U.S. REPATRIATION PROGRAM TRAINING
Providing services for Certified Mentally incompetent repatriates
April 18, 2012
Webinar agenda:

- Welcome Remarks (Housekeeping)
- ISS information
- Legal authorities & Regulations:
  - 45 CFR 211
    Care and Treatment of Mentally Ill Nationals of the United States, Returned from Foreign Countries
- Core services
- Q & A Session
- Closing Remarks
Today you will:

1. Learn about the Repatriation of certified mentally ill individuals
2. Learn expected services to provide direct and indirect services to certified mentally ill repatriates
3. Be able to develop comprehensive plans involving community resources and ensuring compliance with legal guidelines.
International Social Service was established in 1924 in Geneva, Switzerland. The American Branch of International Social Work Federation, operating in 100 Countries is based in Baltimore, MD.

We promote resolutions in the best interests of children, adults and families separated by international borders.

We provide Intercountry social services, research, training, technical assistance and advocacy.

Non profit, non governmental agency selected by ORR to collaborate with States, DOS and ORR to provide repatriation assistance to returning adults, children and families.
The ISS-USA Team

Julie Rosicky, Executive Director; Stephney Allen, Director of Operations; Mi Chang, Casework Manager; Esther Keinkede, Finance Coordinator; Jennifer Gray, Database Coordinator; Salome Sullivan, Training Manager

Repatriation case managers
Audrey Sabiston, Case manager; Yalem Mulat, Case manager

Repatriation assistant
Bernice Whittington, Repatriation Assistant; Amanda Williams Repatriation Assistant
Successful partnership

Agencies working in the Repatriation Program in

DOS  |  ORR  |  ISS-USA  |  STATE & CBO's
Who can be repatriated as a mentally incompetent?

Any US citizen, US National and dependents of US citizens referred by the DOS that has been assessed overseas to be mentally ill or deemed *insane*. In most cases the person would be repatriated under a Certificate of Incompetence. In other cases under a Health and Safety exception.

John is a 33-year-old destitute US citizen in Israel, deported already several times from the same country. John received treatment for a mental illness in Israel.

A certificate of mental incompetence was provided by the assisting physician along with reports on his current diagnosis and medications.

He wants to return to Pennsylvania, his parent’s state of residence. John will be deported with two policemen and a nurse from Finland to the Port of Entry (POE) in Newark, NJ.

The nurse escort will hand over medical reports at the airport; upon arrival the repatriate will need a mental health evaluation.
Larry is a 49-year-old U.S. citizen in Australia. He is currently committed to a Medium Security Unit in a Psychiatric Hospital. He was convicted for criminal assault (wounding with intent). Despite of his mental illness Larry is capable of making his own decision. He will be released from his conviction the day of his deportation to return to the U.S. Australia is providing escorts to his final destination. Larry has relatives in Idaho who are willing to help him with resettlement. Post requests ISS to arrange a psychiatric evaluation upon arrival in the U.S.
Legal authority:

• The program takes its directives and guidance from the Social Security Act, Section 1313, Assistance for US Citizens Returned from Foreign Countries; PL 860571, Chapter 9, Hospitalization of Mentally Ill Nationals returned from Foreign Countries *

• Mental Health 45 CFR 211

*Note that the references to St. Elizabeth’s Hospital in the District of Columbia as a federal facility are no longer valid or applicable

* From the HHS, ACF website

Mentally ill: 45 CFR 211 (1)
Care and Treatment of Mentally Ill Nationals of the United States, Returned from Foreign Countries

2. Certificates
3. Notification to legal guardian, spouse, next of kin, or interested persons
4. Action under State law; appointment of guardian
5. Reception; temporary care, treatment, and assistance
6. Transfer and release of eligible person
7. Continuing hospitalization
8. Examination and reexamination
10. Request for release from hospitalization.
12. Financial responsibility of the eligible person; collections, compromise, or waiver of payment.

How is eligibility determined?

211.3 Certificates

- The DOS provides a written document affirming that the individual is a U.S. citizen

- (a) DOS obtains or transmit a certificate reporting that the individual has been adjudged mentally insane in a named foreign country OR

- (b) An appropriate person or authority (Only a certified medical practitioner can provide this information) submit a certificate stating that at the time of such certification the named individual was in need of care and treatment in a mental hospital.

Certificate of mental incompetence
Non-emergency referrals:

**DOS (Overseas)**
- Embassy to Washington DC

**ISS-USA**
- Assess the case and sends to ORR

**ORR**
- Approves or denies the case

**State or CBO**
- Receive the referral
- Provide Direct services
UNCLASSIFIED

MRN:

Date/TG:

Inv:

Action:

R.O.:

TAGS:

Captions:

Para Line:

Subject:

FIMED: REPARTITION OF Jane Smith

1. Name/DOB: Jane Smith, 1 March 1980, Texas
2. FPI: NO. 7378760000
3. Source of Funds Contacted: NA
4. Prior Post Action: NA
5. Privacy Act Waiver: Subject was unable to sign a PAW due mental incompetence. See Certificate of Mental Incompetence.
6. Total Assistance Required: NA
7. Desire to Return to U.S.: Yes
8. HHS Assistance: DEFBH assistance is required in meeting Mr. Smith at JFK Airport in New York. The psychiatric hospital that is currently treating her is willing to send a psychiatric escort to the POE in New York. She will need an escort from New York to final destination. She will need to be hospitalized upon arrival in Miami and has no health insurance.
10. Last Residence in U.S.: Unknown
11. Final Destination: Austin, Texas
12. Federal Benefits/SN: 000-00-0000
13. Reason for Departure: Subject had a psychiatric episode and was involuntarily committed to a psychiatric hospital by Israeli authorities. The order is good until 1 July 2012.
14. Diagnostic: Psychotic episode
15. Present Location: Haemat Hospital, Jerusalem
16. Attending Physician: Dr. Heller
17. Date Abl: 6 January 2012
18. Hospitalization Required: Possibly, will need diagnosis in Texas.
19. Medical Records: Medical records will be provided.
20. Medical Escort: Subject will be accompanied by a medical escort.
21. Escort to Final Destination: No, only to New York. Will need escort to Texas.
22. Special Requirements: Not yet known.
23. Remarks: According to Mr. Heller at Jerusalem, Am had arrived in Israel on 1 December 2011. She was admitted to the Psychiatric Ward on 2 December 2011. She is in an acute psychotic state, violent and catachital. This is more probably because she was on drugs and alcohol. Jane suffers from depression and anorexia. She can have manic attacks on a plate. She refused to take any medicine in the past. Dr. Heller said that Jane can only travel to the U.S. with a medical escort.

Medication: Sypnens, Vetoval and Cenazepam.

Privacy/PUI: This email is UNCLASSIFIED
211.4 Notifications

(a) Whenever an eligible person arrives in the United States from a foreign country, or when such person is transferred from one State to another, the Administrator shall, upon such arrival or transfer (or in advance thereof, if possible), provide for notification of his legal guardian, or in the absence of such a guardian, of his spouse or next of kin, or in the absence of any of these, of one or more interested persons, if known.

(b) Whenever an eligible person is admitted to a hospital pursuant to the Act, the Administrator shall provide for immediate notification of his legal guardian, spouse, or next of kin, if known.

What is Privacy Act waiver (PAW)?

The PAW is a document signed by the repatriate allowing DOS, HHS and ISS-USA and the state workers to release confidential information. The PAW identifies which agencies and/or specific individuals can be provided information. The PAW is essential because ISS-USA and state repatriation program staff frequently must discuss the repatriate’s situation, condition or needs with agencies or individuals. If the Repatriate refused or not able to sign the PAW and it’s not possible to obtain a Certificate of Mental Incompetence, according to DOS procedures, ACS staff has the authority to invoke the Health and Safety Exemption (HSE) making the decision for him/her regarding his/her repatriation.
Whenever an eligible person is incapable of giving his consent to care and treatment in a hospital, either because of his mental condition or because he is a minor, the agency will take appropriate action under State law, including, if necessary, procuring the appointment of a legal guardian, to ensure the proper planning for and provision of such care and treatment.

The term legal guardian:

Means a guardian appointed by a court, whose powers, duties, and responsibilities include the powers, duties, and responsibilities of guardianship of the person.

What is the procedure in your state?
Port of Entry of Final destination?

- Services at POE will be requested on case by case basis.
- Depending of the case repatriates can be deported to the nearest POE since the Foreign government is bearing the expenses for the repatriate returning.
- Client can remain in the POE until is stable to travel to final destination and some cases full services must be provided.
211.6 Reception; temporary care, treatment, and assistance:

(a) **Reception.** The agency will meet the eligible person at the port of entry or debarkation, will arrange for appropriate medical examination, and will plan with him, in cooperation with his legal guardian, or, in the absence of such a guardian, with other interested persons, if any, for needed temporary care and treatment.

(b) **Temporary care, treatment, and assistance.** The agency will provide for temporary care, treatment, and assistance, as reasonably required for the health and welfare of the eligible person. Such care, treatment, and assistance may be provided in the form of hospitalization and other medical and remedial care (including services of necessary attendants), food and lodging, money, payments, transportation, or other goods and services...

211.7 Transfer and release of eligible person:

(a) Transfer and release to relative. If at the time of arrival from a foreign country or any time during temporary or continuing care and treatment the Administrator finds that the best interests of the eligible person will be served thereby, and a relative, having been fully informed of his condition, agrees in writing to assume responsibility for his care and treatment, the Administrator shall transfer and release him to such relative.

(b) Transfer and release to appropriate State authorities, or agency of the United States. If appropriate arrangements cannot be accomplished under paragraph (a) of this section, and if no other agency of the United States is responsible for the care and treatment of the eligible person, the Administrator shall endeavor to arrange with the appropriate State mental health authorities of the eligible person's State of residence or legal domicile, ...

211.8 Continuing hospitalization

(a) Authorization and arrangements. In the event that appropriate arrangements for an eligible person in need of continuing care and treatment in a hospital cannot be accomplished under §211.7,(...) care and treatment shall be provided by suitable public or private hospital as the Administrator determines is in the best interests of such person.

(b) Transfer to other hospital. At any time during continuing hospitalization, when the Administrator deems it to be in the interest of the eligible person or of the hospital affected, the Administrator shall authorize the transfer of such person from one hospital to another and, where necessary to that end, the Administrator shall authorize the initiation of judicial proceedings for the purpose of obtaining a commitment of such person to the Secretary.

(c) Place of hospitalization. In determining the placement or transfer of an eligible person for purposes of hospitalization, the following factors will be considered: factors as the location of the eligible person's legal guardian or family, the character of his illness, duration and the facilities of the hospital to provide care and treatment.

Examination and reexamination.

Following admission of an eligible person to a hospital for temporary or continuing care and treatment, he shall be examined by qualified members of the medical staff as soon as practicable, but not later than the fifth day after his admission. Each such person shall be reexamined at least once within each six month period beginning with the month following the month in which he was first examined.

(a) **Discharge or conditional release.** If, following an examination, the head of the hospital finds that the eligible person hospitalized for mental illness (whether or not pursuant to a judicial commitment) is not in need of such hospitalization, he shall be discharged. In the case where hospitalization was pursuant to a judicial commitment, the head of the hospital may, in accordance with laws governing hospitalization for mental illness as may be in force and generally applicable in the State in which the hospital is located, conditionally release him if he finds that this is in his best interests.

(b) **Notification to committing court.** In the case of any person hospitalized under 211.8 who has been judicially committed to the custody of the Secretary, the Secretary will notify the committing court in writing of the discharge or conditional release of such person under this section or of his transfer and release under 211.7

211.11 Request for release from hospitalization.

If an eligible person who is hospitalized pursuant to the Act, or his legal guardian, spouse, or adult next of kin, requests his release, such request shall be granted by the Administrator if his best interests will be served thereby, or by the head of the hospital if he is found not to be in need of hospitalization by reason of mental illness. The right of the administrator or the head of the hospital, to refuse such request and to detain him for care and treatment shall be determined in accordance with laws governing the detention, for care and treatment, of persons alleged to be mentally ill as may be in force and applicable generally in the State in which such hospital is located, but in no event shall the patient be detained more than forty-eight hours (excluding any period of time falling on a Sunday or a legal holiday observed by the courts of the State in which such hospital is located) after the receipt of such request unless within such time (a) judicial proceedings for such hospitalization are commenced or (b) a judicial extension of such time is obtained, for a period of not more than five days, for the commencement of such proceedings.

211.12 Federal payments.

The arrangements made by the Administrator with an agency or hospital for carrying out the purposes of the Act shall provide for payments to such agency or hospital, either in advance or by way of reimbursement, of the costs of reception, temporary care, treatment, and assistance, continuing care and treatment, and transportation, pursuant to the Act, and payments for other expenditures necessarily and reasonably related to providing the same.

211.13 Financial responsibility of the eligible person; collections, compromise, or waiver of payment.

(a) For temporary care and treatment. If an eligible person receiving temporary care, treatment, and assistance, under the Act, has financial resources available to pay all or part of the costs of such care, he/she should be required to pay for such costs.

(b) For continuing care and treatment. Any eligible person receiving continuing care and treatment in a hospital, or his estate, shall be liable to pay or contribute toward the payment of the costs or charges therefor, to the same extent as such person would, if a resident for his care and maintenance in a hospital for the mentally ill in that jurisdiction.

(c) Collections, compromise, or waiver of payment. The Administrator may, in his discretion, where in his judgment substantial justice will be best served thereby or the probable recovery will not warrant the expense of collection, compromise, or waive the whole or any portion of, any claim for continuing care and treatment, and assistance (...)

211.14 Disclosure of information

(a) No disclosure of any information of a personal and private nature with respect to an individual obtained at any time by any person, organization, or institution in the course of discharging the duties of the Secretary under the Act shall be made except insofar:
   (1) As the individual or his legal guardian, if any (or, if he is a minor, his parent or legal guardian), shall consent;
   (2) As disclosure may be necessary to carry out any functions of the Secretary under the Act;
   (3) As disclosure may be directed by the order of a court of competent jurisdiction;
   (4) As disclosure may be necessary to carry out any functions of any agency of the United States which are related to the return of the individual from a foreign country, or his entry into the United States; or
   (5) As expressly authorized by the Administrator.

(b) An agreement made with an agency or hospital for care, treatment, and assistance pursuant to the Act shall provide that no disclosure will be made of any information of a personal and private nature received by such agency or hospital in the course of discharging the duties under such agreement except as is provided therein, or is otherwise specifically specifically authorized by the Administrator.

(c) Nothing in this section shall preclude disclosure, upon proper inquiry, of information as to the presence of an eligible person in a hospital, or as to his general condition and progress.
211.15 Nondiscrimination.

(a) No eligible person shall, on the ground of race, color, or national origin, be excluded from participation, be denied any benefits, or otherwise be subjected to discrimination of any nature or form in the provision of any benefits, under the Act.

(b) The prohibition in paragraph (a) of this section precludes discrimination either in the selection of individuals to receive the benefits, in the scope of benefits, or in the manner of providing them. It extends to all facilities and services provided by the Administrator or an agency to an individual, and to the arrangements and the procedures under this part relating thereto, in connection with reception, temporary care, treatment, and assistance, and continuing hospitalization under the Act.
Suggested pre-arrival activities:

- Contact the authorities in the airport to allow the ambulance and the worker to get to the gate.
- Contact CPS/APS in case of a minor / elderly coming to the care of the state.
- Conduct an ongoing search for resources available for the repatriate.
- Contact shelters available in the community for placement of single people and families or search for an inexpensive hotel if after hours.
- Contact the public assistance office to pre-apply or expedite benefits.
Also will be useful to:

- Locate the nearest state hospital and VA hospital to the airport in case of urgent medical need.
- Search for a mental health team to conduct an on-site evaluation in the airport (for a case involving a mentally incompetent repatriate).
- Contact the relatives if allowed by the PAW for emotional support or possible placement.
Core services at the state level:

1. Meet and greet at the Airport.
   a) Inform the repatriate about the program, especially that it is a loan.
   b) Provide a copy of the welcome package for the repatriate.
   c) Obtain signature on appropriate documents (e.g. repayment agreement form/ decline service form)

**The program is voluntary they can refuse services**
Safety and mental competency:

- If the repatriate signs a decline of service form, upon arrival at POE or at his/hers final destination. No services can be provided beyond this day.
- If the repatriate is deemed mentally insane overseas a team of mental health providers should once again examine whether the repatriate is mentally competent to make decisions. **Follow your local procedure**
- People can change their minds, if they need assistance they can reapply to the program anytime during the eligibility period.
Privacy Act and repayment agreement

Sample Tentative plan: A

1. Substance Abuse and Mental Health (SAMH), Hillsborough Adult Services, Nurse, and Tampa Coordinator will meet at Tampa Airport Police at 5:30 p.m. in the lobby on 05/20/11. Airport police is located on level 2, Second Floor, Departure Side Red. Team will wait in the lobby. There is a reserved room for the interview. Coordinator will go airside to meet client and bring her back to the team waiting in the room.
2. Nurse will complete physical.
3. SAMH will complete the mental health assessment.
4. Coordinator will conduct the interview and complete paperwork (get Repat signature if competent)
5. If the mental health assessment is positive (She is competent), Adult Services worker will escort her to Days Inn - Tampa North, 701 E. Fletcher Avenue, Tampa FL 33612. Days Inn phone number is 813-977-1550. The confirmation number is XXXXX and is paid in full by ISS for Thursday only since Repat is arriving after hours. Checkout time is 11 a.m. Friday morning.
6. On Friday morning, May 21st, Adult Services worker will pick her up at Days Inn before checkout time at 11 a.m. and transport her to Social Security to obtain proof of SSN verification, to DMV to obtain an ID, to the local food stamp office if needed, to get a bus pass, and to the Salvation Army by 3:30 p.m.
Tentative Plan B

1. Substance Abuse and Mental Health (SAMH), Hillsborough Adult Services, Nurse, and Tampa Coordinator will meet at Tampa Airport Police at 5:30 p.m. in the lobby on 05/20/11. Airport police is located on level 2, Second Floor, Departure Side Red. Team will wait in the lobby. There is a reserved room for the interview. Coordinator will go airside to meet client and bring her back to the team waiting in the room.

2. Nurse will complete physical.

3. SAMH will complete the mental health assessment.

4. Coordinator will conduct the interview and complete paperwork (get Repat signature if competent)

5. If mental health assessment is negative (not competent), she will be transported to MHC in Tampa until she is stable and no longer in crises. Once stable, then Adult Services worker will transport her to Salvation Army Shelter for lineup by 3:30 p.m. which is located at 1514 N. Florida Avenue, Tampa FL 33612.

6. On Friday morning, May 21st, Adult Services worker will pick her up at Days Inn before checkout time at 11 a.m. and transport her to Social Security to obtain proof of SSN verification, to DMV to obtain an ID, to the local food stamp office if needed, to get a bus pass, and to the Salvation Army by 3:30 p.m.
Personal Safety and aggressive repatriates:

- If repatriate exhibits aggressive behavior, follow your State’s established procedures for the situation.
- Notify the local police or call 911 for backup and assistance.
- If repatriate is taken into custody by the police, he/she would be released when no longer considered a threat to himself/herself or others.
For competent repatriates:

- If the repatriate is found competent to make decisions, the repatriate should be asked, whether he/she consents to receive services;
- If he/she consents to receive services, he/she must sign the repayment agreement to proceed.
- Follow the core procedure.
2. Transportation from the airport to the final destination

Arrange for transportation (by ambulance, van, car or Taxi) to go to hospital if POE is not final destination ensuring the repatriate is taken safely for placement in a shelter, hospital or nursing home.

3. Financial assistance (TANF)

Cash should be provided in accordance with need and should follow the equivalent TANF rate for the State (depending on family size per household).
4. Assistance finding a shelter or permanent housing

- If shelter is available, it is the first choice.

5. Assistance finding medical care or psychiatric care if needed:

- Arrange and ensure third party billing rate with the hospital / care facility
6. Case management follow-up:

- Assistance under the program can be provided for up to 90 days (Day 1 is the arrival day and it ends on the 90th calendar day after arrival).

- Assist the client in applying for public benefits and provide referrals.

- Submit timely applications for all eligible & appropriate benefits (to cover basic needs), Medicaid, Medicare, SSI, TANF (if eligible), Food Stamp, housing (shelter or permanent housing), job training etc.

- Create and oversee a self-sufficiency plan for the repatriate, assisting them towards becoming independent in 90 days or less
Other services...

7) Monitor case at different intervals to ensure eligibility.
8) Timely notification to ISS of any development on the case (change of address and benefits)
9) Close the case on or before 90 days
10) Provide feedback to ISS through a follow-up survey
Please remember

- **Any assistance** over $1500 is a high cost case.
- ORR must approve the request prior to proceeding with the plan.
- Submit request for extension or waiver recommendation as soon as possible.
Post-arrival

- After arrival confirm that all went as planned.
- Forward to ISS-USA case manager all loan repayment forms signed by the repatriate.
- ISS will inform DOS about the repatriate’s arrival and will remain the main POC for DOS.
Cases are closed before 90 days typically when:

- The repatriate basic needs are met, they have access to benefits, housing and appropriate care.
- HHS/ACF/ORR discovers that the repatriate has access to other sources of income.
- The repatriate who was destitute or without available resources overseas and upon arrival, is able to regain access to financial resources. (Example the Repatriate is receiving SSI, lost bank card and/or is a Veteran with benefits)
- The Repatriate dies upon arrival to the U.S.
Extensions

- Certain temporary assistance may be furnished beyond the 90 days period in the case of any citizen or dependent upon prior authorization by ORR.
- Temporary assistance may be extended if the eligible repatriate is handicapped in attaining self-support or self-care for such reasons as age, disability, or lack of vocational preparation;
- Extension requests for temporary assistance must be submitted to ORR or its grantee before the 90-eligibility day expires. (At least two weeks before the 90-day expiration). 90 days is counted from the date of arrival to the U.S. and includes each calendar day including holidays and weekends.
- Services can be extended for up to 9 months.
Repatriation Files:

- Maintain repatriates’ file in order and a secured location.
- Keep the records for three years from the date of final submission of the final of reimbursable expenses.
- Send to ISS any paper files or electronic records kept (older then 3 years) on any repatriates that you served during the last years. ISS-USA will cover shipping costs for these case files to be submitted to: 200 East Lexington Street, Suite 1700, Baltimore, MD 21202.
Waivers and Deferrals

- A formal request in writing must be submitted to ISS requesting a waiver. (Client or local case worker)
- Demographic and identifiable information must be provided
- The requests are evaluated based on financial need
  - Mandated by federal regulations
    - Public Law Title 45
    - Sec 211 and 212

Insufficient income available to repay debts.

HHS reviews, grants, defers, suggest payment plans, or denies all waiver requests.
Resources available:

- ISS List Serve, please add your name to our mailing list on the website if you haven’t already.
- ISS Website: www.iss-usa.org
- HHS ACF Website: http://www.acf.hhs.gov/programs/orr/programs/repatriation.htm
- ISS Staff
- 24 Hour emergency repatriation assistance by cell phone 410-591-4998
For more information:

Salome Sullivan
Repatriation Program Training Manager
International Social Service-USA
200 East Lexington Street, Suite 1700
Baltimore, MD 21202
Phone: 443-451-1205  Skype: ssullivan2
Fax: 443-451-1230
Email: ssullivan@iss-usa.org  www.iss-usa.org

“Bringing resolution across borders
Trayendo resoluciones entre fronteras”
Thank you!

With your help we are making a huge difference in the life of our repatriates.