



Referrals from Nongovernmental Organizations

Second Quarter, Fiscal Year 2022

December 28, 2022

Fiscal Year 2022 Report to Congress



**Homeland
Security**

U.S. Immigration and Customs Enforcement

Message from the Acting Director

December 28, 2022

I am pleased to present the following report, “Referrals from Nongovernmental Organizations,” for the second quarter (Q2) of Fiscal Year (FY) 2022, which has been prepared by U.S. Immigration and Customs Enforcement (ICE).

This report was compiled pursuant to requirements in the Joint Explanatory Statement accompanying the FY 2022 Department of Homeland Security (DHS) Appropriations Act (P.L.117-103).

Pursuant to Congressional guidelines, this report is provided to the following Members of Congress:

The Honorable Lucille Roybal-Allard
Chairwoman, House Appropriations Subcommittee on Homeland Security


The Honorable Chuck Fleischmann
Ranking Member, House Appropriations Subcommittee on Homeland Security

The Honorable Chris Murphy
Chair, Senate Appropriations Subcommittee on Homeland Security

The Honorable Shelley Moore Capito
Ranking Member, Senate Appropriations Subcommittee on Homeland Security

Inquiries related to this report may be directed to the ICE Office of Congressional Relations at (202) 732-4200.

Sincerely,



Tae D. Johnson
Acting Director
U.S. Immigration and Customs Enforcement



Executive Summary

The Joint Explanatory Statement accompanying the FY 2022 DHS Appropriations Act (P.L. 117-103) directs ICE to consider enrollment referrals from nongovernmental organizations (NGO) and community partners that actively are implementing ICE's Alternatives to Detention (ATD) programs utilizing case management. ICE is directed further, in consultation with relevant NGOs and local community partners, at ICE's discretion, to establish criteria for such referrals, guidelines for submission, and criteria for how ICE will consider any such referrals for enrollment in ATD programs. This report outlines ICE compliance for Q2 of FY 2022 with congressional guidelines regarding enrollment referrals from NGOs and community partners that actively are implementing ICE's ATD programs that utilize case management.



Referrals from Nongovernmental Organizations Second Quarter, Fiscal Year 2022

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I. Legislative Requirement

This report responds to the direction set forth in the Joint Explanatory Statement accompanying the Fiscal Year (FY) 2022 Department of Homeland Security Appropriations Act (P.L. 117-103).

The Joint Explanatory Statement states:

ATD Referrals.—ICE shall consider enrollment referrals from NGOs and community partners that are actively implementing ICE’s ATD programs that utilize case management. ICE shall establish, with the consultation of relevant NGO and local community partners, at ICE’s discretion, criteria for such referrals, guidelines for submission, and criteria for how ICE will consider any such referrals for enrollment in ATD programs. ICE shall submit a report to the Committees on progress regarding these guidelines within 60 days of the date of enactment of this Act and quarterly thereafter until the guidelines are finalized.

II. Background

Alternatives to Detention (ATD) is a monitoring program that uses technology and case management to improve compliance with release conditions and to facilitate compliance with court hearings and final orders of removal. The ATD program allows noncitizens to remain in their community—contributing to their families and community organizations and, if necessary, concluding their affairs in the United States—as they move through immigration proceedings or prepare for departure.

The ATD program may be appropriate for a noncitizen who is released pursuant to an Order of Release on Recognizance, an Order of Supervision, a grant of parole, or a bond (unless an immigration judge or the Board of Immigration Appeals has determined custody and did not include ATD as a provision). To be eligible for the ATD program, participants must be at least 18 years of age, be removable from the United States, and be pending or actively in formal immigration removal proceedings or subject to a final order of removal.

ATD is currently available in more than 260 locations nationwide for eligible participants residing within all 25 U.S. Immigration and Customs Enforcement (ICE) areas of responsibility (AOR). The program allows ICE to monitor a portion of nondetained cases more closely. The level of supervision and technology to which an ATD participant is assigned is based upon criteria that includes, but is not limited to, current immigration status, criminal history, compliance history, community or family ties, status as a caregiver or provider, and other humanitarian or medical conditions.

The ATD program is carried out with the support of a government contractor, currently BI Incorporated (BI), that supervises participants through a combination of home visits, office visits, alert response, court tracking, and technology. BI operates under a contract called the Intensive Supervision Appearance Program (ISAP), which is currently in its fourth iteration (ATD - ISAP IV). Under ATD - ISAP IV, ICE Enforcement and Removal Operations (ERO) ATD officers have discretion to determine the frequency of home and office visits, and the types of technology used (telephonic, global positioning system, or SmartLink), and court and alert management to use. Case management levels and technology assignments can be reviewed and adjusted by the ATD officer at any time depending upon changes in a participant's circumstances and compliance. BI case specialists (CS) provide case management for program participants and assess and determine appropriate referrals for program participants to facilitate community stabilization.

While ATD - ISAP IV provides a substantial amount of case management services, a significant number of services and participant needs cannot be fulfilled through the traditional case management services historically provided in the ISAP contract.¹ To ensure that participants

¹ Under ATD – ISAP IV, the contractor refers participants to local resources based upon the participant's individual needs. Service referrals under ATD – ISAP IV include, but are not limited to, assistance with school enrollments, medical care as needed (vaccinations, referrals for emergent care centers, etc.), food assistance, clothing assistance, and immigration attorney referrals using the approved Department of Justice list of low- to no-cost attorneys.

have access to these services, BI subcontracts with nongovernmental organizations (NGO) to fulfill these needs and help with participant stabilization. These functions are known as wraparound stabilization services (WSS), which are a subset of services provided in the ISAP-IV contract.

Wraparound Stabilization Services

1. Criteria

WSS are designed for vulnerable populations² who have significant challenges and would benefit from additional stabilization services. WSS are available at contractor sites, to include 101 locations covering all AORs, and all services are voluntary. WSS screenings for possible need for additional services and education groups are offered to all participants receiving case management support by the ATD - ISAP IV vendor.³ Currently, ICE ERO refers ATD participants for a Supplemental Services Evaluation (SSE) to NGOs through the ATD - ISAP IV contract. The NGO conducts the SSE and recommends if services are needed based on its assessment. If the NGO is recommending services, the NGO submits a Plan of Care/Treatment Plan for the ATD participant to ERO for services through the ATD - ISAP IV contractor. ERO reviews the Plan of Care/Treatment Plan submitted by the NGO and either approves or disapproves the service based on program criteria.

2. Challenges

Since ICE first implemented WSS as a contract modification to the ATD – ISAP III contract, several challenges have prevented both higher referrals for WSS and further engagement in service offerings for participants. The most significant factor affecting the volume of referrals is the NGO community’s lack of the resources necessary to handle all potential referrals. While NGOs continue to expand with more locations and more hiring, they are only able to handle a fraction of new participants assigned to ATD - ISAP IV. Other challenges include:

- The Coronavirus Disease 2019 (COVID-19) pandemic: Because of state limitations on in-person gatherings in response to COVID-19, CSs and NGOs were unable to provide contractual services to participants. Many services were provided only in a face-to-face environment in office settings or groups. The WSS and case management services provided by ICE Headquarters (HQ)–ATD, BI, and NGOs largely had to shift over time from in-person to virtual. The transition to the virtual environment was both time-consuming and challenging, particularly for services requiring residence verifications to ensure that participant needs had been met.
- Cumbersome identification and referral process: Because of a substantial increase in program participants without a proportional increase in resources to manage the population, it became increasingly challenging to identify and refer participants for appropriate evaluation and services. To ensure that all new participants are given an appropriate evaluation for supplemental services, ICE HQ–ATD has developed guidance

² Examples of vulnerable populations include, but are not limited to, victims of human smuggling/trafficking, victims of significant or violent crimes, and those suffering from post-traumatic stress disorder.

³ Services provided directly through WSS include trauma-informed education and care, human trafficking screenings, trafficking group educations, family and individual therapy and rehabilitation, supplemental services evaluation, parenting education sessions, child abuse prevention orientation, and repatriation support services as necessitated based on an individual needs assessment.

to refer all new participants automatically for an evaluation instead of waiting for the CS to identify a need.

III. Results/Data Report

A. Current Providers

WSS functions are provided in the following locations, as of March 31, 2022:

WSS Provider	Location	Total Number of Locations
A Quarter Blue	Los Angeles, CA	2
	Santa Ana, CA	
Bethany Christian Services	Atlanta, GA	25
	Bakersfield, CA	
	Boston, MA	
	Bronx, NY	
	Chicago, IL	
	Delray, FL	
	Denver, CO	
	Dover, DE	
	Fresno, CA	
	Grand Rapids, MI	
	Hartford, CT	
	Los Angeles, CA	
	Manhattan, NY	
	Marlton, NJ	
	Miami, FL	
	Newark, NJ	
	Norfolk, VA	
	Orlando, FL	
	Philadelphia, PA	
	Providence, RI	
	Queens, NY	
	Richmond, VA	
	San Bernardino, CA	
San Diego, CA		
Tampa, FL		
Endeavors	Atlanta, GA	39
	Birmingham, AL	
	Boston, MA	
	Bronx, NY	
	Charleston, SC	

WSS Provider	Location	Total Number of Locations
	Charlotte, NC	
	Chicago, IL	
	Dallas, TX	
	Detroit, MI	
	El Paso, TX	
	Fort Myers, FL	
	Fresno, CA	
	Gadsden, AL	
	Houston, TX	
	Indianapolis, IN	
	Los Angeles, CA	
	Manhattan, NY	
	Marlton, NJ	
	Miami, FL	
	New Orleans, LA	
	Newark, NJ	
	Omaha, NE	
	Orlando, FL	
	Providence, RI	
	Provo, UT	
	Queens, NY	
	Richmond, VA	
	Sacramento, CA	
	Salt Lake City, UT	
	San Antonio, TX	
	San Bernardino, CA	
	San Diego, CA	
	San Francisco, CA	
	Santa Ana, CA	
	Seattle, WA	
	Silver Spring, MD	
	South Houston, TX	
	Tampa, FL	
	Ventura, CA	
Family Success	Birmingham, AL	2
	Gadsden, AL	
International Institute of Los Angeles	Los Angeles, CA	3
	San Bernardino, CA	
	Santa Ana, CA	

WSS Provider	Location	Total Number of Locations
Lutheran Social Services	Atlanta, GA	11
	Baltimore, MD	
	Detroit, MI	
	Grand Rapids, MI	
	Manassas, VA	
	Norfolk, VA	
	Omaha, NE	
	Richmond, VA	
	Salisbury, MD	
	Silver Spring, MD	
	Washington, DC	
North Star Family Center	Fresno, CA	4
	Phoenix, AZ	
	Sacramento, CA	
	Santa Maria, CA	
Project Help	Fort Myers, FL	1
Ser Familia	Atlanta, GA	1
Stars Behavioral Health Group	Los Angeles, CA	2
	Santa Ana, CA	
Survivors' Pathway	Miami, FL	1
Trauma Resolution Center	Miami, FL	1
U.S. Conference of Catholic Bishops	Houston, TX	9
	Los Angeles, CA	
	Louisville, KY	
	Miami, FL	
	Newark, NJ	
	Salt Lake City, UT	
	San Antonio, TX	
	San Diego, CA	
	South Houston, TX	
Total		101

B. Referral Increase

FY 2022 has seen two new offices referring participants to WSS. Additionally, the vast majority of referring offices are on track to meet or exceed the number of referrals that were made in FY 2021.

Office Totals by Fiscal Year⁴				
Office	FY 2020	FY 2021	FY 2022 Through Second Quarter (Q2)	Total
Atlanta	84	636	540	1,260
Bakersfield	-	852	68	920
Baltimore	33	189	162	384
Birmingham	-	-	111	111
Boston	30	293	136	459
Bronx	-	192	424	616
Charleston	-	282	209	491
Charlotte	-	247	211	458
Chicago	-	386	471	857
Dallas	-	230	90	320
Delray	16	512	717	1,245
Denver	-	-	163	163
Detroit	-	12	152	164
Dover	-	216	125	341
El Paso	-	100	157	257
Fort Myers	-	50	310	360
Fresno	-	363	837	1,200
Gadsden	-	296	107	403
Grand Rapids	114	130	213	457
Hartford	23	225	216	464
Houston	48	185	174	407
Indianapolis	-	37	378	415
Los Angeles	68	752	2,618	3,438
Louisville	2	90	-	92
Manassas	39	470	142	651
Manhattan	-	137	301	438
Marlton	36	111	132	279
Miami	116	2,194	873	3,183
New Orleans	-	-	42	42
Newark	46	149	366	561

⁴ WSS began February 2020. The numbers were reported by BI on March 31, 2022.

Office	FY 2020	FY 2021	FY 2022 Through Q2	Total
Norfolk	-	-	13	13
Omaha	111	317	256	684
Orlando	14	351	266	631
Philadelphia	45	301	183	529
Phoenix	-	-	196	196
Providence	-	40	35	75
Provo	-	47	45	92
Queens	-	186	546	732
Richmond	-	247	625	872
Sacramento	-	-	158	158
Salisbury	-	46	34	80
Salt Lake City	7	298	321	626
San Antonio	16	242	114	372
San Bernardino	-	133	121	254
San Diego	-	109	12	121
San Francisco	-	93	125	218
Santa Ana	-	139	219	358
Santa Maria	-	-	29	29
Seattle	-	-	222	222
Silver Spring	49	280	200	529
South Houston	20	230	256	506
Tampa	-	-	135	135
Ventura	-	263	80	343
Washington, D.C.	31	433	170	634
Total	948	13,091	14,806	28,845

C. Participation

Participation in WSS historically has been initiated by a participant’s BI CS, who identified any needs or concerns that could not be addressed through traditional ATD – ISAP IV capabilities. Upon the identification of need(s), the CS submitted a recommendation for a Mental Health Screening and Evaluation (MHSE)/SSE⁵ to the ATD monitoring officers (AMO) with the oversight of the Section Chief for review and approval of the request. The receiving AMO

⁵ The SSE includes an assessment by the NGO/service provider who will decide if mental health services are needed, and if so, will develop individualized treatment plans for the participant. Services provided directly through WSS include trauma-informed education and care, human trafficking screenings, trafficking group educations, family and individual therapy and rehabilitation, supplemental services evaluation; parenting education sessions; child abuse prevention orientation, and repatriation support services as necessitated based on an individual needs assessment.

reviewed for applicable recommendations as defined by the contract as well as for case accuracy and progress before endorsing a treatment plan. Upon approval, the CS coordinated the initial MHSE/SSE with the appropriate local NGO. After evaluating the participant, the NGO then provided the recommendation(s) for services under WSS to the CS, who subsequently requested approval for the services. The CS sent the recommendation to the Extended Case Management Services AMO for review and approval/denial. Upon approval, the CS performed all coordination with the appropriate NGO(s) for the services to be provided.

ICE streamlined the above process to respond to the significant increase of individuals and families crossing the southern land border, and to ensure that services are provided as quickly as possible. Specifically, ICE completed a contract modification to ensure that all participants who are enrolled into C-site⁶ or a G-site⁷ automatically are provided with the MHSE/SSE referral.

As of March 31, 2022, a total of 20,864 unique individuals were referred to WSS and 28,815 total WSS referrals were made. Approximately 98 percent of participants referred for any WSS have utilized at least one service. It is important to note that participants in WSS most likely will be referred to more than one service, and an individual may be counted twice or more in the count of total referrals, but still is only one unique individual. For example, an individual who attends an initial SSE may be referred later to individual and family therapy.

The following table and graph show the number of utilized and not-utilized referrals by year and month since February 2020:

Referrals by Status Over Time⁸				
Month/Year	Utilized	Not-Utilized	Total	Percent Utilized
February 2020	28	-	28	100.0%
March 2020	30	3	33	90.9%
April 2020	-	-	-	-
May 2020	179	164	343	52.2%
June 2020	53	43	96	55.2%
July 2020	114	9	123	92.7%
August 2020	142	5	147	96.6%
September 2020	171	9	180	95.0%
October 2020	152	11	163	93.3%
November 2020	189	18	207	91.3%
December 2020	147	4	151	97.4%

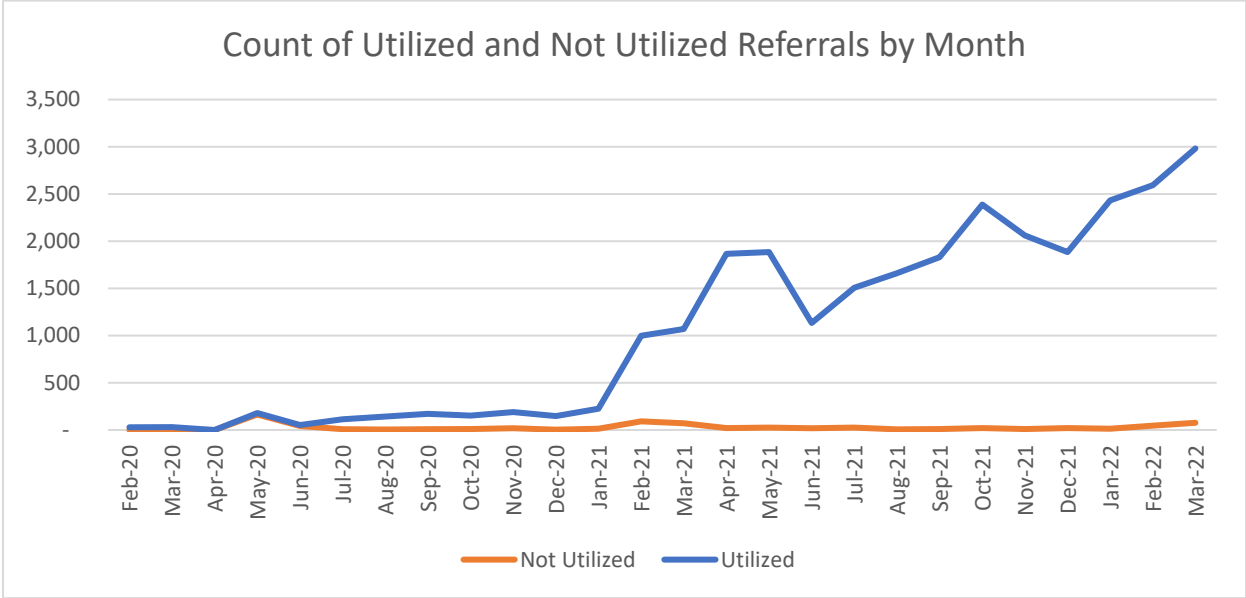
⁶ C-Sites are standalone facilities operated by the contractor to monitor participants selected for the ATD program. C-Site participants are assigned to a contractor CS who performs case management, including home and office visits.

⁷ G-Sites are locations where the contractor works within the local ICE ERO office. G-Sites are limited to a capacity of 250 participants, with two CSs who perform the same functions of a C-Site CS.

⁸ Includes Human Trafficking Education, which doesn't require ICE approval. Pending Status excluded. Month/Year based on Assigned Date.

January 2021	226	13	239	94.6%
February 2021	999	92	1,091	91.6%
March 2021	1,069	72	1,141	93.7%
April 2021	1,866	20	1,886	98.9%
May 2021	1,885	26	1,911	98.6%
June 2021	1,134	18	1,152	98.4%
July 2021	1,506	26	1,532	98.3%
August 2021	1,661	7	1,668	99.6%
September 2021	1,831	10	1,841	99.5%
October 2021	2,387	20	2,407	99.2%
November 2021	2,061	11	2,072	99.5%
December 2021	1,885	20	1,905	99.0%
January 2022	2,432	14	2,446	99.4%
February 2022	2,593	45	2,638	98.3%
March 2022	2,982	77	3,059	97.5%
Total	27,722	737	28,459	97.4%

It is important to note that for the April-June 2020 timeframe, while WSS were paused because of the COVID-19 pandemic, NGOs were developing solutions to create a “telehealth”-style service capability to continue providing services.



The following table is a breakdown of referrals by legal stage (prior to or following an order of removal) through FY 2022 Q2:

Unique Referrals by Legal Stage		
Legal Stage	Count	Percent
Pre-Order ⁹	18,619	89.24%
Post-Order	1,744	8.36%
Appeal	501	2.40%
Total¹⁰	20,864	100.00%

The following table is a breakdown of unique referrals by compliance through FY 2022 Q2:

Total Unique Referrals by Compliance		
Compliance Metric	Count	Percent
Success ¹¹	4,174	85.46%
Failure ¹²	710	14.54%
Total¹³	4,884	100.00%

Although WSS is relatively new and ICE is still in the early stages of monitoring compliance trends for participants, the preliminary data suggests participation in WSS increases compliance, specifically when comparing utilized referrals that were terminated and not-utilized referrals that were terminated.

The following table shows referrals utilized by compliance through FY 2022 Q2:

Utilized Referrals by Compliance		
Compliance Metric	Count	Percent
Success	4,010	85.72%
Failure	668	14.28%
Total¹⁴	4,678	100.00%

⁹ Approximately 89 percent of WSS referrals are Pre-Order participants at the time of first assigned date.

¹⁰ Unique count of participants based off oldest assigned date.

¹¹ Success Rate: Of those discontinued from the program, the percent of individuals who were compliant with ATD terms and conditions at the time of discontinuation.

¹² Failure Rate: Of those discontinued from the program, the percent of individuals who were not compliant with ATD terms and conditions at the time of discontinuation.

¹³ Unique count of participants based off oldest assigned date. Terminations only. Pending Status Excluded.

¹⁴ Unique count of participants based off oldest assigned date. Terminations only. Pending Status Excluded.

The following table shows referrals broken down by provider through FY 2022 Q2:

Referrals by Provider (NGO) ¹⁵				
Provider	Utilized Referrals	Not-Utilized Referrals	Total Referrals	% Share of Total Utilized Referrals
A Quarter Blue	33	4	37	0.1%
Bethany Christian Services	9,955	245	10,200	35.9%
Endeavors	10,883	236	11,119	39.3%
Family Success	276	1	277	1.0%
International Institute of Los Angeles	76	5	81	0.3%
Lutheran Social Services	2,822	30	2,852	10.2%
North Star Family Center	1,335		1,335	4.8%
Project Help	122	1	123	0.4%
Ser Familia	4	-	4	<0.1%
Stars Behavioral Health Group	657	33	690	2.4%
Survivors' Pathway	374	10	384	1.4%
Trauma Resolution Center	25	-	25	0.1%
U.S. Conference of Catholic Bishops	1,160	172	1,332	4.2%
Total	27,722	737	28,459	100.0%

¹⁵ Excludes Pending Status.

The following table is a breakdown of referrals by type of service¹⁶:

Type of Service	Utilized Referrals	Not-Utilized Referrals	Total Referrals	% Share of Total Utilized Referrals
Supplemental Services Evaluation ¹⁷	10,291	42	10,333	71.8%
Individual Therapy	1,764	59	1,823	12.3%
Human Trafficking Education	723	8	731	5.0%
Child Abuse & Prevention	520	6	526	3.6%
Parenting Education	384	3	387	2.7%
Individual Rehabilitation	326	18	344	2.3%
Trafficking Screening	181	4	185	1.3%
Family Therapy	148	7	155	1.0%
Repatriation	2	40	42	0%
Child Abuse & Prevention Orientation	1	-	1	0%
Total	14,340	187	14,527	100.0%

¹⁶ Excludes Pending Status.

¹⁷ The majority of referrals have been for SSEs.

IV. Analysis/Discussion

ICE remains committed to ensuring that all ATD program participants have the opportunity to address their immigration claims during immigration court process. ICE also understands the importance of ensuring that individuals and families with social, emotional, or familial needs are matched with appropriate resources. WSS has great potential to meet participant and family needs; however, ICE does not have enough data to determine the impact of WSS on participant compliance rates for court hearings, immigration obligations, or compliance with final orders of removal. ICE is developing metrics and methodologies to conduct comparative analyses covering the lifecycle of an immigration case, which can span several years.

V. Conclusion

ICE looks forward to working with its partners to expand and improve referrals for enrollment in ATD and case management services. ICE has taken several steps to streamline the referral process, to broaden service offerings, to increase participant access to needed services, and to improve participant compliance with release conditions. Based on the rate at which cases are processed through immigration court, it may be several years before ICE is able to gather the data needed for a comparative analysis to determine whether WSS are appropriate for long-term success.

Appendix: Abbreviations

Abbreviation	Definition
AMO	ATD Monitoring Officer
AOR	Area of Responsibility
ATD	Alternatives to Detention
BI	BI Incorporated
COVID-19	Coronavirus Disease 2019
CS	Case Specialist
DHS	Department of Homeland Security
ERO	Enforcement and Removal Operations
FY	Fiscal Year
HQ	Headquarters
ICE	U.S. Immigration and Customs Enforcement
ISAP	Intensive Supervision Appearance Program
MHSE	Mental Health Screening and Evaluation
NGO	Nongovernmental Organization
Q2	Second Quarter
SSE	Supplemental Services Evaluation
WSS	Wraparound Stabilization Service(s)