

The National Child Traumatic Stress Network

Enhanced Post Release Services (ePRS)

ORR is pleased to partner with the grantees of the National Center for Traumatic Stress Network (NCTSN) to provide post release services to eligible unaccompanied alien children (UAC) and their sponsors who will require intensive services to maintain placement and/or continued services to ensure that continuity of care and services are not disrupted. Treatment and services provided by NCTSN grantees is funded through a grant from the Substance Abuse and Mental Health Services Administration (SAMHSA) of the U.S. Department of Health and Human Services.

Post Release Services (PRS) vs. ePRS

In order to promote the safety and well-being of UAC, after their release to a sponsor in the United States, certain categories of children, who display special needs, are referred to PRS. For cases where there is no safety risk in releasing a UAC to a sponsor, but additional assistance is required to connect the UAC and sponsor to needed resources (school enrollment, medical insurance, securing counsel, etc.) upon discharge from ORR custody, the case is likely to be referred to PRS.

Unlike PRS, Enhanced Post Release Services (ePRS) offers free intensive evidence-based trauma treatment with bilingual clinicians, family therapy and ongoing assessments to determine further therapeutic needs and resources to maintain UAC and sponsor/family relationships. ePRS will provide evidence-based treatment for those with significant trauma history and require specialized treatment to help minors and caregivers process traumatic events and learn skills to promote emotional and behavioral stability.

Who is eligible?

-UAC who is discharged or reunified with a sponsor in the following states: in New York, New Jersey, Massachusetts, New Mexico, Texas, Illinois, or Florida

AND (one of the following criteria)

- Discharged from secure, staff secure, or RTC with complex mental health condition and requires continued mental health treatment (medication management, individual/ family therapy)
- Complex medical condition requiring intensive case management and support services
- At-risk for placement disruption (i.e.: family preservation, minor's acting out behaviors, family's reluctance to engage in treatment, sponsor arrested, etc.)

Referral Process (see flow chart)

(UAC/ Sponsor case acceptance)

1. PRS Team identifies the need for ePRS.
2. PRS Team offers ePRS to UAC/ Sponsor
3. UAC/ Sponsor accepts ePRS

4. PRS Provider makes referral to NCTSN & CC's (ORR; ePRS POC: Michelle.Sheedy@acf.hhs.gov)
5. NCTSN Grantee receives referral
6. NCTSN Grantee reviews referral
7. NCTSN Grantee accepts ePRS referral
8. NCTSN contacts family to engage in services
9. UAC/ Sponsor accepts NCTSN services
10. NCTSN Grantee contacts PRS Team and PRS Provider, to advise UAC/ Sponsor begun services
11. PRS Release Team receives notification
12. PRS Release Team completes outstanding referrals/ interventions with the family
13. PRS Release Team closes case

UAC/ Sponsor declines services (see flow chart)

1. PRS identifies the need for ePRS
2. PRS Team offers ePRS to UAC/ Sponsor
3. UAC/ Sponsor declines ePRS but willing to continue with PRS
4. PRS Provider Team notifies PRS Provider that UAC/ Sponsor declines
5. PRS Release Provider notifies the Release Team and decision to continue PRS services
6. PRS Release Team continues to provide PRS to UAC/ Sponsor
7. NCTSN contacts PRS Team, PRS Provider, and ORR that UAC/ Sponsor has now accepted services
8. ORR Receives notification that UAC/Sponsor has accepted services and will continue to monitor
9. PRS Release Team completes outstanding referrals/interventions with the family
10. PRS Release Team closes the case