

Good afternoon everyone!

Today's webinar on improving R&P Period Report accuracy came about to address one of the more common R&P findings we see from both PRM monitoring visits of our network and from our own monitoring trips of your R&P programs.



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Objectives

After this webinar, participants will:

- Understand the purpose of the R&P Period Report
- Identify resources available when completing the R&P Period Report
- Describe tips for accurately reporting core service provision



I'm David Thomson, Field Support Specialist with Diocesan Development and Support. Some of you will know me from the follow up I have done with you to finalize your response to monitoring reports and evaluate your progress made in addressing findings and recommendations from these reports.

Objectives

PRM and the R&P Period Report

- ▶ When they look at Period Reports
 - After final submission to the Refugee Processing Center (RPC)
 - Monitoring of your program
 - HQ Monitoring
- ▶ What they look for in these reports
 - Accuracy with services provided
 - Key data points related to performance outcomes
- ▶ Why they look at these reports
 - For a snapshot of case status
 - For use in reports to Congress



Lets take a few minutes to review the purpose of the Period Report. When PRM looks at it, what they look for, and why.

When they look at Period Reports

After final submission to the Refugee Processing Center (RPC)

Monitoring of your program: When PRM contractors review case files, they will also evaluate the accuracy of Period reports.

HQ Monitoring: As part of the lead up to PRM's annual monitoring of our office, they will request a list of case logs and Period Reports for review. Traditionally, they request 3-4 case files from 4 separate programs in our network.

What they look for in these reports

Alignment between what is reported and the case log documentation.

Key data points related to performance outcomes: This informs them on our network employment and service outcomes

Why they look at these reports

To have a snapshot of the case status, particularly at the end of the R&P Service Period. This determines if the case received required services up to the standards outlined in the R&P Cooperative Agreement

Key data points pulled from the Period Report is included on an aggregate level in annual reports to Congress

**If it is not in
the case log,
then it did
not occur**



As we take a closer look at the R&P Period Report Service Provision section, please remember that if it is not documented in the case log, then it did not occur. This is one of the main qualifiers that both PRM and we at USCCB follow when comparing case files to their Period Reports.

So make sure that case managers, volunteers, and other service providers are given credit for the good work they are doing by ensuring it is documented in the case log.

Monitoring and the R&P Period Report

- ▶ Monitors review the R&P Period Report and compare what is reported with what is documented in the case log.
- ▶ Doing the same when completing the report will increase accuracy of what is reported.

**NOTABLE
PRACTICE**



When PRM and USCCB/MRS monitor your program, it includes a comparison of the completed R&P Period Report for a case with documentation present in that case's case log. If the two do not align, then you will be found not in compliance with R&P Period Reporting accuracy requirements.

A notable practice is to mime a monitor's process and review the case log prior to completing or as you complete the Period Report. Especially by doing so prior to completing the Period Report, you have a chance to update the file to accurately reflect the services provided to the client(s) prior to Period Report submission.

How do you do this?

One way is through your own case file review process that uses a monitoring tool which accounts for interpretation provision and service timelines. After a case file is reviewed and the monitoring tool is completed, then you will have a document that outlines what services were documented in the case file. If you don't already have an internal case file review process and are unsure how to set one up or feel you and your staff need more training on how to correctly evaluate a case file, please be sure to connect with your FSC or me for assistance.

In addition, keeping some guiding questions in mind when reviewing the case log in conjunction with completing the Period Report can help to ensure that anyone completing the Period Report covers all the bases with each service reported on. These questions are:
Does this service apply to any case members on this case?
Does documentation show appropriate interpretation was provided?
Does the case log show that the required service was provided on time to all case members?

We will talk a bit more about applying these guiding questions later.

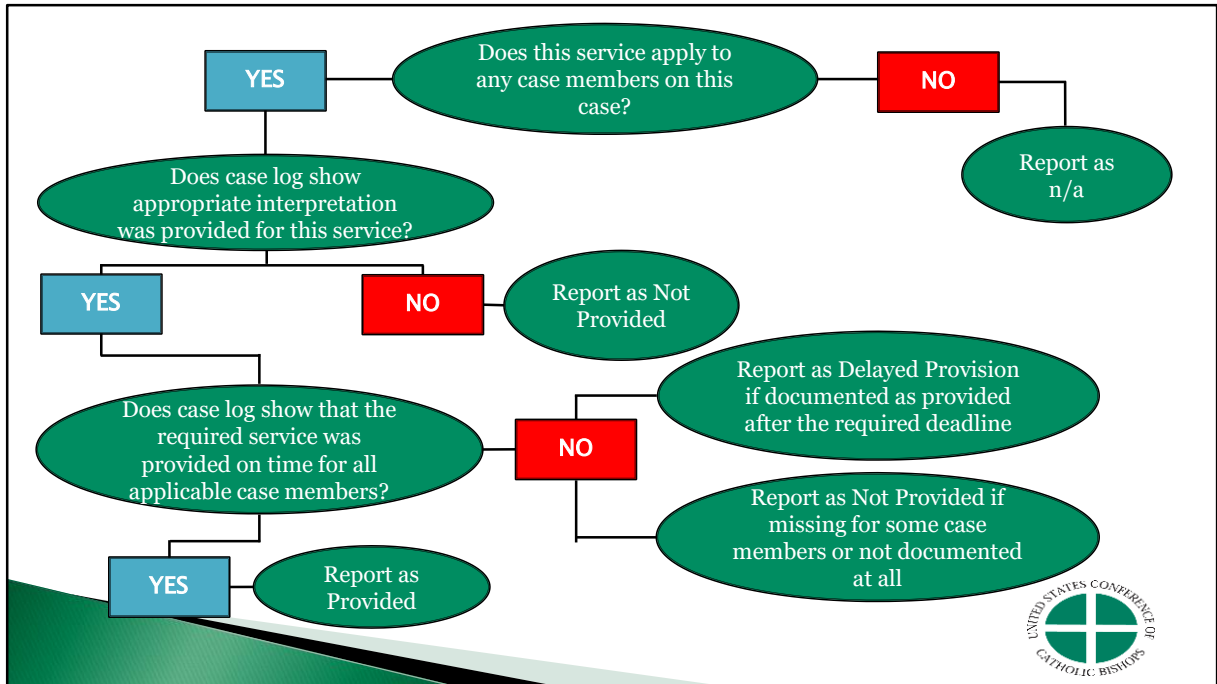
Period Report Service Provision Categories

- ▶ **Provided:** Documentation exists in the case log that all case members received the service applicable to them with appropriate interpretation and within the required timelines outlined in the Cooperative Agreement.
- ▶ **Delayed Provision:** Documentation exists in the case log that the service was provided late for at least one applicable case member.
- ▶ **Not Provided:** Case log documentation shows that a required service was not provided to at least one case member.
- ▶ **N/A:** It is documented that the case composition indicates that the service is not applicable to the case

REMINDER: Document reason for delays or lack of provision in both the case log AND the Period Report



Before we dive into the use of guiding questions for R&P Period Reporting, let's quickly summarize current guidance defining each service provision category.



Take participants step-by-step through guiding questions flowchart that can be used during the reporting of each required service.

In short, you can only select Provided for a required services in the report if you can answer yes to all three guiding questions.

Remember that any time you choose Delayed Provision or Not Provided, be sure to complete the comment field outlining any noted delays/special circumstances that affected service provision. These delays and special circumstances need to also be documented in the case log.

R&P Period Report Activity

- ▶ Using the case details on the next page, review the case notes that will pop up on screen and answer how it should be reported on the Period Report using the below categories:
 - Provided
 - Delayed Provision
 - Not Provided
 - N/A

HINT: For this exercise, assume that the case note or case log documentation displayed is the only reference for the service in question mentioned in the case file.



Moving on, let's use what we have learned about Period Reporting for this next activity:

Using the case details on the next page, review the case notes that will pop up on screen and answer how it should be reported on the Period Report

HINT: For this exercise, assume that the case note or case log documentation displayed is the only reference for the service in question mentioned in the case file.

Case File Details

POE/international arrival date: 4/17/2019

Domestic arrival date: 4/18/2019

Name	Gender	Age at Arrival	Health Status
Mahmoud AHMED	Male	35	No issues noted in biodata
Asmaan AHMED	Female	29	No issues noted in biodata
Mohammad AHMED	Male	3 (turned 4 shortly after arrival)	No issues noted in biodata
Hussain AHMED	Male	2	No issues noted in biodata

Hints:

- None of the case members have an immediate medical need
- The children are too young for school enrollment
- Mahmoud is not eligible for Selective Service
- **REMEMBER: the case log information shown is the only reference to the service in the case file at the end of the service period.**



Here we have the case details outlining the case composition, as well as, the international and domestic dates of arrival. Based on the arrival dates, this case would be evaluated according to FY2019 R&P Cooperative Agreement. This case of four has no immediate medical needs, the children are too young for school enrollment and the only adult male on the case was too old for Selective Service upon arrival.

Remember that the case log information shown is the only reference to the service in the case file at the end of the service period.

Case notes:

Housing Reporting: 4/19/2019: Case Manager completed home safety check, details available in the completed Home Safety checklist (form RF-21) on file.

13 of 26 respondents reported this as Provided

7 of 26 respondents reported this as Delayed Provision

4 of 26 respondents reported as Not Provided

2 of 26 respondents reported as n/a

Correct response: "Delayed Provision" for housing due to safety check being completed one day after arrival, so not sufficient evidence of safe, sanitary, and affordable housing being provided "upon arrival"

Public Benefits Reporting: 4/19/2019: (CalFresh/Food stamps, cash and medical benefits) – Caseworker, who speaks clients’ native language, provided assistance and transportation to all case members applying for Department of Human Assistance (DHA) public benefits.

24 of 26 respondents reported this as Provided

2 of 26 respondents reported this as Delayed Provision

1 of 26 respondents reported as Not Provided

Correct response: “Provided” since the case worker documented speaking the same native language as the clients and that assistance to apply for public benefits was done prior to the required deadline

ESL and Employment Services Reporting: 4/22/2019: Case worker discussed with adult case members the requirement for VESL/Job training and ESL enrollment for all non-exempt adult members within 10 working days and referred them to program contacts. Mahmoud stated he would like to be enrolled in job training, he does not need to attend ESL since his English is good. His wife, Asmaan, stated she needs to care for her young children and prefers not to enroll in ESL/VESL program during this time. Agency staff scheduled an appointment for job training enrollment for Mahmoud Ahmed.

13 of 29 respondents reported this as Provided

4 of 29 respondents reported this as Delayed Provision

12 of 29 respondents reported as Not Provided

Correct response: Since appropriate interpretation is not clearly documented, it should be reported as “Not Provided”. **Special Note:** If interpretation was documented, either in an earlier case note indicating that the case worker in question speaks the case’s native language, a language the case is fluent in, or some other indication that an appropriate interpreter was used in the interaction with the client, then it could be reported as “Provided” since the referral to program contacts for these services was made on time and the clients’ decisions were noted.

Question: If you establish that the caseworker speaks the same language as the clients in one of the first case notes in the log, do you need to restate that fact in each subsequent case note? **Answer:** It is a best practice to reference appropriate interpretation each time it is needed. However, so long as the caseworker who speaks the native language is clearly identified with each interaction they take part in, then you would not need to restate that that particular case worker speaks the client’s native language. Especially in cases where multiple case workers might be interacting with the clients during the service period, we recommend you identify case workers that speak the client’s language by name and language spoken early on and by name for each interaction after that.

Health Screening Reporting: 5/23/2019: Caseworker provided assistance and transportation to/from health screening appointment at RHC. All case members were seen during this visit. RHC provided medical interpretation in person.

14 of 31 respondents reported this as Provided
16 of 31 respondents reported this as Delayed Provision
1 of 31 respondents reported as Not Provided

Correct response: "Delayed Provision" due to 1st health screening having occurred after the 30th day of arrival.

Question from Steph Gerards, CC Portland OR: Do both health intake and screening have to take place in the first 30 days? Is it provided if the intake took place in first 30 days? **Answer:** That depends on what intake involves. If the health screening process involved an initial intake appointment with the health screening provider, then documentation that all client's attended their 1st appointment with the provider would be sufficient to report as "Provided". However, you would want to make sure you also document other aspects of the screening process, including any additional appointments and follow-up.

Statement from Mohammad Sulaiman: The goal of the Virginia Newcomer Health Program (NHP) is to ensure that all refugees and other qualified individuals receive an initial health screening within 45 days of arrival to the Commonwealth of Virginia. **USCCB/MRS response:** So long as the first meeting between the case and the health screening provider occurs within the first 30 days, the health screening process can take longer.

WIC Reporting: 4/21/2019: ...Case manager plans to assist clients in applying for WIC by 4/28/2019...

9 of 31 respondents reported this as Provided
3 of 31 respondents reported this as Delayed Provision
17 of 31 respondents reported as Not Provided
2 of 31 respondents reported as n/a

Correct response: "Not Provided" due to there being no confirmation in the case file that the case manager actually assisted the clients to apply for WIC.

30 Day HV Reporting: 5/17/2019: Caseworker spoke case members' native language. Visited case members for their 30 day HV. (Additional comments in form RF33/in case file).

Mahmoud and Asmaan stated the family is doing well. No immediate needs were reported during the home visit and all case members are healthy. The appearance and condition of the home is safe, clean, and it is in a stable environment. All appliances, windows, locks are in good condition and working properly. Adult case members know their address, phone number, how to make phone calls and how to be contacted.

33 of 34 respondents reported this as Provided
1 of 34 respondents reported this as Delayed Provision

Correct response: "Provided" due to documented evidence of timely provision of this core service that include evidence that appropriate interpretation.

Selective Service: Based on case file members' details, what would be selected for Selective Service in the Period Report?

1 of 38 respondents reported as Not Provided

37 of 38 respondents reported as n/a

Correct response: "N/A" due to the only adult male case member being older than 26 years of age.

If you were among the percentages that responded incorrectly and still have questions, please reach out to your Field Support Coordinator or me for assistance.

The Period Report and Post-arrival Transfers

- ▶ Best efforts to confirm status of service provision by prior resettlement agency before the transfer.
- ▶ If it can't be confirmed and documented, report as appropriate and make sure to note reason that it can't be confirmed in the comments field/case log



Service deadlines for post-arrival transfers can get a little complicated. With some services completed prior to transfer and other services, like public benefits, possibly needing to be done again for clients newly transferred to your program. This can make period reporting more complicated. PRM has stated that they would like to see the receiving agency make their best efforts possible to document all services that may have been provided to the case prior to transfer. In instances where you may have an open line of communication with other resettlement agencies in the area, we recommend that you attempt to secure the case log, or even just an email outlining what services the agency provided and in what timeframe, from the transferring agency as part of the transfer process. In instances where the case is transferring from another state, this can be more difficult. USCCB/MRS is currently working to implement mechanisms in the post-arrival transfer process to make this service provision information collection smoother for you.

I will provide a scenario, please respond with the appropriate provision category.

Scenario: Post arrival transfer occurs with case assured to your program after the social security application deadline. All case members have their social security cards. Case manager can't confirm when the social security cards were applied for but properly documents that all case members arrived with their social security cards and documents each member's social security number in the case file. How should this be reported in the

Period Report?

20 of 29 respondents reported this as Provided

4 of 29 respondents reported this as Delayed Provision

5 of 29 respondents reported as Not Provided

Correct Response: Should be reported as “Delayed Provision” due to documented evidence that case members have their social security numbers, but no evidence of when the cards were applied for.

Scenario 2: Similar scenario, post arrival transfer occurs with case assured to your program after the social security application deadline. All but one case member arrive with their social security cards. Case manager can’t confirm when the social security cards were applied for but properly documents that all but one case member arrived with their cards and documents their social security numbers in the case file. If the case manager follows up to secure the remaining case member’s social security card prior to the end of the service period and does not document this, how should this be reported in the Period Report?

1 of 22 respondents reported this as Provided

5 of 22 respondents reported this as Delayed Provision

16 of 22 respondents reported as Not Provided

Correct Response: Social Security application would be reported as “Not Provided”. Even if the case manager follows up to secure the remaining case member’s social security card prior to the end of the service period, the fact that they did not document this follow-up in the case log means there is not evidence in the case file that the application was completed for all case members.



Hopefully this has provided an opportunity to not only learn about the Period Report's use, but also learn notable practices and practice reviewing case log documentation when completing the R&P Period report. We will open up the rest of this time for questions.

Questions from participants and corresponding answers from USCCB/MRS staff detailed below:

Question: In the services section there are some dates that are already put in the RP report, some times the services happens before the given dates or after the given dates and I notice the report is not letting me change the dates, for example, health screening for a client happened on a different date then date then that is put in the report tried to change it but failed to do it? **Answer:** The dates populated in the R&P Period Report are not suppose to change. They reflect the required date that the service needed to be provided by, not the date that it actually occurred.

Question: What are the consequences of inaccurate R&P reports? Funding, etc.. **Answer:** Beyond any findings that would be issued in response to inaccurate Period Reporting, continuing unresolved issues in this area could inform future actions and decision making from PRM. Especially in this highly competitive environment that we are currently in.

Question: Can you clarify the ages that apply for selective service? Is it the 18th birthday to the 26th birthday? **Answer:** Yes, Though keep in mind that it applies not only to those eligible upon arrival, but also clients who age in to eligibility during the service period.

Question: Is this webinar being recorded, can we access it later? **Answer:** Unfortunately, we ultimately had issues with the recording for this webinar. We have put together this document to capture what was discussed. Please use for training as needed.

Question: SIV case, whose SSN will follow later to him/her, should that be delayed provision?

Answer: This depends on what is documented. If you are able to document that the clients applied for their social security numbers prior to the start of their service period, then it can be reported as "Provided".

Question: For assistance applying for benefits does the application need to have been submitted w/ in the first 7 days or if the application has been started but we are waiting on further documentation can we report it as provided? **Answer:** Public benefits applications need to be submitted within 7 days of domestic arrival. If you begin the application and there is a delay in submitting the application caused by needing additional information, then be sure to note the reasons for delay and it would need to be reported as "Delayed Provision".

Question: We were told to wait 21 days and to take client to SSA office if SSN does not arrive. **Response:** In these cases, I would recommend reaching out to your FSC and possibly even the State Refugee Coordinator to help troubleshoot. Either way, if the application does not occur within 7 working days of arrival, it should be reported as "Delayed Provision"

Question: Does it have to be exact in number of days for 30 day Home Visit? **Answer:** No, the 30 day home visit needs to occur "within thirty (30) days of arrival". The second home visit would not be as informative if it occurs close to the date of the 24 hr home visit. But, so long as it does not occur after the 30th day of domestic arrival, the visit can occur prior to the 30th day of arrival.

Question: How young do children need to be to qualify one of the parents for caretaker status? **Answer:** The care giver exemption should only apply in cases with children under 1 year of age when they arrive to the U.S.

For anyone who might not know, Kip Van reviews the Period Reports for any missing information prior to submission to the Refugee Processing Center. There is a short time between when we receive the Period Reports from you and when it needs to be submitted to the RPC. So if you get an email or a request to amend your Period report, please be sure to respond promptly to this request.

Thank you everyone for participating in this webinar. Again, if you have any questions about what was covered during this presentation, please reach out to your designated FSC or to me

at dthomson@usccb.org.