CALIFORNIA DEPARTMENT OF JUSTICE



ORI Notification Packet for Individuals utilizing an In-Home Supportive Services Care Provider Pursuant to Welfare and Institutions Code 15660

ELDER CARE EMPLOYERS WELFARE AND INSTITUTIONS CODE 15660

Please read this packet thoroughly as is contains information you will need to begin utilizing applicant live scan. Included are all of the appropriate DOJ forms you will be utilizing.

Background

The California Department of Justice (DOJ), Bureau of Criminal Information and Analysis (BCIA) provides criminal history information to employers of persons who are non-licensed and providing non-medical domestic or personal care to an aged or disabled adult in the adult's own home. This also includes applicants for In-Home Supportive Services or personal care services under Medi-Cal program administered by individual county agencies pursuant to Section 15660 of the Welfare and Institutions Code. No Federal Bureau of Investigation (FBI) background checks can be requested pursuant to this law.

As defined:

"Elder" means any person residing in this state, 65 years of age or older;

"Dependent Adult" means any person residing in this state between the ages of 18 and 64, who has physical or mental limitations which restrict his or her ability to carry out normal activities or protect his or her own rights.

"Request for Live Scan Service" Form (BCII 8016) for IHSS

Effective July 1, 2005, all applicant fingerprint submission must be transmitted electronically to the DOJ. The standard form available from the DOJ for requesting live scan service is the "Request for Live Scan Service" Form (BCII 8016). You must complete one form per applicant and 3 copies must be printed out for each individual to be taken to the live scan site for fingerprinting.

A copy of the BCII 8016 is included within this packet. The BCII 8016 contains an applicant's personal descriptor information along with your related data. This information along with an applicant's fingerprint images, are necessary for a live scan transaction to be submitted to the DOJ.

Please Note: The Employer Field on the BCII 8016 Form is a REQUIRED Field. As the employer, please enter your name, address, city, state and zip code. The DOJ utilizes these fields in order to accurately mail the DOJ Response to your address.

Applicant Processing Fees

Once you have provided the necessary form to your applicant, he/she can determine where to be fingerprinted. The DOJ applicant processing fee for Elder Care license is \$32, which is payable by you or the applicant at the live scan site.

Fingerprinting services are available at most local police departments, sheriff's offices or any public applicant Live Scan site. To find the sites nearest to your agency and a listing of their rolling fees, see http://ag.ca.gov/fingerprints/publications/contact.php.

Please note: The applicant must present valid photo identification when being fingerprinted. Expired identification information will not be accepted. In addition, the live scan site charges a fee for rolling the fingerprints of the applicant.

Applicant Background Check Status Inquiries

Due to the on-going fiscal crisis and hiring restrictions within State government, the California DOJ no longer has the resources to take phone calls or process follow-up inquiries from regulatory entities or individuals who have submitted a criminal offender record information search request through the DOJ or the Federal Bureau of Investigation (FBI).

Please utilize or advise your clients to use the automated Integrated Voice Response System (IVRS) at (916) 227-4557 to determine the status of the background check if the requesting agency does not have results within seven days and digital Live Scan fingerprints were submitted.

You will need the following information:

(1) the applicant's date of birth; and

(2) the 10-digit Automated Transaction Identifier (ATI) number that appears at the bottom of the DOJ form (BCII 8016) requesting Live Scan fingerprint background checks. The ATI number always appears in the following sequence: 1 LETTER; 3 NUMBERS; 3 LETTERS and 3 NUMBERS.

No Longer Interested (NLI) Form

It is your responsibility to immediately notify the DOJ when an applicant's employment has been terminated, if they were not hired or when an applicant or volunteer is not actually retained to the position for which they applied. Included in this packet is the NLI form you will complete and return to the DOJ for these purposes. Attorney General's Website

The Attorney General's website located at the following URL

The Attorney General's website located at the following URL: <u>http://ag.ca.gov/fingerprints/agencies.php</u> is an additional resource for your agency, which provides a wealth of information including Frequently Asked Questions, all the forms contained in this notification packet, contact information, locations of live scan sites and other important DOJ forms you may need for processing background requests.

STATE OF CALIFORNIA BCII 8016 (orig. 4/01; rev. 6/09)

REQUEST FOR LIVE SCAN SERVICE

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ORI (Code assigned by DOJ)		Authorized Applicant Type	
Type of License/Certification/F Contributing Agency Inform	Permit <u>OR</u> Working Title (Maximum 30 characters - i ation:	if assigned by DOJ, use exact title assigned)	
Agency Authorized to Receive Cri	minal Record Information	Mail Code (five-digit code assigned by D)OJ)
Street Address or P.O. Box		Contact Name (mandatory for all school	submissions)
City	State ZIP Code	Contact Telephone Number	
Applicant Information:			
Last Name		First Name	Middle Initial Suffix
Other Name (AKA or Alias) Last		First	Suffix
Date of Birth	Sex Male Female	Driver's License Number	
Height Weight	Eye Color Hair Color	Billing Number (Agency Billing Number)	
Place of Birth (State or Country)	Social Security Number	Misc. Number (Other Identification Number)	
Home Address Street Address or P.O.	Box	City	State ZIP Code
Your Number:OCA Number	(Agency Identifying Number)	Level of Service: DOJ	🗌 FBI
If re-submission, list origina (Must provide proof of reject		Original ATI Number	
Employer (Additional respo	nse for agencies specified by statute):		
Employer Name		Mail Code (five digit code assigned by D	OOJ
Street Address or P.O. Box			
City	State ZIP Code	Telephone Number (optional)	
Live Scan Transaction Com	npleted By:		
Name of Operator		Date	
Transmitting Agency	LSID	ATI Number	Amount Collected/Billed
ORIGINAL - Live	e Scan Operator SECOND COPY - Applic	ant THIRD COPY (if needed) -	Requesting Agency

STATE OF CALIFORNIA BCIA 8302 (Orig. 03/2006; Rev. 09/2012)

NO LONGER INTERESTED (NLI) NOTIFICATION (FOR NON-DEPARTMENT OF JUSTICE APPLICANTS)

California Penal Code section 11105.2(d) states, in part, that any agency which submits the fingerprints of applicants for employment or approval to the Department of Justice for the purpose of establishing a record of the applicant to receive notification of subsequent arrests, shall immediately notify the department when employment is terminated or the applicant is not hired.

It is the responsibility of hiring/approving authority to notify the Department of Justice, Bureau of Criminal Information and Analysis when employment has been terminated or when an applicant or volunteer is not actually retained to the position for which they applied.

APPLICANT INFORMATION (Please type or print in ink):

*NAME (MANDATORY):					
LAST	FIRST	MIDDLE			
ALIASES (MAIDEN NAME, AKAs)					
LAST	FIRST	MIDDLE			
SEX	*DATE OF BIRTH (MANDATORY)	CII NUMBER			
*APPLICATION TYPE (MANDATORY)					
(Specific to requesting agency i.e., credentialed, classified, volunteer, non-sworn, license, permit, peace officer, etc.)					

AGENCY INFORMATION:

*AGENCY NAME AND ADDRESS (MANDATORY)	AGENCY ORI (MANDATORY)
CONTACT PERSON	

* FORM MUST BE FILLED OUT COMPLETELY TO ENSURE TIMELY PROCESSING.

Mail or Fax this notification to:

DEPARTMENT OF JUSTICE BUREAU OF CRIMINAL INFORMATION AND ANALYSIS P.O. BOX 903417 SACRAMENTO, CA 94203-4170

> TELEPHONE (916) 227-1996 FAX (916) 227-4722