March 18, 2020

Lynn Johnson
Assistant Secretary
Administration for Children and Families
U.S. Department of Health & Human Services
330 C Street, S.W.
Washington, DC 20201

Dear Assistant Secretary Johnson,

I write to request information about policies and procedures the Office of Refugee Resettlement (ORR) has in place to prevent and manage the potential spread of COVID-19 to children in ORR-funded facilities.

We are in the midst of a global pandemic. To date, COVID-19 has infected at least 201,672 people worldwide, with at least 6,496 known cases within the United States.\(^1\) The pace of infection in the United States has rapidly increased; more than 1,100 of the confirmed diagnoses have been announced over the past few days.\(^2\) We need to take immediate action to stem the spread of, and exposure to, this disease.

In Fiscal Year 2019, the Department of Homeland Security referred nearly 70,000 unaccompanied children — also known as UACs — to ORR be placed in its care, with an average length of custody lasting 66 days.\(^3\) UACs are a uniquely vulnerable population, as they arrive in the United States without a parent or legal guardian. Accordingly, Congress and our federal courts have mandated that ORR meet particular standards with regard to the treatment, care, and placement of this population. Among other obligations, care providers funded by ORR must give UACs routine medical care, have written safety plans that address medical emergencies and disease outbreaks, and meet all state and

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local requirements for licensing and public health. It is critical that, during this outbreak, facilities under ORR’s purview satisfy these obligations.

It is our responsibility to effectively limit exposure to this disease and prepare to manage outbreaks of COVID-19. This responsibility is especially serious when it comes to the care of vulnerable children. Accordingly, I ask that you respond to the following questions and provide the information requested by April 1, 2020:

1. Please provide ORR directives, instructions, policies, memos, or guidance, written or communicated by any other means, relating to the prevention and management of any potential outbreak of COVID-19 within ORR-funded shelters.
2. Were any of the materials responsive to Question No. 1 drafted in consultation with the Centers for Disease Control and Prevention (CDC) or other public health experts? Please identify those agencies and officials who assisted in preparing these materials.
3. How do facilities plan to identify UACs in ORR custody who are at heightened risk for infection or complications due to infection, such as those with compromised immune systems or chronic illnesses? What direction has ORR provided to these facilities about care for UACs with heightened risks?
4. With regard to UACs in its custody, how does ORR plan to abide by CDC and White House recommendations to avoid gatherings and social interactions of more than ten people? What other measures is ORR implementing to limit exposure to COVID-19 and prevent an outbreak from occurring in its facilities?
5. What steps has ORR taken to ensure adequate staffing levels should shelter staff become infected or placed on quarantine?
6. What policies and procedures does ORR have in place to limit the spread of COVID-19 should an outbreak occur in its facilities?
7. How does ORR plan to ensure that UACs who become exposed to, or infected with, COVID-19 receive adequate medical care?
8. How will ORR track and collect data with regard to COVID-19 infections within its facilities?
9. Will ORR notify Congress of an outbreak of COVID-19, or request any resources that ORR needs under this circumstance?

Sincerely,

Edward J. Markey
United States Senator

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