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15 **UNITED STATES DISTRICT COURT**
16 **CENTRAL DISTRICT OF CALIFORNIA**
17 **WESTERN DIVISION**

18 JENNY LISETTE FLORES, *et al.*,

19 Plaintiffs,

20 v.

21 MERRICK B. GARLAND, Attorney
22 General of the United States, *et al.*,

23 Defendants.

Case No. 2:85-cv-04544-DMG

**REPLY IN SUPPORT OF MOTION
TO TERMINATE THE FLORES
SETTLEMENT AGREEMENT AS
TO THE U.S. DEPARTMENT OF
HEALTH AND HUMAN
SERVICES**

Hearing Date: June 21, 2024

Time: 10:00 a.m.

Hon. Dolly M. Gee

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FEDERAL REGISTER

Unaccompanied Children Program Foundational Rule (“*Foundational Rule*”),
89 Fed. Reg. 34,384 (Apr. 30, 2024)1, 15

1 **I. INTRODUCTION**

2 Plaintiffs’ Opposition to Defendants’ Motion to Terminate the *Flores*
3 Settlement Agreement (“FSA” or “Agreement”) reveals that their objective is to
4 maintain court jurisdiction over a federal agency that has been subject to judicial
5 oversight pursuant to a settlement that is now 27 years old, even though the agency
6 has adopted comprehensive regulations that are consistent with the FSA in every
7 way possible. Plaintiffs provide no legal justification for continued court oversight
8 once the Unaccompanied Children Program Foundational Rule (“Foundational
9 Rule”), 89 Fed. Reg. 34,384 (Apr. 30, 2024) (to be codified at 45 C.F.R. pt. 410),
10 goes into effect on July 1, 2024.

11 First, Plaintiffs do not dispute that the Foundational Rule provides numerous
12 protections for unaccompanied children in addition to those implementing the FSA.
13 In fact, they do not seek to enjoin the Rule or any parts of it—even those parts that
14 they criticize. Instead, Plaintiffs principally focus on the decisions by Texas, Florida,
15 and South Carolina to cease their licensing functions with respect to ORR-funded
16 programs as the reason that the Court should continue oversight pursuant to the
17 FSA.¹ But Plaintiffs do not and cannot seriously dispute that those state decisions in
18 the context of the significant influx of unaccompanied children in recent years,
19 constitute unforeseen and substantially changed circumstances that make
20 compliance with the FSA’s requirements for placement of children in state-licensed
21 facilities substantially more “onerous,” “unworkable,” and “detrimental to the public
22 interest.” ECF No. 1414 at 18 (citing *Rufo*, 502 U.S. at 384). Through the
23 Foundational Rule, ORR has developed a “suitably tailored” response to these
24 changed circumstances that aims to ensure the safety and well-being of
25

26
27 ¹ Currently, there are no delicensed programs in South Carolina; therefore, for the
28 purposes of the instant Motion, Defendants focus on Texas and Florida, where most
of ORR’s bed capacity is located. ECF No. 1414 at 7-8.

1 unaccompanied children without causing extraordinary disruption to ORR-funded
2 programs in Texas and Florida. *Rufo*, 502 U.S. at 383. Plaintiffs do not offer any
3 alternative to the Foundational Rule requirements addressing those changed
4 circumstances—except, presumably, decades more judicial oversight of an agency
5 program that no longer requires it. Moreover, Plaintiffs fail to acknowledge that
6 ORR should be accorded “latitude and substantial discretion” in how it chooses to
7 address the unavailability of state licensure in states that refuse to license ORR-
8 funded programs. *See Frew ex rel. Frew v. Hawkins*, 540 U.S. 431, 441-42 (2004).

9 Second, Plaintiffs identify three purported inconsistencies in the Foundational
10 Rule, but they are incorrect. Except for the state licensed placement requirements of
11 the FSA in relation to programs in states that refuse to license ORR-funded facilities,
12 the Rule fully and consistently implements the FSA.

13 Finally, Plaintiffs assert that partial termination of the FSA as to the U.S.
14 Department of Health and Human Services (“HHS”) is impermissible, even though
15 the Ninth Circuit has already held that partial termination of the FSA in relation to
16 HHS is permitted. *Flores v. Rosen (“Flores II”)*, 984 F.3d 720, 737 (9th Cir. 2020).
17 The Ninth Circuit saw no reason to prevent HHS from moving to partially terminate
18 the Agreement, and neither should this Court.

19 The FSA was designed as a temporary measure, to terminate by its own terms
20 upon the issuance of implementing regulations. As the Ninth Circuit explained, the
21 Agreement “would remain in effect until ‘45 days following [D]efendants’
22 publication of final regulations’ governing the treatment of detained minors.” *Flores*
23 *v. Sessions*, 862 F.3d 863, 869 (9th Cir. 2017); *see also* FSA ¶ 40. That time has
24 come. It is no longer equitable or in the public interest for a substantial portion of
25 the immigration system to be administered under a 27-year-old consent decree. The
26 Foundational Rule is consistent with the Agreement (and exceeds its protections in
27 multiple respects), and where it takes a modified approach, it provides a suitably
28 tailored response. This Court should therefore terminate the FSA as to HHS.

1 **II. ARGUMENT**

2 **A. Plaintiffs Misconstrue the Proper Legal Standards for Modification**
3 **and Termination of the FSA.**

4 Federal Rule of Civil Procedure 60(b)(5) provides that the Court may relieve
5 a party from “a final judgment, order, or proceeding [if] applying [the consent
6 decree] prospectively is no longer equitable.” Fed. R. Civ. P. 60(b)(5). This Rule
7 allows “a court to modify or vacate a judgment or order if a significant change either
8 in factual conditions or in law renders continued enforcement detrimental to the
9 public interest.” *Horne v. Flores*, 557 U.S. 433, 447 (2009) (internal quotation marks
10 omitted). Once a party carries its burden to show that changed circumstances warrant
11 relief from a consent decree, the court must grant relief “in light of such changes.”
12 *Id.*; *accord Flores II*, 984 F.3d at 741. Where, as here, the government seeks
13 changed-circumstance relief from an institutional reform decree, courts must apply
14 a “flexible approach” to “ensure that responsibility for discharging the
15 [government’s] obligations is returned promptly to the [government] and its officials
16 when the circumstances warrant.” *Horne*, 557 U.S. at *Id.* at 448–50. Courts must
17 consider “whether ongoing enforcement of the original order [is] supported by an
18 ongoing violation of federal law.” *Id.* at 454. If the government has implemented a
19 “durable remedy,” judicial oversight should cease. *Id.* at 450. The Foundational Rule
20 is a durable remedy—it comports with federal law, is far more protective than the
21 constitutional floor, and provides judicially enforceable legal requirements for HHS.
22 *See Reno v. Flores*, 507 U.S. 292, 302 (1993) (upholding much less protective prior
23 version of regulations against constitutional challenge); *Marshall v. Lansing*, 839
24 F.2d 933, 943 (3rd Cir. 1988) (stating that agency regulations “have the force of
25 law”).

26 Rule 60(b)(5) also permits a court to modify a decree if the modification is
27 “suitably tailored” to resolve problems created by changed circumstances. *Rufo*, 502
28

1 U.S. at 383. When ordering modification, a court should “preserve the essence of
2 the parties’ bargain” and consider what each side gained from the consent decree.
3 *Pigford v. Veneman*, 292 F.3d 918, 927 (D.C. Cir. 2002). “A court has the power to
4 order a changed-circumstances modification that effectively terminates the decree.”
5 *Smith v. Bd. of Educ. of Palestine-Wheatley Sch. Dist.*, 769 F.3d 566, 573 (8th Cir.
6 2014). This approach requires deference to the responsible government officials “to
7 resolve the intricacies of implementing a decree modification.” *Rufo*, 502 U.S. at
8 392. Deference is particularly appropriate where the government seeks relief from
9 orders or judgments concerning immigration. The Supreme Court has repeatedly
10 recognized that it is appropriate for the Legislature or Executive, not the Judiciary,
11 to determine how to respond to changed circumstances affecting immigration. *See*
12 *Mathews v. Diaz*, 426 U.S. 67, 81 (1976); *see also Flores*, 507 U.S. at 305-06;
13 *Arlington Heights v. Metro. Hous. Dev. Corp.*, 429 U.S. 252, 268, n.18 (1977);
14 *Hampton v. Mow Sun Wong*, 426 U.S. 88, 101, n.21 (1976). Here, as explained below
15 in Section II.B.2, the Foundational Rule implements a suitably tailored response to
16 Texas’ and Florida’s refusal to license ORR-funded programs. The parties agreed
17 that the FSA would terminate once the government published regulations
18 implementing the Agreement. Because HHS published consistent regulations to the
19 extent feasible and provided a suitably tailored response to the changed
20 circumstances, maintaining judicial supervision over HHS is no longer equitable.
21 Thus, the Court should grant relief from the FSA’s licensed program requirement
22 and terminate the FSA as to HHS.

23 Plaintiffs do not apply the proper legal standards. As an initial matter,
24 Plaintiffs summarily contend without explanation that complying with the FSA’s
25 licensed placements requirement is not “impossible” for ORR. ECF No. 1427 at 6
26 n.3. But a showing of “impossibility” is not the standard under the equitable prong
27 of Rule 60(b)(5), and Plaintiffs cite no cases in support of that proposition.
28 Modification may be granted where, as here, (1) “changed factual conditions make

1 compliance with the decree substantially more onerous;” (2) “a decree proves to be
2 unworkable because of unforeseen obstacles;” or (3) “enforcement of the decree
3 without modification would be detrimental to the public interest.” *Rufo*, 502 U.S. at
4 384. For the reasons set forth in Defendants’ Motion, ECF No. 1414 at 18-24, and
5 below in Section II.B.1, Defendants have clearly made these showings. Moreover,
6 Plaintiffs fail to acknowledge the deference due ORR’s assessment of the
7 operational implications of the decisions by Texas and Florida to cease state
8 licensing. *See Rufo*, 502 U.S. at 392, n.14 (rejecting the idea that institutional
9 concerns of government officials were “only marginally relevant” when the
10 government seeks modification or termination of a consent decree).

11 In addition, in arguing that the Foundational Rule’s “standard program”
12 requirement is not suitably tailored to the changed circumstances resulting from
13 certain states refusing to license ORR-funded facilities, Plaintiffs wrongly claim that
14 “Defendants are not entitled to deference” because “[l]icensing was a central part of
15 the Parties’ bargain and HHS itself has concluded that additional rules on federal
16 licensing are required.” *Id.* at 11. First, at no time has HHS said that federal licensing
17 is *required*. *See, infra*, Section II.B.2(c). It plainly is not.

18 Second, in *Frew*, 540 U.S. at 442, the Supreme Court recognized that
19 separation of powers “require that [government] officials with front-line
20 responsibility for administering the program be given latitude and substantial
21 discretion” in carrying out those obligations. *Frew* in no way suggested that the
22 government is not entitled to deference in how it responds to unforeseen changed
23 circumstances. Here, the Foundational Rule responds to the de-licensing efforts of
24 states by requiring ORR-funded programs in those states to continue to adhere to the
25 states’ licensing requirements and providing enhanced monitoring of those
26 programs. This response to the issue should be accorded deference, and the Court is
27 required to apply a “flexible standard.” *Rufo*, 502 U.S. at 380.

28 Finally, Plaintiffs wrongly invoke the standards set forth in the first prong of

1 Rule 60(b)(5). *See* ECF No. 1427 at 18. That prong provides for relief when the
2 judgment has been “satisfied, released, or discharged.” *See* Fed. R. Civ. P. 60(b)(5).
3 But Defendants have not moved for relief on those grounds, and thus all of Plaintiffs’
4 unsupported arguments about substantial compliance with the Agreement have no
5 relevance to the legal standards to be applied by this Court in deciding whether to
6 grant Defendants’ Motion.²

7 The Supreme Court has explained that the disjunctive language of Rule
8 60(b)(5) makes “clear that each of the provision’s three grounds for relief is
9 *independently* sufficient and therefore that relief may be warranted even if
10 petitioners have not ‘satisfied’ the original order.” *Horne*, 557 U.S. at 454 (emphasis
11 added). In *Horne*, the Supreme Court held that the court of appeals erred by focusing
12 its inquiry on “whether the original order had been satisfied” when the state officials
13 were making an argument based on whether prospective application was equitable.
14 *Id.* at 454. The Supreme Court held that focusing on the terms of the original order
15 led the court of appeals to “improperly substitute[] its own educational and
16 budgetary policy judgments for those of the state and local officials to whom such
17 decisions are properly entrusted.” *Id.* at 455. Accordingly, where, as here, a
18 petitioner makes a “changed circumstances” argument based on the equitable clause
19 of Rule 60(b)(5), a court errs by applying the legal standards relevant to the
20 “satisfied, released, or discharged” clause. *Id.*

21
22
23 ² Because Plaintiffs apply the wrong legal standard, Plaintiffs’ arguments about
24 Defendants’ purported failures to comply with the FSA should be rejected. ECF No.
25 1427 at 23-24. Plaintiffs’ assertions against HHS are not only irrelevant for purposes
26 of this Motion, but they also misrepresent the agency’s record of compliance.
27 Moreover, DHS’ purported record of compliance is also completely irrelevant here,
28 particularly given that DHS has not sought termination. Finally, the parties agreed
in December 2001, that the FSA would terminate once regulations were published—
not when substantial compliance was reached, as had previously been negotiated.
Compare FSA ¶ 40 (rev. Dec. 7, 2001) *with* FSA ¶ 40 (signed Jan. 13, 1997).

1 Plaintiffs cite *Freeman v. Pitts*, 503 U.S. 467, 491 (1992) extensively, but
2 *Freeman* did not discuss Rule 60(b)(5), let alone cast any doubt about the proper
3 standards for analyzing a changed-circumstances petition for relief under Rule
4 60(b)(5).³ ECF No. 1427 at 16. Similarly, *Jeff D. v. Otter*, 643 F.3d 278, 283–84 (9th
5 Cir. 2011)—a case relied upon by this Court in deciding Plaintiffs’ motion to enforce
6 and finding that noncompliance with the FSA precluded termination in 2019, *Flores*
7 *v. Barr*, 407 F.Supp.3d 909, 915-16 (2019)—also does not compel consideration of
8 substantial compliance in deciding Defendants’ instant Motion. In *Jeff D.*, unlike
9 here, defendants moved for vacatur under the first prong of Rule 60(b)(5) on the
10 ground that they satisfied the judgment, thus requiring a showing that defendants
11 substantially complied with the terms of the judgment. 643 F.3d at 283. The court in
12 that case did not consider a request for changed-circumstances modification.

13 In sum, by misapplying the proper legal standards for relief, Plaintiffs fail to
14 contend with the lessons of *Horne* and *Rufo*: freezing in place an outdated, judicially-
15 administered regime of immigration policy is unworkable and not in the public
16 interest given changes in the factual landscape. Denying the Executive Branch the
17 ability to confront and resolve new challenges based on a mechanical application of
18 a 27-year-old consent decree that was never intended to apply indefinitely frustrates
19 federal immigration policy, undermines the democratic process, interferes with core

21 ³ Defendants cited *Freeman* for the proposition that the Court should, in the
22 alternative, terminate the FSA as to all permissible portions of the Foundational Rule
23 if the Court declines to terminate the FSA as to HHS in its entirety. ECF No. 1414
24 at 25. That analysis, however, also does not require a retrospective analysis of
25 whether Defendants substantially complied with the terms of the FSA during prior
26 years. Indeed, the Ninth Circuit’s analysis for termination focused on whether the
27 2019 Rule was consistent with the FSA. *Flores II*, 984 F.3d at 741. (“Although the
28 Agreement itself contemplates termination upon the promulgation of *consistent*
regulations, it certainly does not follow that the executive branch retained the power
to bring about termination through the promulgation of *inconsistent* regulations.”).

1 executive branch functions, and impinges upon the separation of powers. The Court
2 should defer to ORR’s expertise in responding to the challenges it faces today and
3 terminate the FSA as to HHS. *Frew*, 540 U.S. at 441-42.

4 **B. Modification and Termination of the FSA as to HHS is Warranted**
5 **Under Rule 60(b)(5).**

6 Plaintiffs argue that the Court should deny Defendants’ request to modify and
7 terminate the FSA because (1) it is not “impossible” for ORR to comply with the
8 FSA’s licensed placement requirements and (2) the Rule is not “suitably tailored” to
9 the changed licensing circumstances in Texas and Florida. ECF No. 1427 at 2. Both
10 arguments are legally and factually wrong and should therefore be rejected.

11 **1. Plaintiffs Cannot Dispute Significant, Unforeseen Changed**
12 **Circumstances Warrant Modification and Termination of the FSA**
13 **as to HHS.**

14 There can be no serious dispute that the decisions by Texas and Florida to
15 cease licensing ORR-funded programs constitute an unforeseen changed
16 circumstance not contemplated by the parties in 1997 when they entered into the
17 Agreement. As Defendants explained in their Motion and the supporting Declaration
18 of Toby Biswas, these fundamental changes, in the context of the significant influx
19 of unaccompanied children in recent years, make compliance with the FSA’s
20 requirements for placement of children in state-licensed facilities in all cases
21 substantially more “onerous,” “unworkable,” and “detrimental to the public
22 interest.” ECF No. 1414 at 18 (citing *Rufo*, 502 U.S. at 384). Plaintiffs do not dispute
23 that ORR now receives about 120,000 referrals a year, versus less than 3,000 in
24 1997, *see* ECF No. 1414 at 7. Nor do Plaintiffs explicitly challenge Defendants’
25 explanation of the critical importance of ORR-funded programs in Texas, and to a
26 lesser extent Florida.

27 Notwithstanding these fundamental changes, Plaintiffs submit in a footnote
28 that “Defendants’ claim that complying with the Settlement’s licensing requirement
is ‘impossible’ is palpable hyperbole.” ECF No. 1427 at 6, n.3. But that misconstrues

1 Defendants’ Motion: Defendants observed that the states’ actions have made it
2 impossible for Texas and Florida providers to maintain state licensing, ECF No.
3 1414 at 18—which Plaintiffs do not and cannot dispute—and ceasing to operate
4 ORR funded programs in Texas and Florida would be exceedingly onerous,
5 unworkable, and detrimental to the program’s objectives—which Plaintiffs also do
6 not and cannot dispute. Moreover, the Court need not conclude it would be
7 “impossible” to operate without Texas and Florida programs because the applicable
8 legal standard is whether the change in factual conditions make compliance
9 “substantially more onerous,” “unworkable” or “detrimental to the public interest,”
10 for determining whether modification is warranted. Each standard clearly applies
11 here, and Plaintiffs do not claim otherwise.

12 In support of its “palpable hyperbole” assertion, Plaintiffs Opposition
13 confusingly suggest that “[i]f Defendants insist they suddenly need an immediate
14 solution, Defendants could comply with the Settlement by moving children out of
15 unlicensed facilities ‘as expeditiously as possible.’” ECF No. 1427 at 6, n.3 (quoting
16 FSA ¶ 12A.). To the extent that Plaintiffs actually argue that ORR can comply with
17 the FSA by moving all children out of Texas and Florida, Plaintiffs offer no support
18 or explanation for such a sweeping assertion, and the views of responsible
19 government officials who have knowledge about the operational realities of placing
20 and housing unaccompanied children in the current climate—and whose views are
21 to be accorded deference—are to the contrary. Defendants cannot stop placements
22 in Texas or Florida altogether. Nor can Defendants transfer *all* children who are
23 currently in or will be placed in Texas or Florida to other states, and Defendants’
24 opening brief explained a set of reasons why this would be against the best interests
25

26 ⁴ Defendants, of course, agree that children can and should be moved out of
27 “*specific*” Texas and Florida placements—just like they could be moved out of
28 specific licensed placements—if there are “unsafe conditions.” ECF 1427 at n.3

1 of unaccompanied children. ECF No. 1414 at 18-20.⁴

2 Second, Plaintiffs hypothesize that ORR could sue Texas and Florida “to
3 enjoin their blatant discrimination against the federal government,” citing *United*
4 *States v. California*, 921 F.3d 865, 878 (9th Cir. 2019). ECF No. 1427 at 6, n.3. But
5 the outcome of any such litigation would be uncertain and could require years of
6 litigation before any final judgment would be rendered. Other states could also cease
7 state licensing at any time. In any event, ORR must administer its program under the
8 framework that has now been in place since 2021 when these states initially refused
9 to license ORR-funded programs serving unaccompanied children.

10 For these reasons, Plaintiffs fail to show why a changed-circumstance
11 modification of the FSA’s licensing requirements in relation to programs in states
12 that refuse to license ORR-funded programs and termination as to HHS is not
13 warranted under Rule 60(b)(5). *See Horne*, 557 U.S. at 448; *Sys. Fed’n No. 91, Ry.*
14 *Employees’ Dep’t, AFL-CIO v. Wright*, 364 U.S. 642, 651 (1961) (quoting *United*
15 *States v. Swift & Co.*, 286 U.S. 106, 114–15 (1932)).

16 **2. The Foundational Rule Is Suitably Tailored to Significantly**
17 **Changed Circumstances Related to Licensed Placements.**

18 None of the reasons set forth in Plaintiffs’ Opposition provide any basis for
19 the Court to find that the Foundational Rule is not suitably tailored to the changed
20 circumstances related to licensed placements. First, as Defendants explained in their
21 Motion and further below, the Foundational Rule provides that programs in those
22 states must continue to meet their state licensing requirements and be subject to
23 enhanced monitoring. Second, Plaintiffs complain about the lack of independent
24 oversight by a child welfare agency but offer no viable alternatives to address a
25 fundamentally changed landscape, and the concerns they raise about the Rule’s

26 _____
27 (emphasis added). But that is an entirely different operational burden than moving
28 *all* children out of *all* placements in Texas and Florida.

1 requirements for oversight of delicensed programs are unfounded. Third, Plaintiffs
2 are wrong that the possibility of a future federal licensing rule means that termination
3 is premature. Finally, Plaintiffs are wrong that termination of the FSA as to HHS is
4 not in the public interest.

5 **a. The Foundational Rule Provides a Suitably Tailored**
6 **Response to the Unavailability of Licensed Placements.**

7 ORR has developed a response to changed circumstances in Texas and Florida
8 that aims to ensure the safety and well-being of unaccompanied children without
9 causing extraordinary disruption to ORR-funded programs. The FSA does not
10 account for possible delicensing by states and therefore does not address how to
11 respond to states' refusal to license ORR facilities. Nevertheless, the Foundational
12 Rule requires programs to adhere to state licensing requirements because state
13 "[l]icensure [requirements] have been important to the UC Program" for decades.
14 ECF No. 1414 at 9. The essential requirements for standard programs are included
15 in the Foundational Rule. The mechanisms by which ORR will ensure compliance
16 with those requirements will continue to be further developed and implemented
17 through subregulatory guidance and policy. *See, infra*, Section II(B)(2)(b).

18 The Foundational Rule reflects ORR's reasoned approach to placements in
19 Texas and Florida, based on decades of experience, by implementing all the elements
20 of the FSA's licensed placement requirement that ORR could implement without the
21 willingness of these states to license facilities serving unaccompanied children. As
22 Defendants' Motion explains, under the standard program provision of the
23 Foundational Rule, unaccompanied children must be placed in programs that comply
24 with state licensing standards and will receive the important advantage of having
25 placements near where they are apprehended. In addition, they will benefit from
26 enhanced monitoring and oversight provided by ORR, ACF's Licensing Team, and
27 the Office of the Ombuds.
28

1 Deference is due to Defendants’ judgment in this regard. *Jackson v. Los Lunas*
2 *Comm. Prog.*, 880 F.3d 1176, 1192 (10th Cir. 2018) (citing *Frew*, 540 U.S. at 441-
3 42 (2004)). “As public servants, the officials of the [government] must be presumed
4 to have a high degree of competence in deciding how best to discharge their
5 governmental responsibilities.” *Frew*, 540 U.S. at 442. The Court should defer to
6 ORR’s judgment on how best to address the issue and find that ORR has developed
7 a “suitably tailored” response that ensures safe conditions in ORR-funded programs
8 in Texas and Florida, thus accomplishing the overarching goal of the FSA.

9 **b. Plaintiffs’ Concerns About Lack of Oversight in Texas and**
10 **Florida Programs Are Unfounded.**

11 Plaintiffs argue that the Foundational Rule is inconsistent with the FSA
12 licensing requirement which is intended “to provide class members the essential
13 protection of regular and comprehensive oversight by an *independent* child welfare
14 agency.” ECF No. 1427 at 3. But that argument ignores the reality that there is no
15 independent child welfare agency that could play such a role in states that refuse to
16 license ORR-funded programs, nor do Plaintiffs identify such an agency.

17 ORR has developed several mechanisms to implement the Rule’s requirement
18 that programs in those states comply with their state’s licensing requirements even
19 though their states refuse to license ORR-funded programs. First, the Rule provides
20 for enhanced monitoring of facilities in states where the state refuses to license ORR-
21 funded facilities. *See* 45 C.F.R. § 410.1303(e). This monitoring will include more
22 frequent on-site visits and regular desk monitoring to ensure that programs are
23 complying with ORR’s policies and regulations. ECF No. 1414, Ex. A, ¶ 20.

24 Second, beginning July 1, 2024 (the Effective Date of the Rule), a team of
25 state licensing subject-matter experts in the HHS Administration for Children and
26 Families (“ACF Licensing Team”), will monitor all programs in states that refuse to
27 license ORR-funded programs so that ORR can ensure that these programs are in
28 compliance with the state licensing standards, as required by the Rule. *See* Defs.’

1 Ex. D, Supplemental Declaration of Toby Biswas (“Biswas Suppl. Decl.”) ¶ 6; *see*
2 *also* ECF No. 1414, Ex. A. This monitoring will include any new facilities that come
3 online in Texas and Florida. It will be conducted on the same frequency that the state
4 would conduct its monitoring and inspections and will require the same steps prior
5 to operation that would be required of any facility that is not yet licensed. *See* Defs.’
6 Ex. E, Declaration of Maxine M. Maloney (“Maloney Decl.”) ¶¶ 5-7.

7 Plaintiffs further complain that there is “no clear mechanism for children or
8 *anyone* to report abuse, neglect, or standards violations at unlicensed facilities.” ECF
9 1427 at 8-10. This is patently incorrect. As an initial matter, the Florida licensing
10 authority has not ceased to investigate complaints of abuse or neglect in ORR-funded
11 programs, so Plaintiffs’ concerns have no application to Florida. Biswas Suppl. Decl.
12 ¶ 16. With respect to Texas, state law enforcement continues to investigate suspected
13 criminal conduct, and ORR continues to refer suspected sexual offenses to the FBI
14 and HHS OIG, but the relevant state authorities have ceased responding to potential
15 licensing violations and to allegations that do not rise to the level of a crime.
16 Accordingly, since March 2022, ORR has filled that role by conducting in-depth
17 reviews of child abuse or neglect allegations at ORR care provider facilities in Texas.
18 *Id.* ¶ 18. Going forward, ORR will investigate allegations of abuse and neglect at its
19 Texas facilities, but now through a dedicated Division of Investigations, which will
20 be comprised of federal employees with prior investigation experience. *Id.* ¶ 14. The
21 new investigators will begin their work on July 1, 2024 (the Effective Date of the
22 Rule). *Id.*⁵

23 _____
24 ⁵ ORR has substantially completed drafting an Interim Final Rule (“IFR”)
25 concerning investigations of child abuse and neglect in states that do not perform
26 such functions for ORR-funded programs, currently only Texas. The draft IFR
27 would require care providers in such states to provide additional means for children
28 in their care and stakeholders to report abuse or neglect, including direct reporting
to ORR; clarify the responsibilities of investigators and the processes for

1 Additionally, the Rule expressly provides requirements for all care providers
2 to report any incidents affecting an unaccompanied child’s safety and well-being
3 (e.g., significant incidents, emergency incidents, or program-level events) to ORR
4 and other applicable authorities, like the FBI, and specifies required follow-up
5 activities for both ORR and the care provider. *See* 45 C.F.R. § 410.1303(g); *see also*
6 Biswas Suppl. Decl. ¶ 8. Moreover, the Rule creates an Office of the Ombuds, which
7 will serve an important mechanism for unaccompanied children and stakeholders to
8 raise concerns about ORR policies and practices to an independent body that is
9 tasked with investigating those complaints. ECF No. 1414 at 13. Plaintiffs complain
10 that the ombudsperson lacks enforcement authority, ECF No. 1427 at 9, but ignore
11 that the ombudsperson is empowered to refer concerns to the HHS Office of the
12 Inspector General and other federal agencies such as the U.S. Department of Justice
13 that do have enforcement power.

14 Plaintiffs also fail to acknowledge the role that the HHS OIG and Congress
15 play in providing oversight of ORR-funded programs, including specific care
16 provider facilities. And they fail to mention that, in relation to a number of important
17 provisions, unaccompanied children will have the ability to bring an APA challenge
18 for a violation of the Foundational Rule. This is not an agency that is left to its own
19 devices.

20 Finally, notwithstanding Plaintiffs’ criticisms, requiring accreditation by a
21 nationally recognized accrediting organization provides an additional and
22 substantial layer of protection for children in all facilities. *Cf.* ECF No. 1427 at 9.
23 Defendants recognize that accreditation is not a stand-alone substitute for state
24

25
26 investigation; provide for administrative review and appeal of substantiated claims
27 of abuse or neglect, and provide for barring individuals with sustained allegations
28 from being employed in ORR-funded programs or having any contact with
unaccompanied children in ORR-funded facilities. Biswas Suppl. Decl. ¶ 20.

1 licensing, but it is widely recognized as a “seal of excellence that indicates an
2 organization is committed to implementing and sustaining the implementation of
3 best practices in their field (i.e., child welfare, mental health, residential treatment,
4 etc.)” 89 Fed. Reg. 34,486 (Apr. 30, 2024). It therefore adds an important protection
5 for unaccompanied children by providing quality assurance and continuous
6 improvement of all standard programs by an independent organization.

7 For these reasons, the Foundational Rule and the steps taken by ORR to carry
8 out the requirements of the Rule suitably address the absence of state licensing in
9 Texas and Florida.

10 **c. Plaintiffs’ Argument that Modification and Termination of**
11 **the FSA is “Premature” in the Absence of a Federal**
12 **Licensing Rule Lacks Merit.**

13 Plaintiffs argue that modification and termination of the FSA is “premature”
14 because ORR’s expressed intent to develop a federal licensing rule in the future
15 means that ORR has not put in place a “durable remedy.” ECF No. 1427 at 5-6. This
16 argument lacks merit.

17 First, ORR has developed a durable remedy: the Foundational Rule, which
18 codifies the essential requirements of the FSA and is judicially enforceable.
19 Although the Rule does not require a standard program in a state that refuses to
20 license ORR-funded programs to be state licensed (since licensing is unavailable), it
21 requires those programs to nevertheless adhere to the state’s licensing standards.
22 This requirement ensures that programs provide what state licensing ensures: that
23 children are placed in programs strictly for children, programs have appropriate
24 staffing ratios, programs adhere to appropriate safety and health standards, and staff
25 are background checked, among many other things. If, in the future, ORR fails to
26 ensure that a program is not in compliance with state licensing standards, an APA
27 action could be brought to ensure compliance. Certainly, a durable remedy is in
28 place.

1 Second, federal licensing is not required—or even contemplated—by the
2 FSA, and the approach taken in the Foundational Rule to address the unavailability
3 of state licensing in Texas and Florida comes as close as possible to imposing the
4 standards that would apply to Texas and Florida if their states were willing to license
5 programs for all the reasons described above.

6 Third, while a potential federal licensing rule remains under consideration at
7 ORR, there are multiple decisions remaining to be made relating to the development
8 and implementation of a proposed federal licensing rule.

9 Finally, Plaintiffs make clear that they are not arguing that federal licensing
10 would be sufficient, but merely that “[u]ntil such regulations are published, neither
11 Plaintiffs nor the Court can assess whether they represent a suitably tailored
12 modification.” ECF No. 1427 at 5. But Plaintiffs argue the importance of oversight
13 by an *independent* child welfare agency, an element that could not be satisfied by a
14 federal licensing rule because licensing would be performed by the federal
15 government. Moreover, their comments on the proposed Foundational Rule did not
16 call for federal licensing, and in fact concluded by asserting, “In any event,
17 substituting federal licensure for state licensure is inconsistent with the FSA.” ECF
18 No. 1427-9, Ex. 7, at 9-10. ORR has already put in place a durable remedy in the
19 form of the Foundational Rule; there is no reason for this Court to wait for any future
20 developments. *Horne*, 557 U.S. at 450 (“If a durable remedy has been implemented,
21 continued enforcement of [a consent decree] is not only unnecessary, but
22 improper.”).

23 **d. Modification and Termination, not Continued Enforcement,**
24 **of the FSA as to HHS is in the Public Interest.**

25 Plaintiffs appear to suggest that the public interest requires that this Court
26 retain jurisdiction over a 27-year-old consent decree in perpetuity as to HHS because
27 no other oversight mechanism they deem sufficient exists. ECF No. 1427 at 10-11
28 (arguing that modification is not appropriate until Defendants’ remedy “provides

1 independent oversight comparable to state licensing and returns the Parties as nearly
2 as possible to their original bargain”). But the opposite is true. It would be
3 detrimental to the public interest for the Court to retain jurisdiction of a decades-old
4 consent decree when a durable remedy, in the form of a judicially enforceable Rule
5 that properly addresses unforeseen changed circumstances, is in place. The Supreme
6 Court has stressed that “the public interest and considerations based on the allocation
7 of powers within our federal system require that the district court defer to
8 [government officials] who have the primary responsibility for elucidating,
9 assessing, and solving the problems of institutional reform, to resolve the intricacies
10 of implementing a decree modification.” *Rufo*, 502 U.S. at 392.

11 For all these reasons, the Court should find that the Foundational Rule
12 provides a suitably tailored response to unforeseen and substantially changed
13 circumstances and terminate the FSA as to HHS.

14 **C. Plaintiffs’ Assertions of Other Inconsistencies with the FSA are**
15 **Incorrect.**

16 Plaintiffs argue that a few purported inconsistencies between the FSA and the
17 Rule precludes termination, but that argument rests on a misreading of those
18 provisions. And, in any event, the Rule reflects agency expertise in addressing the
19 latest challenges with input from the public. Such alleged inconsistencies provide no
20 reason to not terminate the Agreement as to HHS—particularly where Plaintiffs are
21 not seeking to enjoin any part of the Rule.

22 **1. Referrals from Remote Locations**

23 First, Plaintiffs allege that the Rule would allow “indefinite delay” in placing
24 unaccompanied children, who are apprehended in a “remote location,” in a standard
25 program, which is inconsistent with FSA Paragraph 12A.(4). But FSA Paragraph
26 12A.(4) does not apply to HHS. Rather, Paragraph 12A.(4), which was later
27 substantially incorporated into the TVPRA, applies to the *referring agency*, *i.e.*,
28 typically DHS. *See* 8 U.S.C. § 1232(b)(3) (requiring federal agency to transfer

1 unaccompanied children to HHS within 72 hours, absent exceptional
2 circumstances). It is the referring agency’s responsibility to transfer unaccompanied
3 children upon apprehension (wherever they are apprehended) to HHS within 72
4 hours, absent exceptional circumstances, pursuant to federal law.

5 **2. Secure and Heightened Supervision Facilities**

6 Second, Plaintiffs allege that the Rule impermissibly expands the criteria for
7 secure placement beyond the text of FSA Paragraph 21. But they conflate two
8 regulations: § 410.1101, which relates to *time frames* for initial placements in ORR
9 facilities after referral from another federal agency, and § 410.1105, which concerns
10 *criteria* for placing unaccompanied children in secure or heightened supervision
11 (formerly called staff secure or medium security) facilities.

12 Section 410.1101(d)(6)(i) allows for additional time in making an initial
13 placement if “the referring federal agency indicates that a child ‘[p]oses a danger to
14 self or others.’” This recognition of the need for extra time in some circumstances
15 does not alter the criteria for when secure placement is permitted—criteria that
16 Plaintiffs do not dispute are consistent with the FSA. Extra time in these infrequent
17 circumstances may be essential for ORR to receive sufficient information to
18 determine the appropriate level of placement.

19 In contrast, the actual criteria for placement in secure facilities, at
20 § 410.1105(a)(3), are fully consistent with the FSA, and limit the use of secure
21 facilities to a greater extent than is required by the FSA. Biswas Suppl. Decl. ¶¶ 21-
22 23.

23 Plaintiffs assert that FSA Paragraph 23⁶ only permits placement in *medium*
24 security facilities (referred to under the Foundational Rule as heightened supervision
25 _____

26 ⁶ Paragraph 23 says, “The INS will not place a minor in a secure facility pursuant to
27 Paragraph 21 if there are less restrictive alternatives that are available and
28 appropriate in the circumstances, such as transfer to (a) a medium security facility

1 facilities) as an alternative for a child who could otherwise be placed in a secure
2 facility under Paragraph 21. This is plainly not what Paragraph 23 says, and it would
3 make no sense if ORR could only place a child in a heightened supervision facility
4 if the extremely restrictive conditions applicable to secure facilities were met.

5 **3. Out-of-Network Placements**

6 Plaintiffs complain that the Rule exempts out-of-network (“OON”)
7 placements from the FSA Exhibit 1 minimum standards. ECF No. 1427 at 12. But
8 the FSA does not address or contemplate the use of OON placements. In fact,
9 Plaintiffs do not identify any requirement in the FSA related to OON placements.
10 Thus, the OON placement requirements in the Foundational Rule are not
11 inconsistent with the FSA. In any event, it would not be administratively feasible for
12 ORR to impose FSA Exhibit 1 requirements on an OON placement that “operates
13 under a single case agreement for the care of a specific child between ORR and the
14 OON provider.” *See* 45 C.F.R. § 1001; Biswas Suppl. Decl. ¶ 27. However, ORR
15 has developed multiple safeguards and protections for the rare occasions when an
16 OON placement is needed to ensure that the child’s needs for specialized care are
17 met. Biswas Suppl. Decl. ¶ 29.

18 **D. Termination of the Agreement as to HHS is Consistent with the Ninth** 19 **Circuit’s Decision in *Flores II*.**

20 Plaintiffs assert that termination of the FSA as to HHS is impermissible even
21 though the Ninth Circuit found partial termination entirely permissible as to HHS.
22 *See Flores II*, 984 F.3d at 737. Plaintiffs made a nearly identical argument to the
23 Ninth Circuit: that “the [FSA] nowhere contemplates piecemeal termination” and
24 Paragraph 40 does not permit termination in “drips and drabs.” *See Flores v. Barr*,
25 2020 WL 474840, No. 19-56326, Plaintiffs-Appellees’ Answering Brief at *42 (Jan.

26 _____
27 which would provide intensive staff supervision and counseling services or (b)
28 another licensed program. All determinations to place a minor in a secure facility
will be reviewed and approved by the regional juvenile coordinator.” FSA ¶ 23.

1 21, 2020). But the Ninth Circuit squarely rejected that argument, permitting HHS to
2 move to partially terminate the FSA in 2020. *See Flores II*, 984 F.3d at 737; *Id.*,
3 n.12. It would have been illogical for the Ninth Circuit to permit HHS to “move to
4 terminate those portions of the Agreement covered by the valid portions of HHS
5 regulations,” *id.* at 737, only to later find that partial termination was impermissible.
6 The parties briefed the partial termination question and the Ninth Circuit confirmed
7 that HHS could move to partially terminate the FSA if it “wishes . . . [to] do so.” *Id.*
8 737.

9 Plaintiffs argue that partial termination is inconsistent with Paragraph 40 of
10 the Agreement given the unitary nature of the Defendant (INS) in 1997 (and in 2001
11 when Paragraph 40 was modified). ECF No. 1427 at 15. By that same token, the
12 Agreement did not contemplate that the INS would be abolished. In 1997, when the
13 Agreement was signed between Plaintiffs and the now abolished INS, the INS was
14 responsible for apprehending, processing, detaining or releasing, and removing
15 unaccompanied (and accompanied) children. Today, those responsibilities are
16 clearly divided between DHS and HHS as provided in federal law. *See* 8 U.S.C.
17 § 1232; 6 U.S.C. § 279. These laws require cooperation between the two agencies,
18 but also provide for distinct responsibilities.

19 Plaintiffs also do not explain why under Rule 60(b)(5) the FSA should remain
20 in force as to HHS when there are consistent overlapping regulations also in effect.
21 It would make little sense to maintain court jurisdiction when concurrent consistent
22 HHS regulations are in effect simply because DHS has not promulgated regulations
23 related to its own independent responsibilities under the FSA. Plaintiffs appear to
24 argue that termination as to HHS is impermissible because DHS takes custody of
25 accompanied children. Plaintiffs take footnote 12 of *Flores II* out of context. *See*
26 ECF No. 1427 at 17. Footnote 12 first recognizes that “the government may move
27 to terminate those portions of the Agreement that are covered by the valid portions
28 of the HHS regulations,” thus making clear that partial termination is permissible.

1 Footnote 12 then states that “any motion to terminate” would need to “take into
2 account” that “the Agreement protects both unaccompanied and accompanied
3 minors.” *See Flores II*, 984 F.3d at 744 n.12. The Foundational Rule does not
4 adversely impact the rights of accompanied children who are solely within DHS’s
5 purview. Therefore, terminating the FSA as to HHS is entirely permissible.

6 Finally, as addressed in Section II.A, compliance with the FSA is not the
7 proper legal standard here—and DHS’s compliance is certainly not relevant to assess
8 whether termination is appropriate as to HHS. Consistent with the Ninth Circuit’s
9 decision in *Flores II*, the Court should terminate the FSA as to HHS.

10 **III. CONCLUSION**

11 It is not surprising that after the passage of 27 years, the problems addressed
12 by the Agreement would call for new solutions as “the passage of time frequently
13 brings about changed circumstances—changes in the nature of the underlying
14 problem, changes in governing law or its interpretation by the courts, and new policy
15 insights—that warrant reexamination.” *Horne*, 557 U.S. at 448. The Foundational
16 Rule is consistent with or exceeds the requirements of the FSA and reflects the
17 agency’s reasoned judgment on how to respond to unforeseen and substantially
18 changed circumstances. The Court should terminate the FSA as to HHS.

19
20 Dated: June 12, 2024

Respectfully submitted,

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CERTIFICATE OF SERVICE

I certify that on June 12, 2024, I served a copy of the foregoing pleading and attachments on all counsel of record by means of the District Court’s CM/ECF electronic filing system.

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