@ice.dhs.gov. The worksheet is available on the JFRMU Intranet site, subtopic "Guidance Documents".

- Each SIR must contain the A-number, height, weight, type of clothing, and direction of flight (if known);
- The FOJC will notify JFRMU and obtain an incident report number and complete the ORR Runaway Worksheet;
- The reporting FOJC will forward the completed Runaway Worksheet to JFRMU for tracking and statistical reporting;
- If a runaway is encountered by the local LEA, or self-surrenders to ORR, it will be a decision by ORR to determine the appropriate housing;
- If a UAC has a pending case with EOIR, OCC must be notified of all custody status changes for the UAC.

The FOJC will provide the SIR to OCC to file at the next hearing date if the UAC fails to appear so that OCC can request a hearing in absentia.

When notified of an ORR runaway, the FOJC will choose "ORR Runaway" from the drop-down menu of release-reasons. The release-reason "Escaped" applies only in the rare case of a UAC absconding before ERO has transferred custody to ORR.[40]

[40] Broadcast: Tracking ORR Runaway Cases, Department of Homeland Security, Immigration and Customs Enforcement.

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3.5.11 Deferred Action for Childhood Arrivals

All of the following criteria should be satisfied before an individual is considered for an exercise of prosecutorial discretion pursuant to "Deferred Action for Childhood Arrivals (DACA)":

- Entered the United States under the age of 16;
- Has continuously resided in the United States for at least five years preceding June 15, 2012, and was present in the United States on June 15, 2012;
- Is currently in school, has graduated from high school, has obtained a general education development certificate, or is an honorably discharged veteran of the Coast Guard or Armed Forces of the United States;
- Has not been convicted of: a felony offense; a significant misdemeanor offense; multiple misdemeanor offenses; or otherwise poses a threat to national security or public safety; and
- Was not over the age of 30 as of June 15, 2012.



See "ERO Deferred Action for Childhood Arrivals Checklist" for guidance arresting/removing individuals under the age of 31 as of June 15, 2012.*

* Deferred Action for Childhood Arrivals Checklist, Department of Homeland Security, Immigration and Customs Enforcement, Office of Enforcement and Removal Operations, August 8, 2013.

3.5.12 Juvenile Detainers under Secure Communities

Executive Order 13768, "Enhancing Public Safety in the Interior of the United States" (January 25, 2017), together with a memorandum issued February 20, 2017 by DHS Secretary Kelly entitled "Enforcement of the Immigration Laws to Serve the National Interest", expressly terminated the Priority Enforcement Program (PEP) and restored Secure Communities.

Under Secure Communities, ICE will seek the transfer of all removable aliens identified through the program, and will do so consistent with the priorities set forth in the Executive Order. Per Policy, ICE no longer limits the issuance of detainers to cases in which a removable alien falls within limited criminal or related categories. As made clear in the Executive Order, ICE will no longer exempt

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classes or categories of removable aliens from potential enforcement. Regardless of the basis of removability, Department personnel should prioritize removable aliens who: (1) have been convicted of any criminal offense; (2) have been charged with any criminal offense that has not been resolved; (3) have committed acts which constitute a chargeable criminal offense; (4) have engaged in fraud or willful misrepresentation in connection with any official matter before a governmental agency; (5) have abused any program related to receipt of public benefits; (6) are subject to a final order of removal but have not complied with their legal obligation to depart the United States; or (7) in the judgment of an immigration officer, otherwise pose a risk to public safety or national security.

Under Secure Communities, DHS will use Form I-247A- Immigration Detainer –Notice of Action. Pursuant to ICE Policy No. 10074.2: "Issuance of Immigration Detainers by ICE Immigration Officers", which became effective April 2, 2017, all detainers issued to removable aliens must be accompanied by: (1) Form I-200, Warrant for Arrest of Alien, signed by an authorized immigration officer; or (2) Form I-205, Warrant of Removal, signed by an authorized immigration officer.

Also effective April 2, 2017, DHS will no longer use Forms I-247D, I-247N, and I-247X.

Unaccompanied minors who fall within DHS enforcement priorities still must be transferred to ORR for care and custody. Seek JFRMU assistance in all cases.

3.5.13 Special Immigrant Juvenile Status

Special Immigrant Juvenile Status (SIJS) is one of the most common forms of legal relief available to UAC for legal permanent residence. UAC who have been abused, neglected, or abandoned by one or both parents may be eligible to apply for SIJS.

Previously, under the Homeland Security Act, minors seeking SIJS were required to obtain "specific consent" from ICE before related proceedings could begin. Under TVPRA 2008, SIJS-specific consent authority was transferred to ORR. These children cannot be reunited with a parent because of abuse, abandonment, neglect, or similar issues and the children cannot petition for green cards for their parents. Approval of an SIJS petition allows foreign national children to seek a green card once their priority date is current and there is a visa number available.[41]

[41] As of the July 2016 Department of State Visa Bulletin, there are still no visa numbers available for children from El Salvador, Guatemala, Honduras, and Mexico who didn't file their Form I-360 with USCIS prior to January 1, 2010. https://travel.state.gov/content/travel/en/legal/visa-law0/visa-bulletin/2016/visa-bulletin-for-july-2016.html

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Children who obtain LPR status may then petition for U.S. citizenship and eventually petition for a green card for their siblings. States must:

- Certify the child a ward of the state due to abuse, neglect, or abandonment; and
- Determine it is not in the child's best interest to return to their home country.



While the TVPRA defines a UAC as under the age of 18, individuals under the age of 21 may apply for SIJS status and adjustment of status based on the approved SIJS.

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4. FOJC Engagement with ERO Partners

JFRMU coordinates with CBP, ORR, and NGOs. Internally, JFRMU trains, monitors, and advises FOJCs, who serve as their field offices' subject-matter experts on juvenile and family matters. JFRMU develops trainings for FOJCs and issues national guidance on appropriate case management for children and families in ICE custody; and FOJCs in turn advise their field office colleagues in these matters. To be successful at their job, FOJCs must be proactive in developing effective working relationships with a number of parties to include the following:

4.1 ORR Intakes Staff

ORR Intakes comprises HHS personnel who provide placement designation for UAC who will be transferred to ORR custody. The ORR Intakes staff is located at ORR Headquarters. Communication with the Intakes staff can be completed primarily via the UAC Portal. If the UAC Portal is not available, direct correspondence to orrducs_intakes@acf.hhs.gov or contact via phone at 1-202-401-5709. Intakes staff will provide placement between the hours of 9:00 a.m. and 9:00 p.m. EST. After-hour placements are provided in emergency or tender-age situations.

ORR Intakes staff receives many placement requests each day from all over the nation. FOJCs must allow them adequate time to com-

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plete the placement request, but may initiate a follow-up call if circumstances require an urgent response.

4.2 Local ORR Case Workers

Once in ORR custody, each UAC is assigned a case worker who attempts to reunify the UAC with family in the United States (and in home country). FOJCs are reminded to maintain an ongoing and professional relationship with local case workers, particularly because FOJCs may need to contact them for case management purposes. Additionally, case workers may reach out to FOJCs in their AOR for general information regarding UAC in their care.

FOJCs may disclose all relevant information contained in EARM that may assist the case worker in conducting reunification, making bed space designations, and providing special care to the juvenile if needed.[42] Local case workers may inquire about what happens to a UAC when custody is transferred back to ICE custody and it is appropriate for the FOJC to explain local procedures and what is involved with the transfer.

4.3 Federal Field Specialists

A FFS is the ORR representative assigned to oversee all shelters within a specific region. The FFS will approve all referrals and discharges that require ICE coordination. The FOJC should coordinate site visits (monthly, quarterly, or as needed) for general Q&A with the minors, the FFS, and the shelter. Consistent communication will assist in developing a healthy working relationship and in understanding each other's roles and responsibilities. The FFS may be able to assist by providing ORR guidance in special cases. They can provide information regarding any issues that arise in ORR facilities within the AOR. The FFS can also serve as a liaison between FOJCs and the rest of shelter staff.

4.4 Office of the Principal Legal Advisor Attorneys

The Office of the Principal Legal Advisor's (OPLA) 900 attorneys represent the U.S. Government in exclusion, deportation, bond, and removal proceedings before the Department of Justice's (DOJ) EOIR. OPLA attorneys prioritize the litigation of removal hearings that involve criminal aliens, terrorists, and human rights abusers, as well as other priorities for enforcement.

OPLA serves as a key resource to JFRMU providing the following:

- Legal sufficiency review of NTAs;
- Advice regarding applicable statutes and regulations affecting UAC and families;

[42] James M. Chaparro, Sharing Information with the Department of Health and Human Services Office of Refugee Resettlement, Department of Homeland Security, Immigration and Customs Enforcement, Office of Enforcement and Removal Operations, November 30, 2010.

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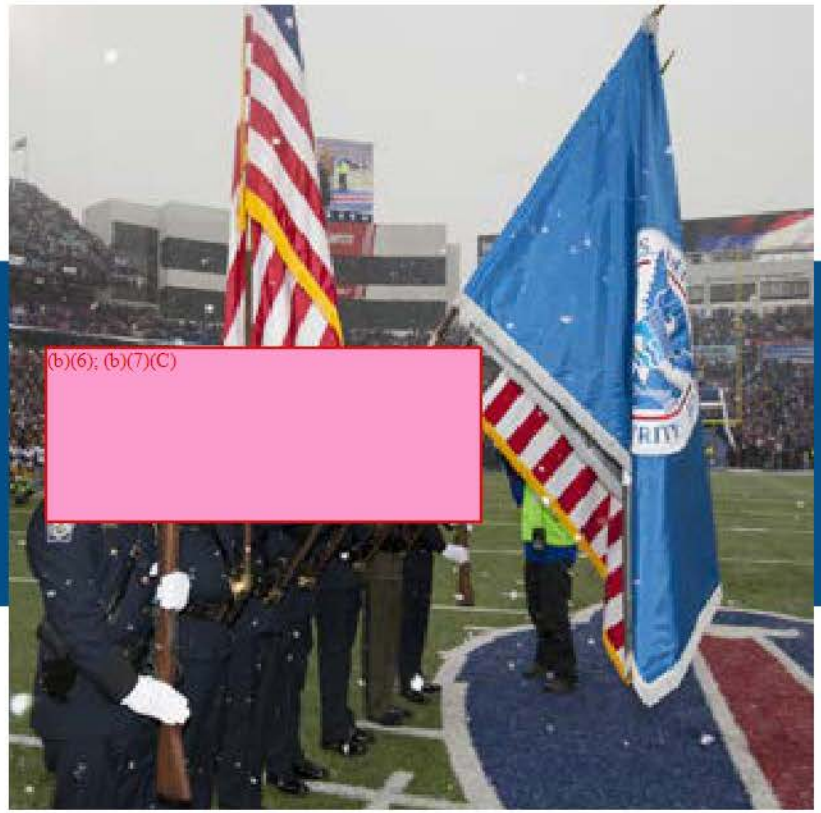
- Policy direction and specific policy changes;
- Points of contact for Congressional inquiries relating to UAC and family matters. Examples may include:
  - Trafficking Victims Protection Reauthorization Act;
  - Proposed legislation dealing with alien families and children;
  - Review of Congressional reports on repatriation of UAC and Government efforts to protect UAC from human trafficking;
  - Assistance with responses to foreign country inquiries concerning the effect of U.S. immigration laws on foreign-born children (e.g., repatriation);
  - Responses to inquiries from other departments (e.g., Department of State, DOJ, HHS) concerning the effect of U.S. immigration laws on foreign-born children;
  - Guidance to OCCs on how to handle issues that may have initially arisen locally, but trends exist where issues will have nationwide effect (e.g., if OCCs in New York, Dallas, and Boston are all seeing a specific issue, OPLA headquarters could issue guidance).

The OPLA designates OCC attorneys in each of the 24 field offices. OCC attorneys are points of contact. JFRMU should be contacted for assistance in determining a course of action regarding unique juvenile and family cases. All actions should concur with the respective AOR's chain of command and/or guidance from the field legal advisor, and OCC.

OCC also represents the government in immigration court proceedings for UAC and family hearings. OCC is responsible for reviewing and providing their opinion on issues regarding UAC and family cases including:

- Reviewing for legal sufficiency NTAs issued to UAC and families placed in immigration proceedings;
- Reviewing supporting evidence and documentation in proceedings before immigration court;
- Contacting the FOJC to get additional supporting evidence or serve required documentation (e.g., Notice to EOIR: Alien Address (Form I-830) if child was moved; NTA on conservator, etc.);
- Communicating with ORR during court proceedings to determine best outcomes or alternative solutions;
- Evaluating UAC's or families' requests for benefits and/or relief (e.g., SIJS) that arise in immigration proceedings;
- Providing information to the IJ during immigration court proceedings and to the Board of Immigration Appeals when an IJ's decision is appealed.

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5. External Relations

5.1 Non-Governmental Organizations

The NGO community has provided supplies for minors and families being transported by ERO. The NGO community has also assisted in finding sponsors for families without places of residence. Occasionally an NGO may ask a FOJC for points of contact in other groups or organizations. For example, a FOJC may be asked to provide the contact information for a consular officer who can interview a juvenile in ORR custody. This type of information sharing is appropriate and often very much appreciated. FOJCs are reminded not to provide any law-enforcement-sensitive information to NGOs.

Establishing relationships within the NGO community allows FOJCs to seek assistance on behalf of minors and families that come into ERO custody. FOJCs should spend time and effort developing these relationships, as a means of understanding the NGO's unique roles and interests. It is highly recommended that FOJCs attend stakeholder meetings with NGOs in order to become familiar with existing programs in the AOR. Attending stakeholder meetings allow FOJCs to raise awareness of ERO's responsibilities and roles in the case management of UAC and families.

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5.2 Consulates

During the case management of a UAC, consulates should be contacted at the following times:

- When a UAC is encountered.
- When a UAC is placed with ORR; the case worker will contact the consulate for identity verification.

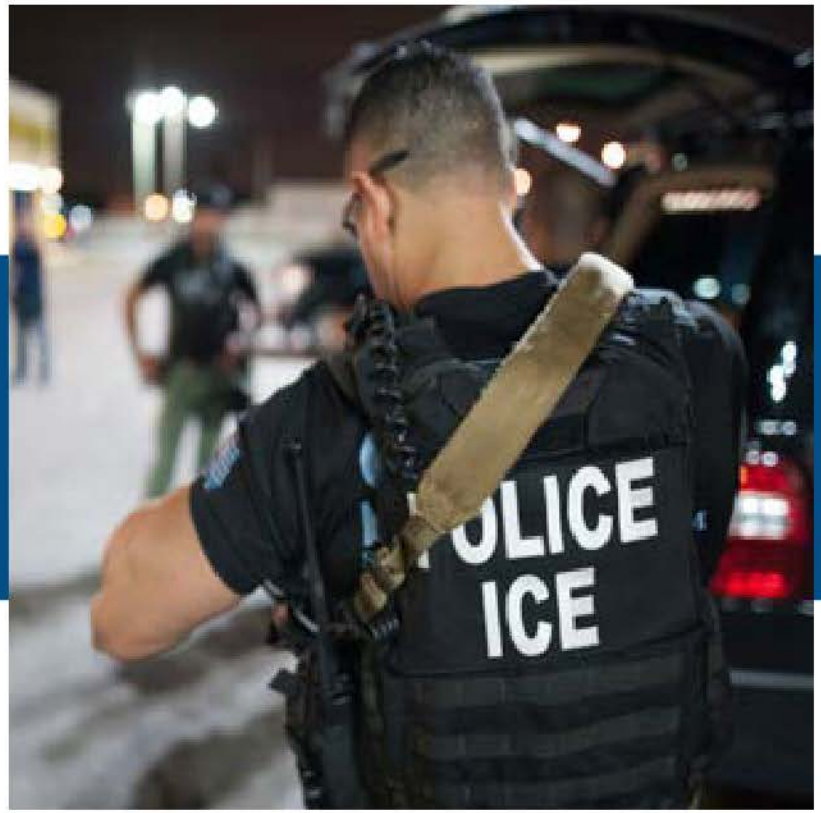
It is a combined interest for both ERO and ORR to work closely with the consulates because they can provide name and age verification as well as assistance in furthering the case processing. Working closely with the local consulate offices allows FOJCs to obtain travel documents and repatriate UAC to their home countries quickly and efficiently.

The FOJC should also work with the consulates in their inquiries regarding: missing minors; kidnapping victims; and victims of abuse--as long as that assistance does not conflict with privacy concerns posed by asylum regulations, T, U, or VAWA applicants, or other ICE policies.



These meetings are not intended as outlets for responding to concerns raised by NGOs.

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6. Family Units

6.1 Family Intake Guidance and Procedures

If a family unit is apprehended by CBP and detained, the family unit should be transferred to ERO custody. Prior to ERO accepting custody of a family unit, ERO must ensure that every family member has been processed and one of the following charging documents has been issued:

- I-862 Notice to Appear or;
- I-860 Notice and Order of Expedited Removal or;
- I-871 Notice of Intent/Decision to Reinstate Prior Order or;
- I-863 Referral to the Immigration Judge (in lieu of NTA-Visa Waiver) issued/served.
- M444 Credible Fear referral;
- I-867A & B Sworn Statement;
- IDENT/Fingerprint (over 14 years old);
- *Flores* Exhibit 6, Notice of Right to Judicial Review (for minors);
- Orantes advisals notification, if applicable;
- FBI Number issued (over 14 years old).

ERO can seek an emergency asylum interview at their local asylum office; depending on local agreements or the volume of pending interviews, the interview may not take place within 72 hours. Family units from visa waiver countries do not require an asylum referral,

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because the apprehending component has already issued an I-863.

6.2 Family Residential Center Intakes

When a family unit is detained, the ERO office with custody of the family unit can request placement at one of ICE's Family Residential Centers. Before submitting the request for placement, the FOJC should ensure that the family unit comprises at least one juvenile and an adult parent or legal guardian. An individual claiming legal guardianship must have legal documentation to prove the relationship. If in doubt, please consult with local management.

The FOJC should ensure that no member of the family unit has a criminal record or record of juvenile delinquency. (b)(7)(E) (b)(7)(E) cases. It is imperative that medical conditions (including pregnancy) are disclosed on the intake form. This information will help to expedite the approval process.

NOTE

Check out the Operational Process for Family Units (FAMU) Flowchart on the JFRMU intranet page.

The family unit placement request must include:

- Intake Admission Form (one form for each family member);
- I-213;
- Medical clearance (if needed).

6.3 Temporary Housing of FAMU

Hotels can sometimes be used as temporary housing for family units until family residential placement is determined. FOJCs should ensure that (b)(7)(E) (b)(7)(E) detailed with the family unit. Field offices may have local arrangements

AMERICAN OVERSIGHT

or modifications that differ from these guidelines. Refer to your Contracting Officer Representative (COR) if your field office does not have local hotel agreements and/or if a hotel is feasible. FOJCs are reminded to ensure local practices do not conflict with ICE policy.

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7. Reporting Requirements

JFRMU established various reporting requirements for FOJCs to monitor both the success at which ICE meets operational requirements specific to the UAC population, as well as to track data quality and integrity. Currently FOJCs are required to submit the following reports to the JFRMU mailbox (JFRMU@ice.dhs.gov).

7.1 Daily UAC Workload Reporting

UAC represent one of the most vulnerable populations that DHS encounters. In accordance with the TVPRA, ICE is responsible for transporting most of these UAC to the care of the ORR within 72 hours. ICE Headquarters requires daily reporting of UAC apprehensions, referrals, and transfers. To comply with this requirement each ERO field office must report the below information to JFRMU daily via email:

- Number of UAC apprehensions referred to ORR;
- Number of UAC *pending* placement by ORR;
- Number of UAC *designated* placement by ORR;
- Number of UAC transports conducted in the past 24 hours (broken out by charter, commercial air, ground—separated by ERO and CBP);
- Breakdown by length of time UAC awaiting transfer to ORR (by age);
- Number of UAC a FOJC is preparing for transport within the

AMERICAN OVERSIGHT

next 24–48 hours;
- Number of UAC placed by CBP.

7.2 "Hanging Transfers" Reporting

JFMRU uses the ERO Hanging Transfers Report to monitor proper case management practices and record appropriate time in custody. Each AOR should review the Hanging Transfer Report and accept the transfer on the actual transfer date. If the transfer was completed in error, the AOR should notify the transferring FOJC to correct EADM by deleting the last book out location and updating it to reflect the appropriate release type. All UAC released to a sponsor should be booked out of EADM on the date released by the ORR as indicated on the ORR discharge form.

7.3 Monthly Flores Agreement Reporting

According to the terms of the Flores Settlement Agreement, ICE must submit a Flores Violation Report to the DOJ on a monthly basis. The report must include a list of those juveniles who spent more than 72 hours in ICE custody. The report must include the following information for each individual *Flores* violation:
- Biographical information;
- Detention location;
- Reason a minor was held in custody for longer than 72 hours.

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U.S. Immigration and Customs Enforcement

Domestic Transport

March 6, 2018

AMERICAN OVERSIGHT

DHS-19-0195-B, 19-0494-B, 19-0495-B-000196
2019-ICLI-00054 656

Presenters

U.S. Immigration and Customs Enforcement





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Session Objectives

U.S. Immigration and Customs Enforcement

1. Summarize the process, key activities, and laws and regulations relating to the domestic escort of UAC & FAMU

2. Describe the role the Transportation Contractor MVM plays in the work of domestic transportation.

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Agenda

U.S. Immigration and Customs Enforcement

- Background
- Laws and Regulations
- Custody Transfer Process
- Transportation Key Activities
- ICE/ERO HQ JFRMU Transportation Contract, MVM Inc.
- Repatriation
- Docket Management

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Background

U.S. Immigration and Customs Enforcement

- The surge in apprehension of UAC began in 2012
- The annual influx of UAC across the southwest U.S border, dramatically increased in 2014.
- Challenged existed in processing, transporting and sheltering.
- On June 2, 2014, the President directed the Secretary of Homeland Security to establish an interagency Unified Coordination Group (UCG) to ensure unity of efforts.
- Officers/Agents initiated transport but due to the overwhelming numbers and lack of availability of commercial seating in the RGV area.
- Houston Unaccompanied Children Staging Initiative.
- ICE/ERO HQ JFRMU Transportation Contract MVM.

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Background: MVM Timeline

U.S. Immigration and Customs Enforcement

September 30, 2014: MVM is awarded the UAC transportation contract.

February 16, 2015: MVM opens office in McAllen; conducts unarmed long-distance escorts in Rio Grande Valley (RGV)

July 27, 2015: MVM opens sub-office in San Antonio, supplementing ground transport with long-distance commercial air travel.

December 2015: MVM assists El Paso, Phoenix, and San Diego AORs.

February 2016: MVM assisted with accompanied children as a FAMU from SND, PHO, and ELP to FRC's

May 2016: MVM opens sub-office in Phoenix

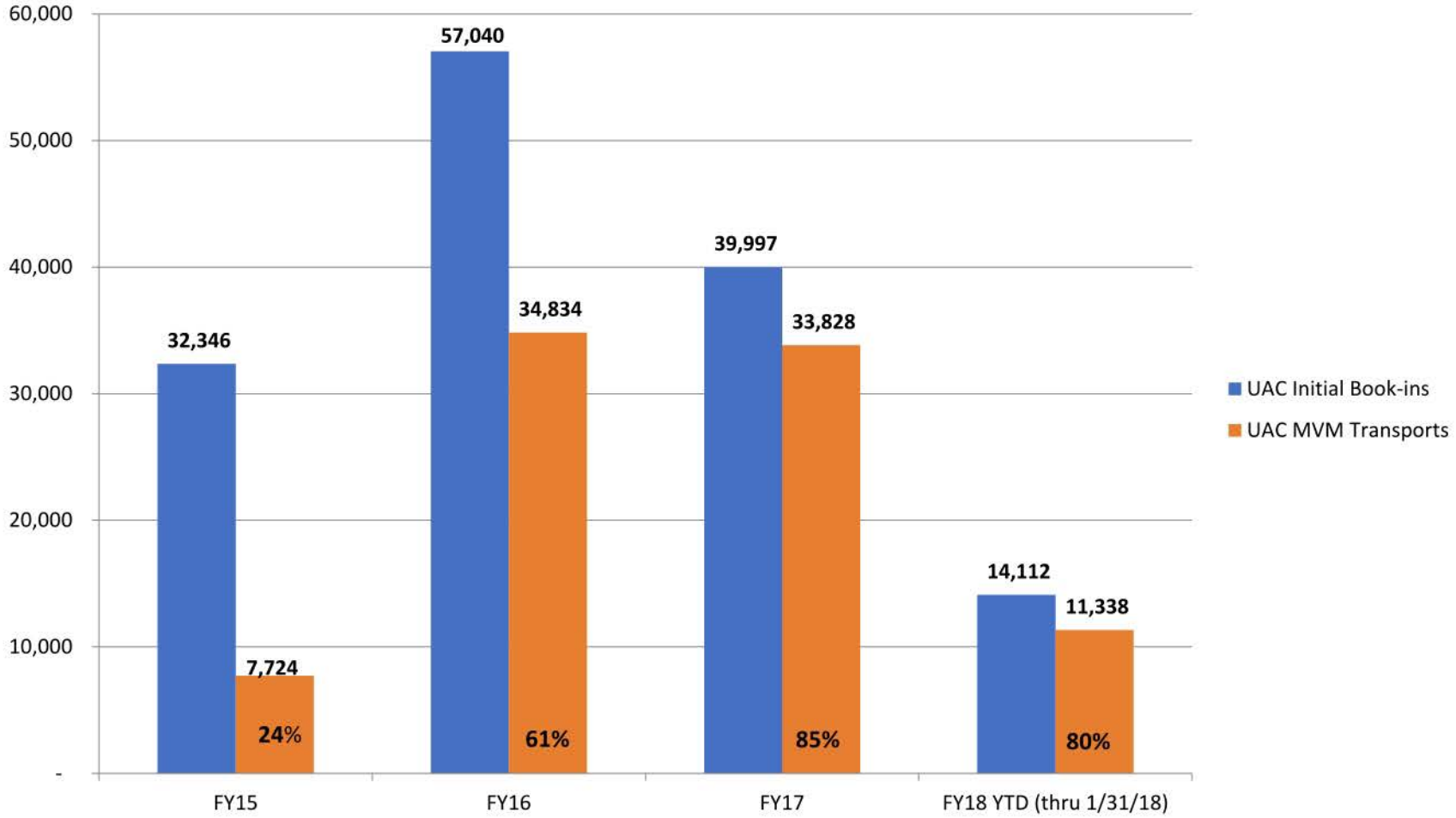
August 2016: JFRMU extended this service to all ERO field offices where now MVM transports UAC and FAMU to their respective shelter or FRCs through the U.S

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Background/ Program Statistics

U.S. Immigration and Customs Enforcement

FY Count of UAC Initial Book-ins vs. UAC MVM Transports

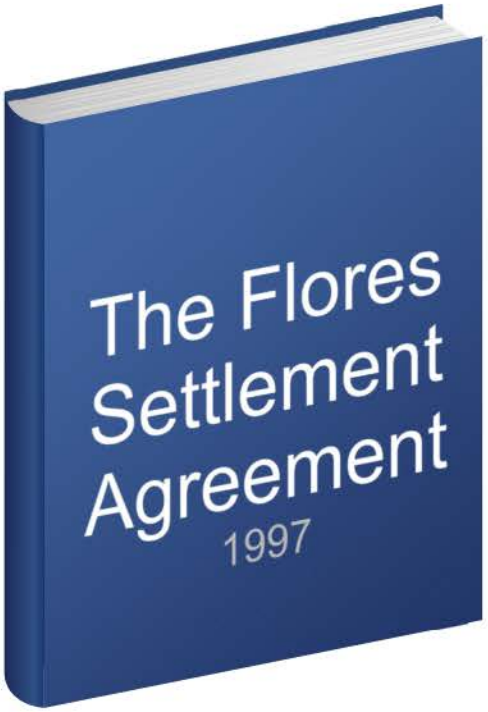


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DHS-19-0195-B, 19-0494-B, 19-0495-B-000202

Laws and Regulations

U.S. Immigration and Customs Enforcement

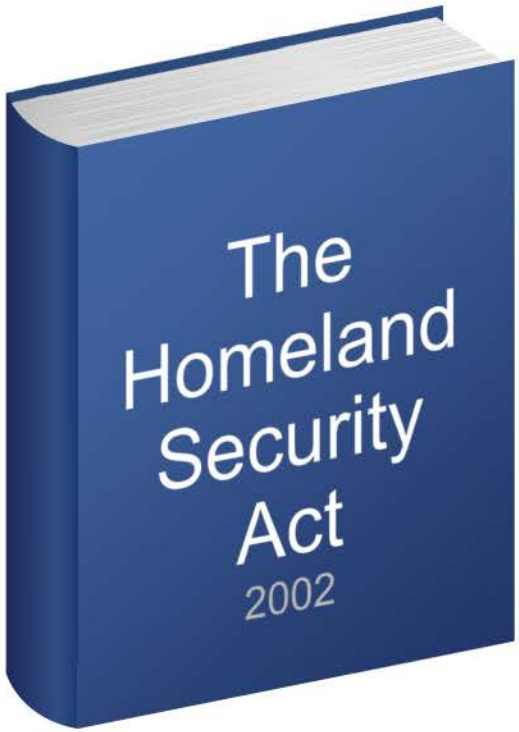


- Nationwide Policy
- Place in least restrictive setting
- Access to toilet & sinks, drinking water and food as appropriate
- Separate UAC minors from unrelated adults
- Transfer a minor to licensed program within 3 days
- Report any violation when a minor is not transferred within 72hrs

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Laws and Regulations

U.S. Immigration and Customs Enforcement

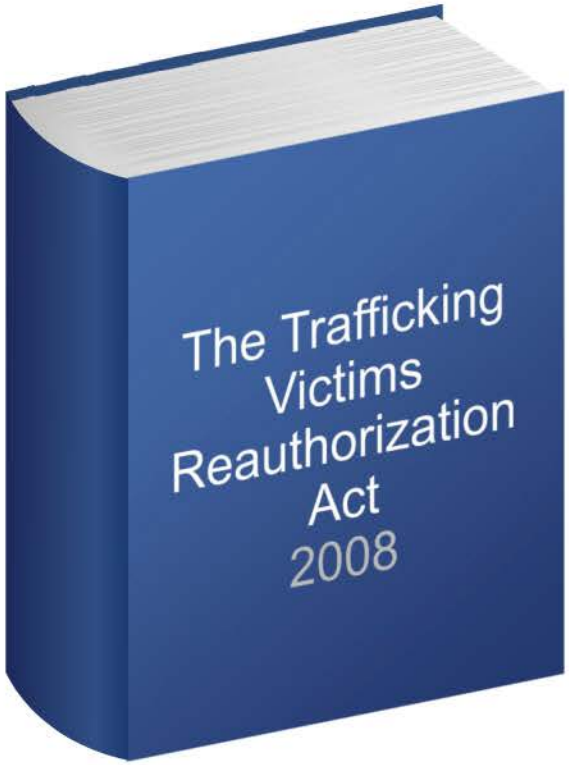


- HHS assumes authority for decisions related to the care and placement of UACs

AMERICAN OVERSIGHT

Laws and Regulations

U.S. Immigration and Customs Enforcement

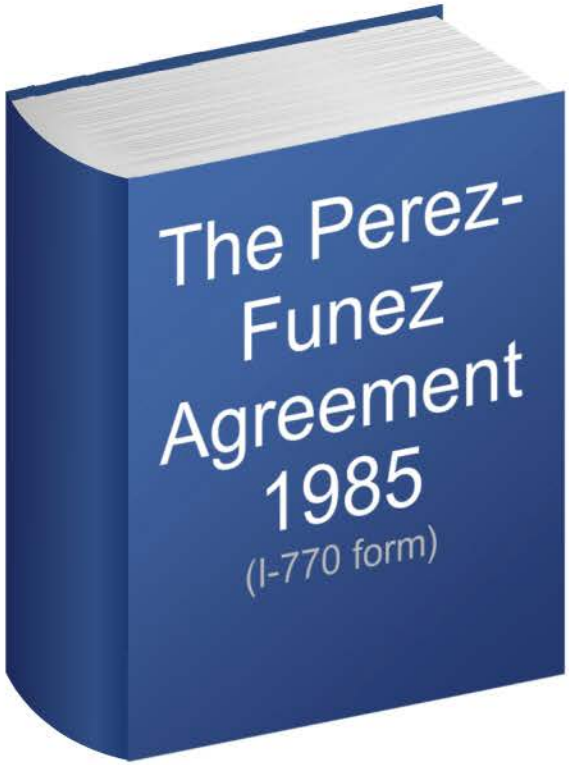


- Place removal proceeding under 240 of INA
- UAC are NOT subject to expedited removal or reinstatement
- TVPRA screening, grants CBP 48 hour to determine a withdraw or voluntary return
- Clock for UAC begins when it is determined that you have a UAC
- Must transfer within 72hrs to HHS/ORR

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Laws and Regulations

U.S. Immigration and Customs Enforcement

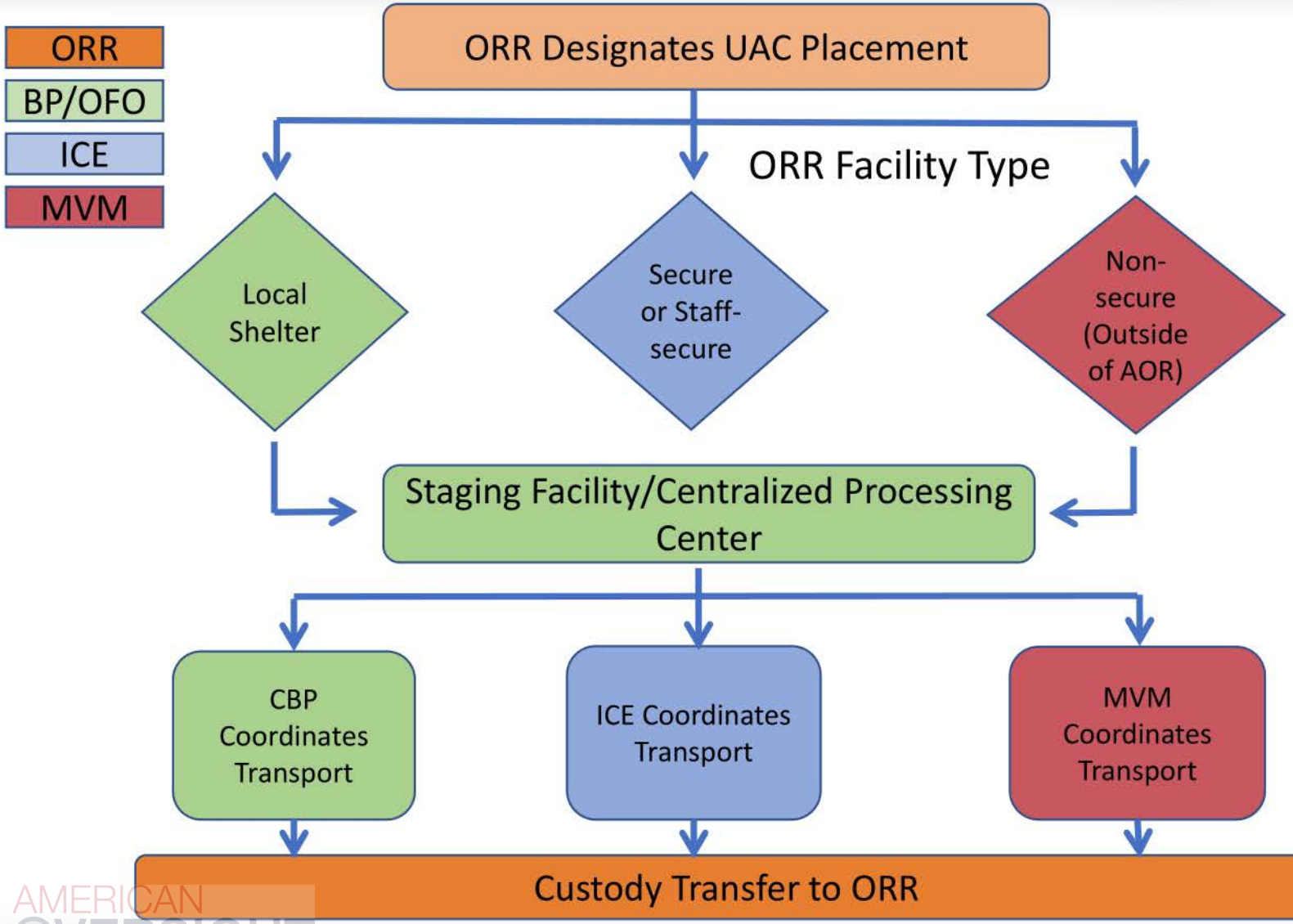


- Issue I-770 Notice of Rights and Request Disposition
- Right to be represented by an attorney
- Right to an immigration hearing
- Right to apply for asylum
- Right to request for voluntary departure

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Custody Transfer Process

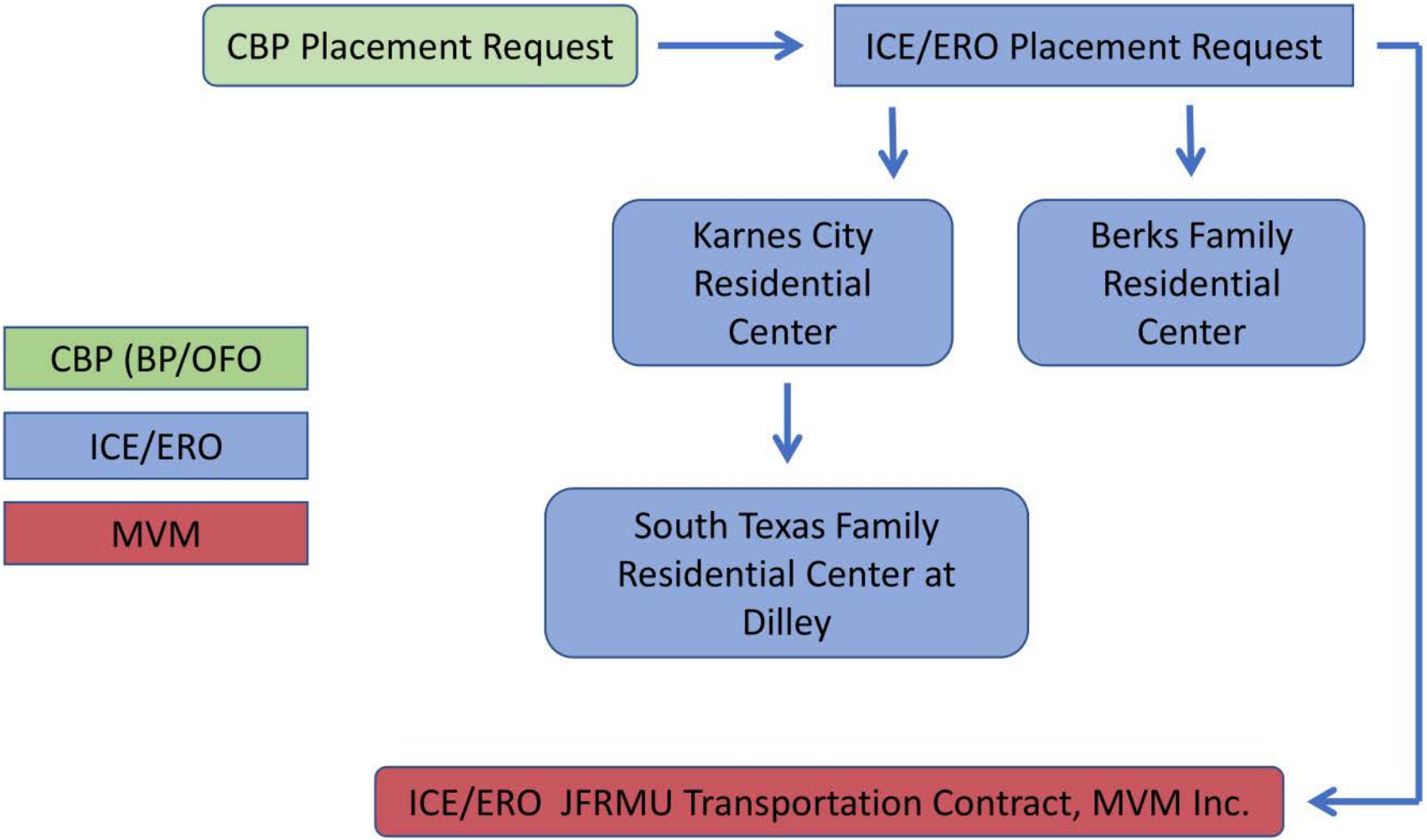
U.S. Immigration and Customs Enforcement



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Custody Transfer Process

U.S. Immigration and Customs Enforcement



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Transportation Key Activities

U.S. Immigration and Customs Enforcement

- Placement Coordination
- Travel Arrangements
- Notification Requirements
- Escort Requirements and Best Practices
- Separation of Minors
- Rules on Ground Transport
- Rules on Air Transport
- Use of Restraints
- Requirements for Transfer of Custody
- Contractor-Led Transport

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Key Activities

U.S. Immigration and Customs Enforcement

Arranging travel and transport of a UAC should take approximately 24 hours



Provide care

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ICE/ERO JFRMU's Transportation Contract MVM

U.S. Immigration and Customs Enforcement

Role & Responsibility

Process

Apprehension Agency

ORR Places

MVM initiates Travel

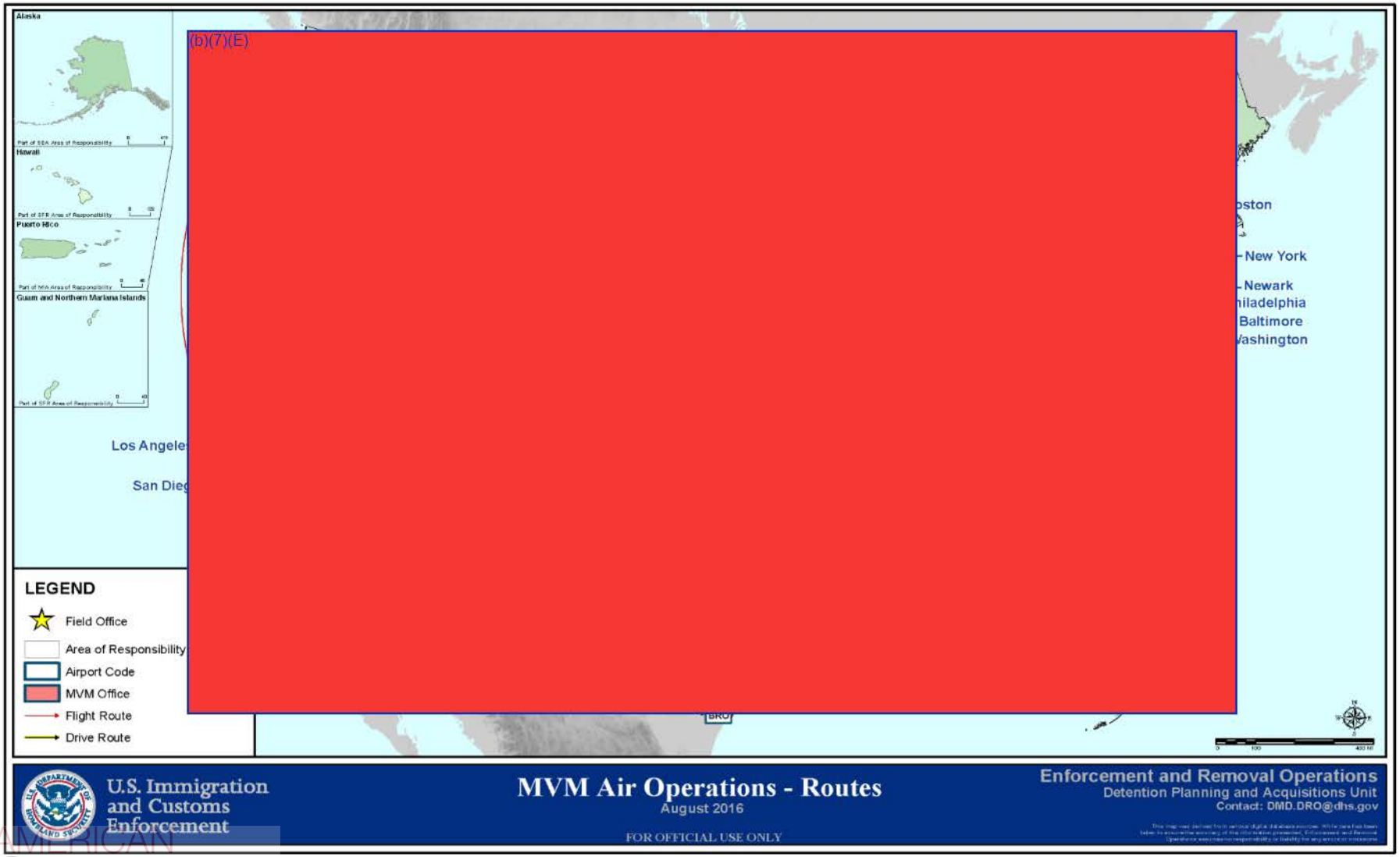
How to Request Assistance

(b)(6); (b)(7)(C)

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MVM Air Operations – Routes

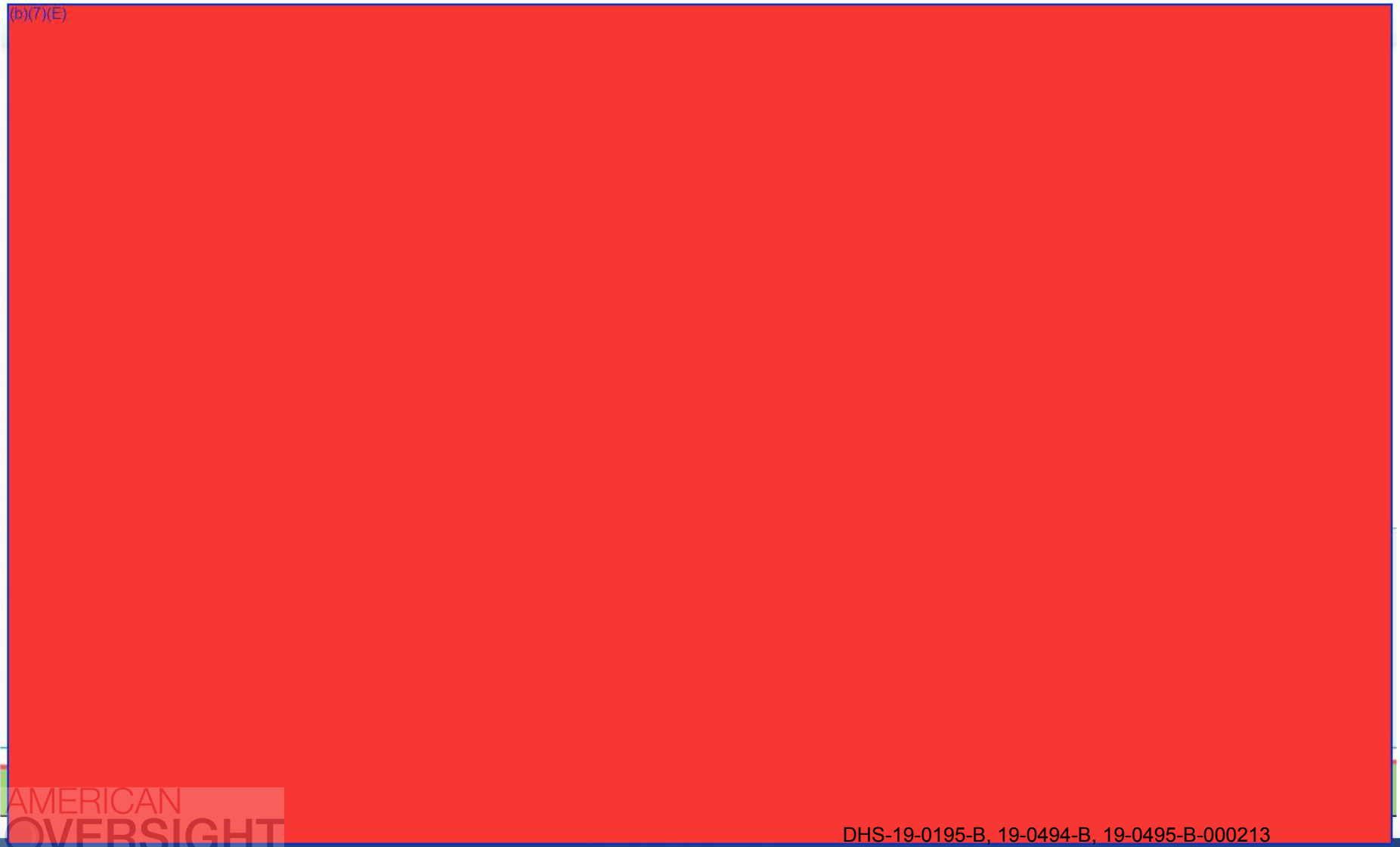
U.S. Immigration and Customs Enforcement



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MVM Technology

U.S. Immigration and Customs Enforcement



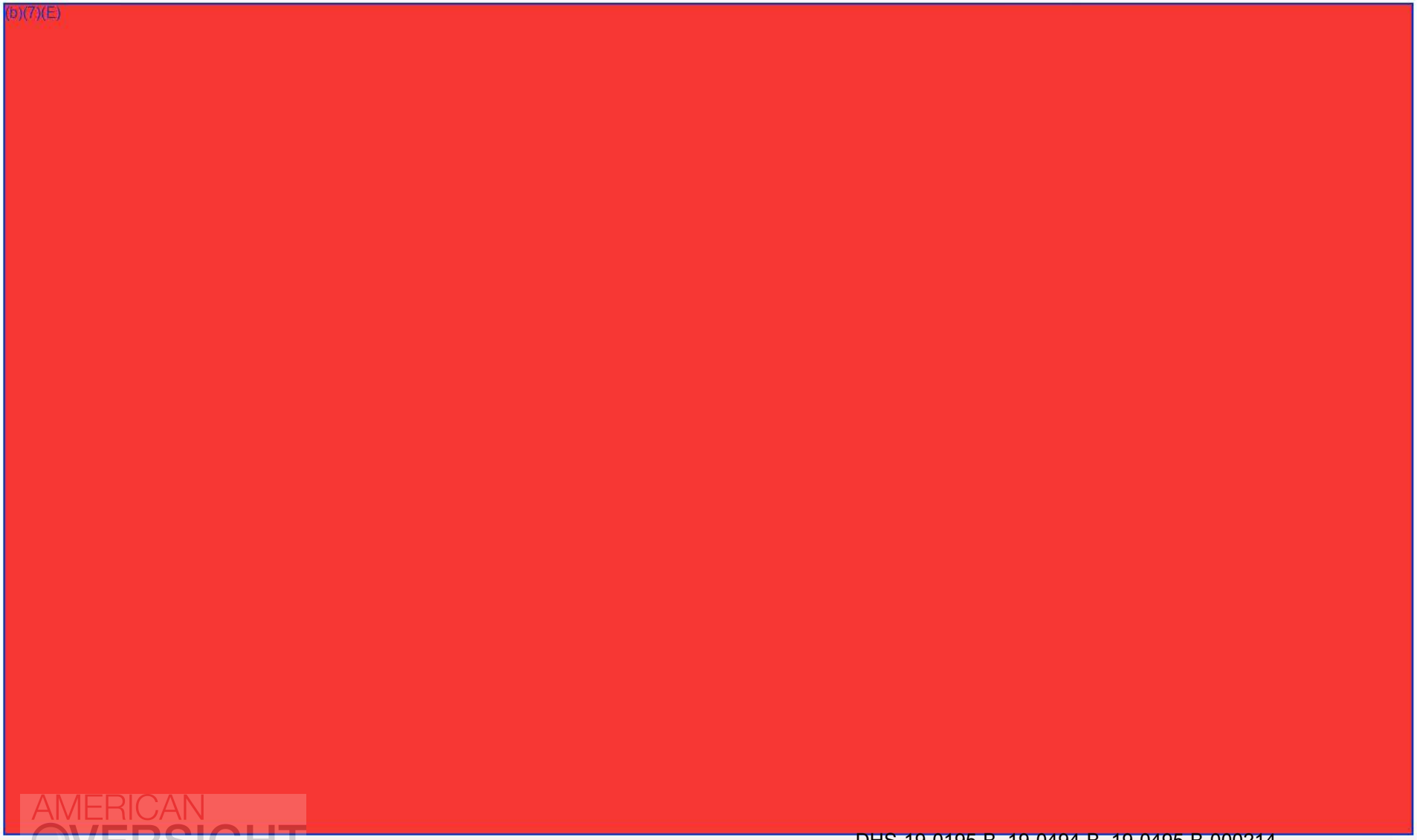
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DHS-19-0195-B, 19-0494-B, 19-0495-B-000213

MVM Technology

U.S. Immigration and Customs Enforcement

(b)(7)(E)



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MVM Technology

U.S. Immigration and Customs Enforcement

(b)(6); (b)(7)(C)

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Charter Flights

U.S. Immigration and Customs Enforcement



DHS-19-0195-B, 19-0494-B, 19-0495-B-000216

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Charter Flights

U.S. Immigration and Customs Enforcement



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DHS-19-0195-B, 19-0494-B, 19-0495-B-000217

Charter Flights

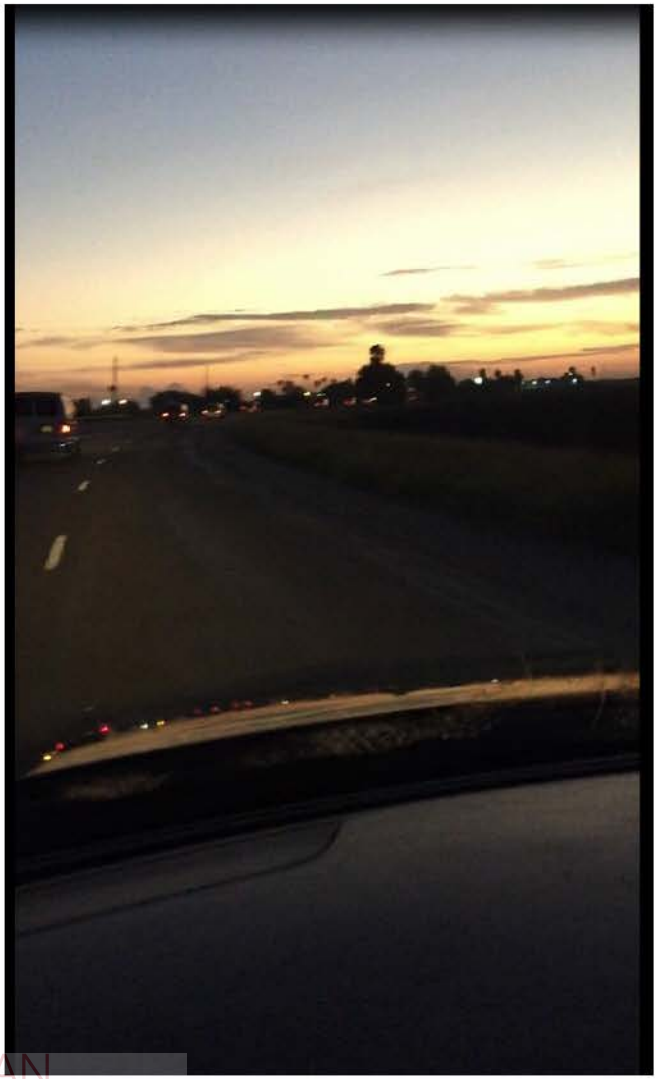
U.S. Immigration and Customs Enforcement



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Charter Flights

U.S. Immigration and Customs Enforcement





DHS-19-0195-B, 19-0494-B, 19-0495-B-000219

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Charter Flights

U.S. Immigration and Customs Enforcement





DHS-19-0195-B, 19-0494-B, 19-0495-B-000220

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Challenges/ Reminders

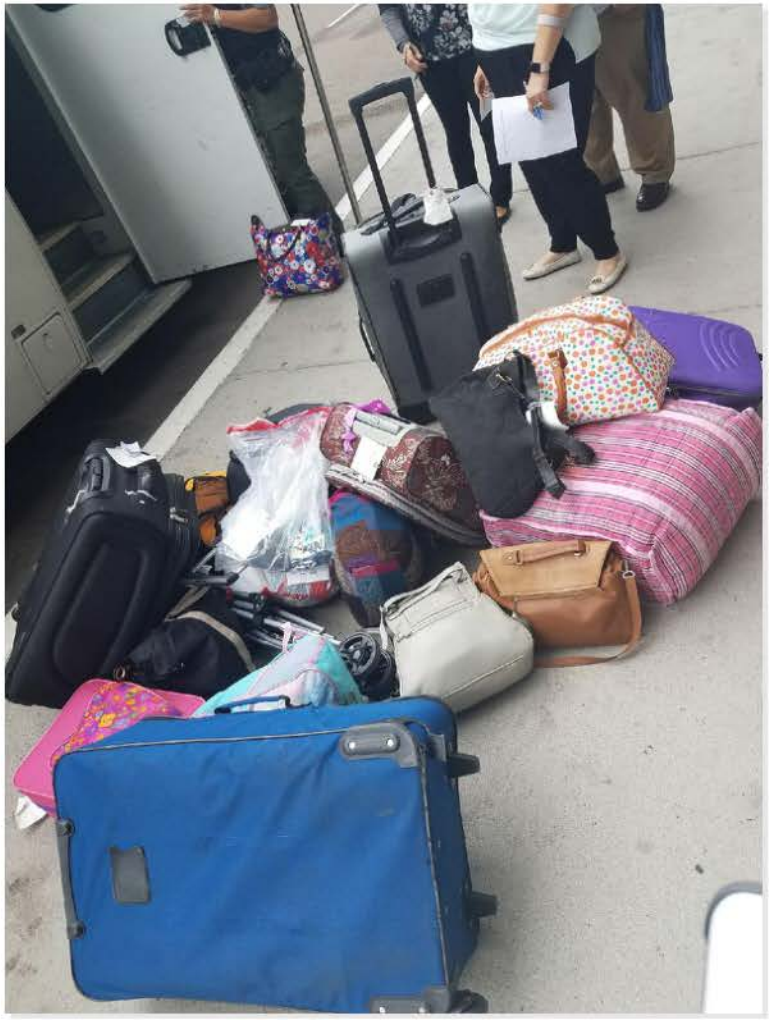
U.S. Immigration and Customs Enforcement

- Inclement Weather
- Competing with the Public for Available Seats
- Mechanical Problems with Planes
- Luggage
- Disclose Medical Problem

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Luggage

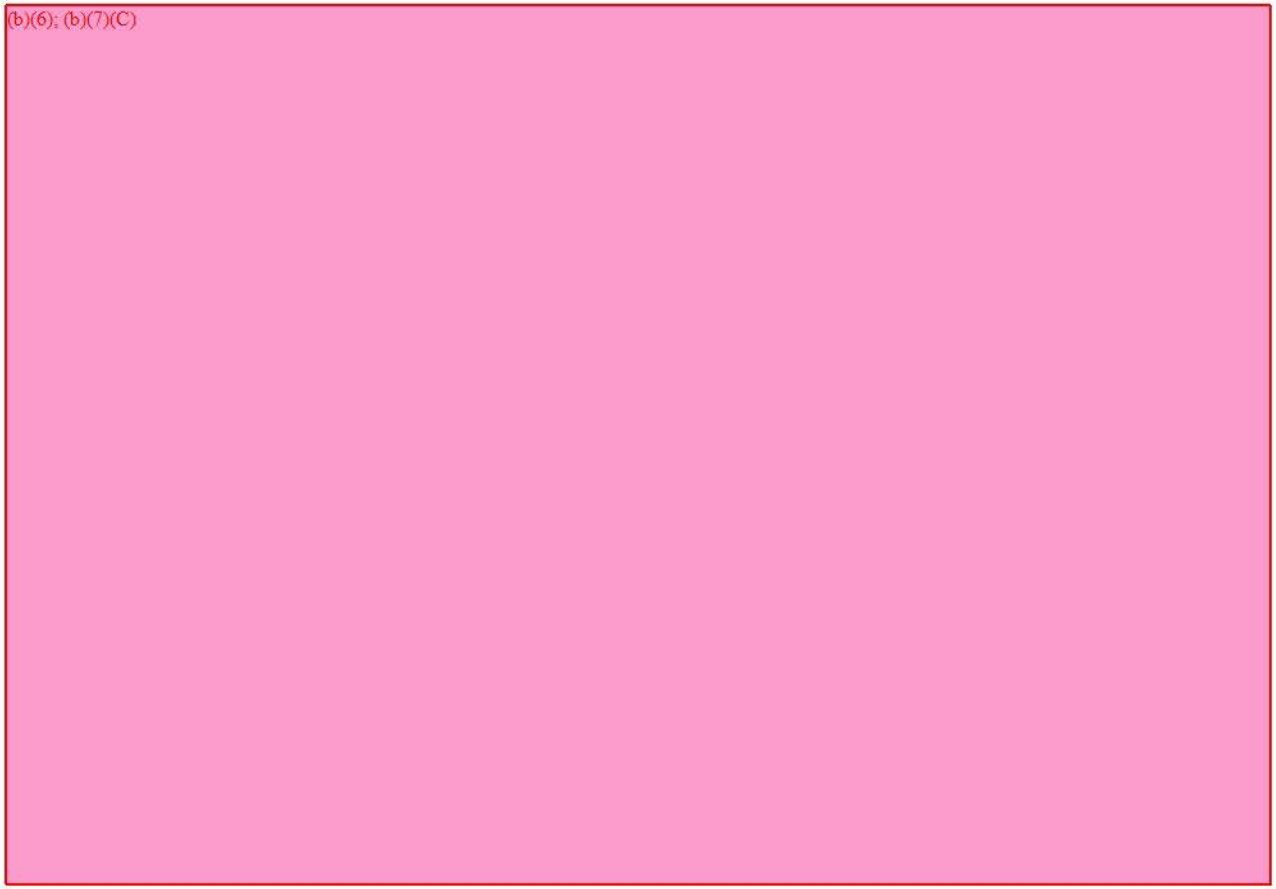
U.S. Immigration and Customs Enforcement



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Medical

U.S. Immigration and Customs Enforcement



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Repatriation

U.S. Immigration and Customs Enforcement

- Removal & Return
- Contiguous Country (land) Repatriation
- Repatriation via Commercial Flights
- Repatriation via ICE Air Charter Flights
- Country Coordination: MOU

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Docket Management

U.S. Immigration and Customs Enforcement

- FOJCs maintain the docket throughout the entire UAC domestic transport process
- Responsibilities include:
  - Updating the case comments
  - Confirming the transfer of A-File or other appropriate documents
  - Ensure book-out information is complete and accurate







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Questions?

U.S. Immigration and Customs Enforcement



AMERICAN OVERSIGHT

U.S. Immigration and Customs Enforcement

Removal Operations

Family Units and Unaccompanied Alien Children

April 26, 2019

AMERICAN OVERSIGHT

Presenter

U.S. Immigration and Customs Enforcement

(b)(6); (b)(7)(C)

- DDO-National Juvenile Coordinator (NJC)
- Juvenile and Family Residential Management Unit
- (b)(6); (b)(7)(C)

(b)(6); (b)(7)(C)

- DDO-National Juvenile Coordinator (NJC)
- Juvenile and Family Residential Management Unit
- (b)(6); (b)(7)(C)

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Session Objectives

U.S. Immigration and Customs Enforcement

1. Understand ERO's responsibilities as it relates to removal and repatriation
2. Describe the role of FOJCs in the removal and repatriation of Family Units (FAMUs) and unaccompanied alien children (UAC)
3. Identify the additional safeguards in place for repatriation of minors
4. Explain the process for both international and contiguous country removal and repatriation

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Trivia Time!

U.S. Immigration and Customs Enforcement







1. Open the **Kahoot!** app on your phone
2. Facilitator launches game link
3. Enter **GAME PIN** that appears on the screen

AMERICAN OVERSIGHT

TVPRA

U.S. Immigration and Customs Enforcement

Trafficking Victim's Protection Reauthorization Act (TVPRA)

Regulates removal for ALL unaccompanied children

- Repatriation at no cost to the child
- Safe and sustainable process
- Screen for potential trafficking risks and harm, if returned

DHS and HHS required to develop policies and procedures for removal

- Ensure safe removal
  - To the country of nationality
  - Last habitual residence

AMERICAN OVERSIGHT

TVPRA

U.S. Immigration and Customs Enforcement

DHS must abide by special requirements

Contiguous Country UAC Screening

- UAC has not been a victim of severe form of trafficking in persons
- There is credible evidence of risk of being trafficked
- UAC does not have fear to return to home country, or last habitual residence
- UAC can make an independent decision to return
  - 14 years of age and older
  - Presume those younger than 14 years of age cannot make the decision on their own

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TVPRA Contiguous Countries

U.S. Immigration and Customs Enforcement

U.S. Government shall negotiate Local Repatriation Agreements (LRAs) with Contiguous Countries

Must be designed to protect from severe forms of trafficking

AMERICAN OVERSIGHT

TVPRA Contiguous Countries

U.S. Immigration and Customs Enforcement

At a minimum,
(i) no child shall be returned to the child's country of nationality or of last habitual residence unless returned to appropriate employees or officials, including child welfare officials where available, of the accepting country's government;

(ii) no child shall be returned to the child's country of nationality or of last habitual residence outside of reasonable business hours; and

(iii) border personnel of the countries that are parties to such agreements are trained in the terms of such agreements.

AMERICAN OVERSIGHT

ICE ERO Responsibilities

U.S. Immigration and Customs Enforcement

- Cover the associated costs
- Provide a safe and supervised return of UAC
- Provide the UAC the opportunity to communicate with a consular official prior to departure for the home country, preserving the unity of families during removal
- Coordinate and arrange all travel plans with the UAC, consulate, ORR facility (if any), UAC's sponsor, and family in home country
- Return the UAC only during daylight hours
- Return the UAC through a port designated for repatriation

AMERICAN OVERSIGHT

ICE ERO Responsibilities

U.S. Immigration and Customs Enforcement

Enforcement and Removal Operations (ERO)'s priority is to preserve family unity during repatriation:

- Verify kinship with consulate and/or ORR, to safeguard minors from smugglers or other threats before repatriation
- Coordinate with consulate to verify citizenship before transporting a family to country of origin
- Verify with the local FOJC, prior to transporting a UAC or FAMU to land border:
  - Established hours of operation for receiving
  - Minors and females have special limitations on when (time of day) they are able to cross from the U.S.

AMERICAN OVERSIGHT

ICE ERO Responsibilities

U.S. Immigration and Customs Enforcement

Minors must be repatriated under additional safeguards, including:

- Allowing the UAC to communicate with a consular official before departure
- Upon arrival at the destination, the receiving official acknowledging the custody transfer by signing the I-216
- Forwarding the signed I-216 to the originating FOJC to update UAC's A-file
- Per ERO policy, returning each UAC in the appropriate outerwear for the current climate conditions

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ICE ERO Responsibilities

U.S. Immigration and Customs Enforcement

FOJC's Role: Obtaining Travel Documents (TD)

- Coordinate interviews for UAC and FAMUs with consulates as soon as the order of removal is final
- Provide at least 72 hours advanced notice to the consulate prior to removal

As always, when corresponding with the consulate (in writing, or in-person), maintain professionalism and employ negotiation and liaison skills.
They work with us, not for us.

AMERICAN OVERSIGHT

ICE ERO Responsibilities

U.S. Immigration and Customs Enforcement

FOJC's Role: Obtaining Travel Documents (TD)

- Contact the Removal International Operations (RIO) desk officer
  - If have difficulty obtaining TD for UAC or FAMU
  - ONLY after you have exhausted all resources



The earlier the FOJC engages the RIO desk officer, on difficult cases, the greater the likelihood of removal

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ICE ERO Responsibilities

U.S. Immigration and Customs Enforcement

FOJC's Role: Obtaining Travel Documents (TD)

- Consulate Travel Document Request:
  - Submit all via eTD, even if document will not be issued via eTD
  - ORR can facilitate the interview
    - Notify ERO when travel document can be picked up
  - Upload received TD in eTD, to close the record



Follow local best practices for obtaining travel documents

AMERICAN OVERSIGHT

Repatriation to POE

U.S. Immigration and Customs Enforcement

- Notify consulate
- Determine Transportation Arrangements
- Note: Repatriation must take place within regular business hours
- Place copy of I-216 in A-file
- Execute all necessary forms applicable to the removal (e.g., 210s, 205s, and 294s)
- Provide copies to the minor, or designated representative

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International Repatriation

U.S. Immigration and Customs Enforcement

- Request escorting officer
  - Ensure (b)(7)(E) [redacted] is the same gender
- Coordinate with designated travel unit:
  - For itinerary
  - To submit travel packet to HQ Travel Unit **10 business days** prior to the transport

Travel Packet Includes:



- **Travel document**
- **Flight itinerary**
- **Threat assessment**

AMERICAN OVERSIGHT

International Repatriation

U.S. Immigration and Customs Enforcement

HQ Removal Unit will provide the country clearance notification

Coordinate with consulate, ORR and/or legal representative so family in home country can be contacted

Have a consular/government official sign for juvenile and upon return, place copy of I-216 in A-file

AMERICAN OVERSIGHT

International Repatriation

U.S. Immigration and Customs Enforcement

Escort Determination Chart - CLASS 1b

- A minimum of (b)(7)(E) of the same gender as the juvenile
- (b)(7)(E) are required for a group of two to five juveniles
- Each additional group of five juveniles requires (b)(7)(E) (b)(7)(E)
- Instances where both male and female juveniles are being transported will require (b)(7)(E) of each gender

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ICE Air Charter Flights

U.S. Immigration and Customs Enforcement

Check for charter flights going to the country to which the UAC has been ordered removed

Consult the Travel Document Unit for any needed assistance

- Local unit within each AOR responsible for coordinating ICE Air Charter flights

AMERICAN OVERSIGHT

ICE ERO Responsibilities

U.S. Immigration and Customs Enforcement

- Prior to executing a removal order, ERO will coordinate fully with the appropriate agencies, foreign officials, and attachés (if applicable)
- Refer to the Field Manual: *Enforcement Standard Pertaining to Escorting of Aliens* and the *ICE Air Operations Handbook* for further inquiry on escorts
- As each field office differs on best practices, follow the respective local process as well

It is important to maintain positive liaison with the consulates in your AOR because they also work with ORR facilities in verifying their respective nationals, conducting interviews, and at times they may even provide further assistance when repatriation notification has been given.

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Repatriation Operations

U.S. Immigration and Customs Enforcement

- ERO typically utilizes ICE Air Operations (IAO) chartered flights to repatriate Guatemalan, Salvadoran, Honduran and Mexican nationals
  - IAO coordinates additional removals via commercial airlines, as needed

AMERICAN OVERSIGHT

Repatriation Operations

U.S. Immigration and Customs Enforcement

	Guatemala	El Salvador	Honduras	Mexico
ICE Air Operations (IAO) Charter Flights	Up to (b)(7)(E) Week	Up to (b)(7)(E) Week	Up to (b)(7)(E) /Week	Up to (b)(7)(E) Week
Aliens Per Flight	135	135	135	135
IAO Charter Allows:				
• Individual Adults	✓	✓	✓	✓
• UAC	✓ over the age of 14		Generally repatriated via commercial aircraft*	Generally repatriated via commercial aircraft*
• FAMU	✓	✓	✓	Generally repatriated via commercial aircraft*
UAC Repatriated via Commercial Aircraft	✓ under the age of 14	✓	✓	✓

*can also be removed via charter flight with prior approval

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Guatemala

U.S. Immigration and Customs Enforcement

	Guatemala
ICE Air Operations (IAO) Charter Flights	Up to (b)(7)(E) Week
Aliens Per Flight	135
IAO Charter Allows:	
• Individual Adults	✓
• UAC	✓ over the age of 14
• FAMU	✓
UAC Repatriated via Commercial Aircraft	✓ under the age of 14

- Removals via commercial aircraft:
  - UAC under the age of 14
- Removals via IAO charter flights:
  - FAMUs
  - UACs 14 and older
    - can be removed via IAO chartered flights with single adults
  - FAMU only removal flights, as needed
  - Preferred method of removal for FAMUs and UACs that are 14 years and older
- For UACs removed either via commercial airline or IAO, provide a family member's phone number, in Guatemala, to IAO via the manifest.
- No flexibility on notification periods for UAC/FAMU removals:
  - (b)(7)(E) days for criminals
  - days for mixed criminal/non-criminal
  - days for non-criminal flights



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DHS-19-0195-B, 19-0494-B, 19-0495-B-000249

Guatemala, continued

U.S. Immigration and Customs Enforcement

	Guatemala
ICE Air Operations (IAO) Charter Flights	Up to (b)(7)(E) Week
Aliens Per Flight	135
IAO Charter Allows:	
• Individual Adults	✓
• UAC	✓ over the age of 14
• FAMU	✓
UAC Repatriated via Commercial Aircraft	✓ under the age of 14

- To minimize ICE expenses and if the UAC/FAMU is amenable to removal via IAO chartered flight field can:
  - Coordinate commercial meet/greet
  - Transfer the UAC/FAMU to a IAO chartered flight *as long as the Assistant Attaché for Repatriations (AAR) is notified in advance via manifest*
- Regular TD must be issued for every UAC/FAMU case
  - If consulate insists on issuing a certified declaration in lieu of regular TD, notify the RIO officer and the AAR in advance to avoid concerns upon arrival
- Utilize eTD on these cases as required
  - Helps the AAR in the event that a paper TD is missing upon arrival



AMERICAN OVERSIGHT

El Salvador

U.S. Immigration and Customs Enforcement

	El Salvador
ICE Air Operations (IAO) Charter Flights	Up to (b)(7)(E) Week
Aliens Per Flight	135
IAO Charter Allows:	
• Individual Adults	✓
• UAC	
• FAMU	✓
UAC Repatriated via Commercial Aircraft	✓

- UAC removed via commercial aircraft or IAO flights
  - If via IAO flights, a consular officer must accompany the UAC
- FAMU can be removed via IAO chartered flights in combination with individual adults
  - FAMU only flights, as needed basis
  - IAO chartered flight is the preferred method for FAMUs if the scheduled date/time is most expedient
- No flexibility on the notification period for UAC/FAMU removals: (b)(7)(E) days



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Honduras

U.S. Immigration and Customs Enforcement

	Honduras
ICE Air Operations (IAO) Charter Flights	Up to (b)(7)(E) /Week
Aliens Per Flight	135
IAO Charter Allows:	
• Individual Adults	✓
• UAC	Generally repatriated via commercial aircraft*
• FAMU	✓
UAC Repatriated via Commercial Aircraft	✓

- UACs must be removed via commercial aircraft
- FAMUs can be removed via IAO on FAMU only flights or via commercial aircraft
  - Preferred method of removal is commercial aircraft
- No flexibility on the notification period for UAC/FAMU removals: (b)(7)(E) days



**can also be removed via charter flight with prior approval*

AMERICAN OVERSIGHT

Mexico

U.S. Immigration and Customs Enforcement

	Mexico
ICE Air Operations (IAO) Charter Flights	Up to (b)(7)(Week
Aliens Per Flight	135
IAO Charter Allows:	
• Individual Adults	✓
• UAC	Generally repatriated via commercial aircraft*
• FAMU	Generally repatriated via commercial aircraft*
UAC Repatriated via Commercial Aircraft	✓

- UAC and FAMU are generally repatriated via commercial aircraft, escorted by two officers, or via a land border during daylight hours
  - Can be removed on the charter flight with prior approval
- Consular officials greet UAC and FAMU
  - Interviewed/processed separate from the adult population
  - Transported to a shelter or provided assistance to travel to their home
- ICE provides verified family contact information to GoM social services for all returning UACs, for advanced coordination of family reunification
- No specified notification period
  - ERO informs GoM as soon as removal information becomes available

**can also be removed via charter flight with prior approval*

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Trivia Time!

U.S. Immigration and Customs Enforcement







1. Open the **Kahoot!** app on your phone
2. Facilitator launches game link
3. Enter **GAME PIN** that appears on the screen

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Key Take-Aways

U.S. Immigration and Customs Enforcement

Travel documents must be obtained for all UAC and FAMU. If you encounter difficulties, contact RIO officers as soon as possible—they want to hear from you!

If you want to include UAC or FAMU on IAO chartered flights, contact RIO officers for coordination

To ensure all removals are safe and humane, ample advance notice is needed for coordination efforts between the field office, IAO, RIO, the AARs and the consular official for the removal country

The FOJC should be involved in all of these coordination efforts!

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Questions?

U.S. Immigration and Customs Enforcement



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U.S. Immigration and Customs Enforcement

THANK YOU

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Polling Questions – Trivia #1

U.S. Immigration and Customs Enforcement

By show of hands, answer the following questions!



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Question #1

U.S. Immigration and Customs Enforcement

Which country has a national repatriation agreement with ICE?

a. Mexico
b. El Salvador
c. Costa Rica
d. Bolivia

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Question #2

U.S. Immigration and Customs Enforcement

When is voluntary return or application for admission withdrawal allowed under TVPRA?

a. If a UAC is from a contiguous territory
b. The UAC has been screened for trafficking.
c. The UAC is 14 years of age and older
d. All of the above

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Question #3

U.S. Immigration and Customs Enforcement

When reviewing the escort determination chart, what class descriptor is listed for UACs?

a. 3c
b. 2a
c. 1b
d. All of the above

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Question #4

U.S. Immigration and Customs Enforcement

What system must be used to auto-generate requests for travel documents in EARM?

a. EAGLE
b. eTD
c. PLANET
d. PCQS

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Polling Questions – Trivia #2

U.S. Immigration and Customs Enforcement

By show of hands, answer the following questions!



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Question #5

U.S. Immigration and Customs Enforcement

Who is responsible to pay for Voluntary Departure Tickets for UAC under the TVPRA?

a. ORR
b. ICE
c. UAC's parents
d. None of the above

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Question #6

U.S. Immigration and Customs Enforcement

When referencing escort threat assessments, what is a class descriptor?

a. Risk classification assessment
b. Classification to determine sponsor
c. Classification to determine threat factors
d. Classification to determine age

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Question #7

U.S. Immigration and Customs Enforcement

What documents need to be returned for inclusion in the A-file after the UAC repatriation is completed?

a. Executed warrant of removal
b. I-294
c. Executed I-216
d. All of the above

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Question #8

U.S. Immigration and Customs Enforcement

At a minimum, what documents are included in a travel packet?

a. Escort Threat Assessment
b. Travel Document
c. Itinerary
d. All of the above

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Question #9

U.S. Immigration and Customs Enforcement

Which ERO headquarters' unit is responsible for providing country clearance?

a. JFRMU
b. Custody Programs
c. Removal International Operations (RIO)
d. Fugitive Operations

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