

Hand Outs

CONNECTIONS

Criminal History Record Check

This document can be downloaded from the agency intranet site:

It is available at

[Http://sdssnet5/ohrd/distancelearning/satellite/handouts/CHRC_Handbook.PDF](http://sdssnet5/ohrd/distancelearning/satellite/handouts/CHRC_Handbook.PDF)



CONNECTIONS Training Project
SUNY Training Strategies Group

This material was produced under a contractual agreement with:
CONNECTIONS Training Project
Training Strategies Group
Office of the Provost and Vice Chancellor of Academic Affairs
State University of New York

CLOSING NARRATIVE

A. REASON FOR CLOSURE:

1. **If closing is for family inquiry or applicant status**
(Describe reason for not completing certification or approval)

2. **If closing is of a previously open home**
(Describe the reason for non-renewal or revocation)

B. CLOSING DISCUSSION:

DESCRIBE DISCUSSION REGARDING REASON FOR CLOSING AND DATE DISCUSSED:

C. RE-OPENING RECOMMENDATION:

EXPLAIN RECOMMENDATION REGARDING RE-OPENING:

D. ADDITIONAL COMMENTS:

CONNECTIONS

Procedure For Recording Subsequent Arrest Results

In addition to performing the initial fingerprint search, The Department of Criminal Justice Services (DCJS) retains fingerprints of all individuals (including foster children) over the age of 18 residing in a foster home. If one of the adults is subsequently arrested for a reportable offense, DCJS notifies the OCFS Criminal History Record Unit, which in turn forwards the information to the foster home's certifying/approving district or agency.

Once notified, the assigned district or agency worker is required to assess the safety of any foster children residing in the home and determine if the foster home should remain open. They also must record all relevant information in Connections under the FRS Household Member Detail tab, Contacts Tab and through an Interim Home Study. The user should never change the Initial Clearance Results Received Date on the F/A Person Detail window or the original FP Results field on the Household Member Detail tab.

Within Connections, the worker should perform the following tasks:

- Access the most recent FRS and select the Household Member Detail tab,
- Select and complete the Safety Assessment Template, save the changes and enter the date completed under "Safety Asmnt Dt" on the Household Member Detail tab,
- Select the Med/CHRC and SCR Comments push button and, in the CHRC section of the text box, record a summary of the reasons why the prospective or existing foster or adoptive parent was determined to be appropriate and acceptable to receive a foster care or adoptive placement, when there is a criminal history record. Save the changes,
- Save the changes on the tab and then select the Contact Tab
- Within the Contact Tab, enter "OCFS-CHRU" in the Contacted By field, "Correspondence Received" in the Method drop down, Check the appropriate Participant(s), choose "Office" from the Location drop down, enter the date the letter was received in the Contact Date field, select Other in the Purpose List and in the Comments section record the name and date of arrest or charge, date notification was received and the offense, if known. Save the Changes in the tab and then select the Home Study Narrative Tab,
- In the Reason for Home Study section, the worker should check the box "Interim - Change in Criminal Records Results" and any other relevant Reason (Change in HH Comp, etc.),
- Retrieve the Home Study Narrative and update it as appropriate,
- Save their changes to the home study and select the submit push button on the FRS,
- The worker is taken to the F/A Home License window, where they should make any other relevant changes to the window, change the status to "Pending Acceptance" and "Save and Submit" the changes to their supervisor.

If during this process a decision has been made to keep the home open, and it is within 90 days of the end of the current authorization period, the worker can also complete the Reauthorization Narrative on the FRS and check the Reauthorization checkbox before submitting all of this information to their supervisor.

If an additional subsequent arrest notification is received, the worker should repeat the steps above. However as the CHRC text box and the Safety Assessment Template retain the information previously entered, workers should clearly delineate the new information in each section by beginning with the date of entry. Workers should also update the Safety

Assessment Dt field on the Household Member Detail tab with the date it was most currently completed.

If after completing the Safety Assessment a decision has been made to close the foster home, the worker does not need to complete the CHRC Comments box, but should complete the other remaining steps mentioned above and then notify the foster parent and complete the appropriate sections of the Closure Report on the Close Home task in Connections.

Criminal History Record Check/Safety Assessment

Name of Person with Criminal History Record: _____

Date of Assessment: _____ Re-certification/Re-approval date: _____

Certification/Approval Status: Certification Approval Re-certification
 Re-approval Interim

Foster Children currently in the home:

Non-Foster Children currently in the home:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

- Does the subject of the charge or conviction currently reside in the household?
 Yes No

Presumptively Disqualifying Crimes:

Discretionary Crimes:

Hold in Abeyance Crimes:

Presumptively Disqualifying Crimes: Has the prospective or existing foster or adoptive parent demonstrated that denial or revocation will create an unreasonable risk of harm to the physical or mental health of the child; and that the child's safety will not be placed in jeopardy and that certification or approval is in the best interests of the child. Explain.

Current File :

- Does the current certification or approval file show that the agency had knowledge of the crimes listed above? Yes No
- If yes, how did we know?

Applicants Admission on Sworn Statement

Other (Explain) _____

Explain actions taken:

Factors To Be Considered:

- the degree of unsupervised access to or contact this person has with the child

- the length of time the child has been in the home

- the influence this person may have on the child's care and upbringing

- the counterbalancing strengths found in the household which meet the child's specific needs:

- any counterbalancing strong ties with relatives:

- the degree of bonding between child and foster/adoptive parents , including how well the child seems to be doing in the home:

- the foster/adoptive parents’ prior “track record” with any other placements they may have had:

Consider and explain the following:

- the nature of the charge/conviction, how serious a crime it was, whether it involved violence or force?

- the circumstances of the crime and the person’s explanation of such:

- the relationship between the type of crime and its relationship to child caring responsibilities:

- how recent the crime is, particularly the length of time following any prison or jail time that the person has spent (productively) in the community (generally give less weight to older convictions):

- the age of the person at the time of the occurrence of the criminal offense (generally give less weight to crimes committed at relatively young ages:

- any factors that demonstrate good conduct or rehabilitation, such as returning to school, employment, volunteer activities, etc.:

- the number of crimes committed and any patterns that emerge:

- the penalties imposed as a result of the convictions:

In situations where there are no children in the home (applicants/certified /approved persons without placements), you may want to weight the factors listed above more heavily, since it is preferable to minimize the risk to the child, and not placing a child where household members have been convicted will accomplish this.

Decision: **Appropriate/Acceptable to provide foster care/adoption**
 Denied **Revoked**

Summary:

Caseworker

Homefinding Supervisor

date

date

CONNECTIONS

Procedure For Recording Arrest Results

If during the initial screening process the New York State Division of Criminal Justice Services (DCJS) finds that a member of the foster or adoptive home over the age of 18 has been arrested for a reportable offense they will notify the OCFS Criminal History Record Unit, which in turn forwards the information to the foster home's certifying/approving district or agency.

Once notified, the assigned district or agency worker is required to assess the safety of any foster children who may reside in the home and determine if the foster home should be opened or remain open. They also must record all relevant information in Connections under the FRS Household Member Detail tab, Contacts Tab and through either the initial or an Interim Home Study. The user should never change the Initial Clearance Results Received Date on the F/A Person Detail window or the original FP Results field on the Household Member Detail tab.

Within Connections, the worker should perform the following tasks:

- Record the date the finger print results were received on the Person Detail F/A Home window,
- Access the most recent FRS and select the Household Member Detail tab,
- Select and complete the Safety Assessment Template, save the changes and enter the date completed under "Safety Asmnt Dt" on the Household Member Detail tab,
- Select the Med/CHRC and SCR Comments push button and, in the CHRC section of the text box, record a summary of the reasons why the prospective or existing foster or adoptive parent was determined to be appropriate and acceptable to receive a foster care or adoptive placement, when there is a criminal history record. Save the changes,
- Save the changes on the tab and then select the Contact Tab
- Within the Contact Tab, enter "OCFS-CHRU" in the Contacted By field, "Correspondence Received" in the Method drop down, Check the appropriate Participant(s), choose "Office" from the Location drop down, enter the date the letter was received in the Contact Date field, select Other in the Purpose List and in the Comments section record the name and date of arrest or charge, date notification was received and the offense, if known. Save the Changes in the tab and then select the Home Study Narrative Tab,
- The worker should either include the information in the initial Home Study or through an interim Home Study by checking the box "Interim - Change in Criminal Records Results" and any other relevant Reason for Home Study checkboxes (Change in HH Comp, etc.),
- Save their changes to the Home Study and select the submit push button on the FRS,
- The worker is taken to the F/A Home License window, where they should make any other relevant changes to the window, change the status to "Pending Acceptance" and "Save and Submit" the information to their supervisor.

If the initial arrest results were received after the home has already been open in accepted-active status (an arrest result came back on a new adult in the home) and a decision has been made to keep the home open, the worker can also complete the Reauthorization Narrative on the FRS and check the Reauthorization checkbox before submitting all of this information to their supervisor.

If information has previously been entered in the CHRC text box and/or the Safety Assessment Template, workers should clearly delineate the new information in each section by beginning with the date of entry. Workers should also update the Safety Assessment Dt field on the Household Member Detail tab with the date it was most currently completed.

If after completing the Safety Assessment a decision has been made to close or not open the foster home, the worker does not need to complete the CHRC Comments box, but should complete the other remaining steps mentioned above and then notify the foster parent and complete the appropriate sections of the Closure Report on the Close Home task in Connections.

CONNECTIONS Regional Office Field Support Staff

Buffalo Regional Office

Roger Ward

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Cynthia Brookins

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Cell (585) 747-2441

Chip Houser

Can be reached on cell

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Cliff Pelton

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Tom Drennan

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Jan. 2004

CHRC Teleconference 2/10/04

Locate the RID and PID

TRAINING - CONNECTIONS Toolbar - Wilson90,Darryl

Intake Options Maintain Search Help

T-O-DO WORK Group UNIT PERS CASE RSRC STAFF RPTS

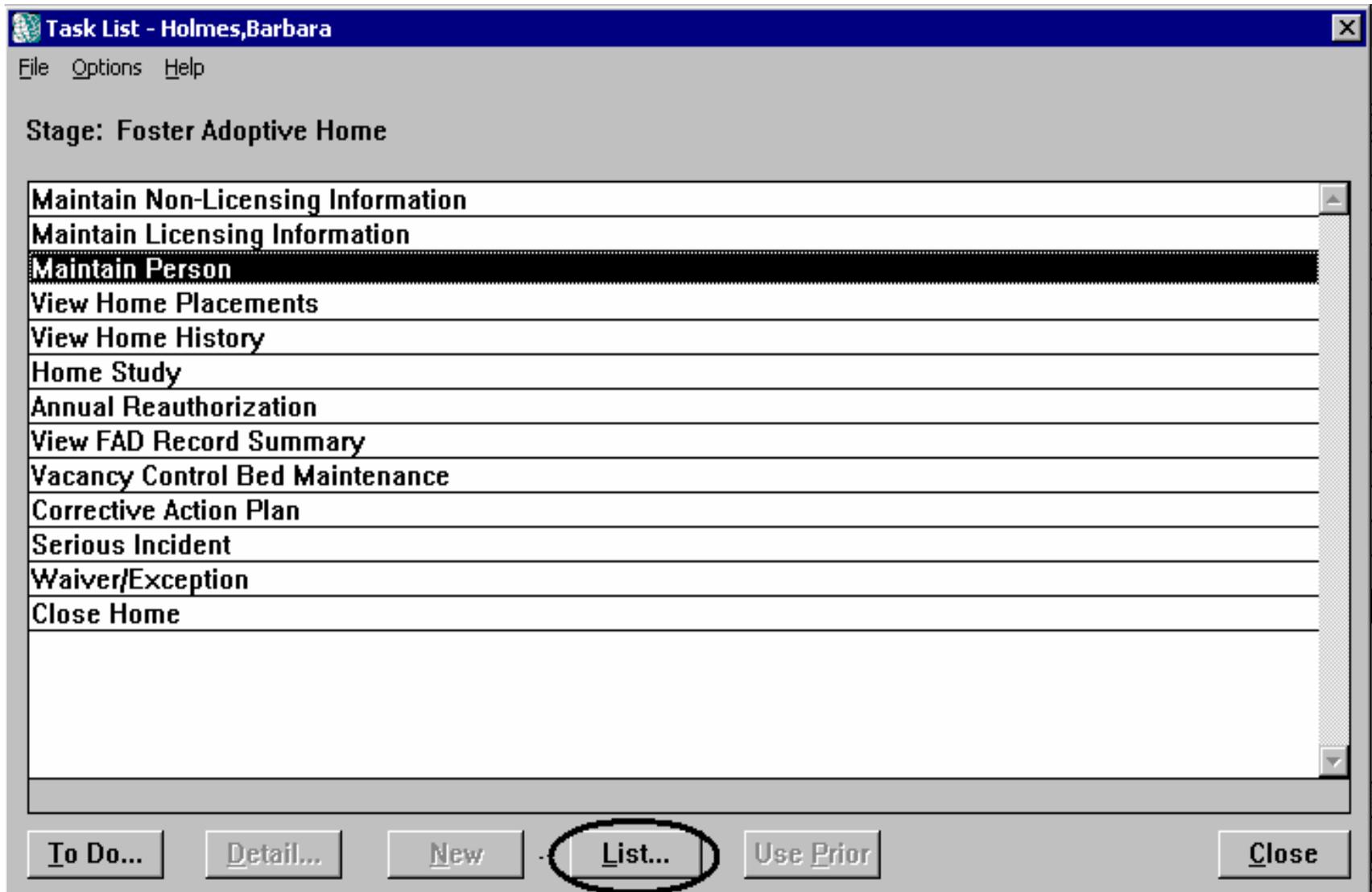
Person List - Jarret,Angela · R:82200098 / C:32200098

File Options Forms Reports Help

Case Name: Jarret,Angela Stage: FAD

Name	M/S	Sch	DOB	T	Sex	Type	Role	Rel/Int	Person ID	Date
Jarret,Marty		V	03/02/1942	M	PRN	NO	Foster Parent		12200275	09/0
Jarret,Anglea		V	02/01/1964	F	PRN	NO	Foster Parent		12200274	09/0
Jarret,Jane		V	05/14/1984	F	PRN	NO	Other Family member		12200276	09/0
Smith,Bill		V	02/01/1985	A	M	PRN	NO	Foster Child	19000000	01/2

Access Person List



Locate the RID and PID

TRAINING - CONNECTIONS Toolbar - Wilson90,Darryl

Intake Options Maintain Search Help

TODD WORK GROUP UNIT PERS CASE RSRC STAFF RPTS

Person List - Jarret,Angela R:82200098/C:32200098

File Options Forms Reports Help

Case Name: Jarret,Angela Stage: FAD

Name	M/S	Sch	DOB	T	Sex	Type	Role	Rel/Int	Person ID	Date
Jarret,Marty		V	03/02/1942	M	PRN	NO	Foster Parent		12200275	09/0
Jarret,Anglea		V	02/01/1964	F	PRN	NO	Foster Parent		12200274	09/0
Jarret,Jane		V	05/14/1984	F	PRN	NO	Other Family member		12200276	09/0
Smith,Bill		V	02/01/1985	A	M	PRN	NO	Foster Child	19000000	01/2

Access Person Detail FA Home

The screenshot shows a software application window with the following components:

- Title Bar:** Person List - Holmes, Barbara - R:81200090/C:31200089
- Menu Bar:** File, Options, Forms, Reports, Help
- Menu:** A dropdown menu is open, listing various options. The option "Person Detail FA Home" is highlighted in blue.
- Table:** A table with the following data:

h	DOB	T	Sex	Type	Role	Rel/Int	Person ID	Date
	03/05/1963		F	PRN	NO	Foster Parent	11200089	09/0
- Buttons:** "Detail...", "New...", "OK", and "Close" are located at the bottom of the window.

Record Sent/Received Dates

Person Detail FA - Holmes, Barbara

File Edit Help

Birth Location

US Birth State: Non-US Born

Birth City:

Birth County:

Birth Country:

General Info

Highest Education:

Citizenship Status:

Maiden Name:

Most Recent Employer:

Fingerprint Information

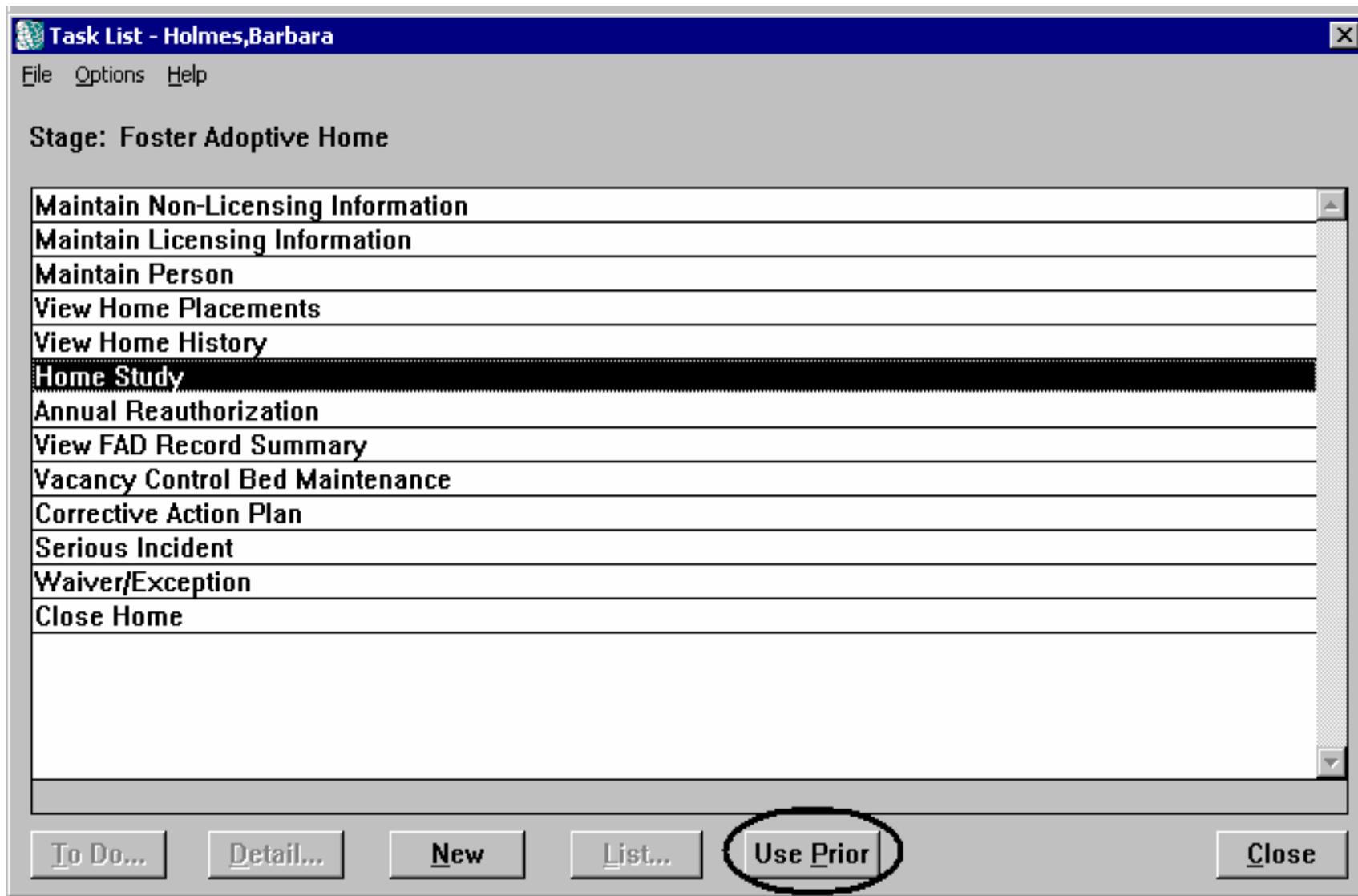
Date Card Sent:

Results Received:

Foster Parent

Medical Exam Date:

Access FAD Record Summary



Household Member Detail Tab

Foster and Adoptive Home Record Summary

File Options Help

Resource Name: Holmes,Barbara Auth From Date: 1/12/04 10:14: Auth To Date: 4/11/04 10:1 Vendor ID: 07120090
 Resource ID: 81200090 Agency Name/Resource ID: Onondaga County Dss / 20000440

Home Demo. Licensing Information **Household Member Detail** Home History Events Agy./Worker Information Home Study Narrative Annual Reauth. Narrative FAD Checklist Contacts

	Name	Sex	DOB	Age	Language	Religion	Marital Status	Ethnicity	Race	Rel/Int	Date Add to Stage
▶	Holmes,Barbara	F	3/5/63	40	English	Catholic	Single, never t	Non-Hispanic	Black or A	Foster Parent	9/3.

	Medical Exam Date	FP Cards Sent	FP Cards Recd	FP Results	Safety Asmnt Dt	SCR DB Check Sent	SCR DB Check Recd	SCR I
▶		8/29/03				8/29/03		

Save Cancel

A.K.A. Names Case List Training Details Safety Assessment Template Training Comments Med/CHRC and SCR Comments Employment Comments

Person ID Person Detail FA

Submit Help on Narratives Generate Report Close

Record Original FP Results

Foster and Adoptive Home Record Summary

File Options Help

Resource Name: Holmes, Barbara Auth From Date: 9/3/03 Auth To Date: 12/2/03 Vendor ID: 07120090
Resource ID: 81200090 Agency Name/Resource ID: Onondaga County Dss / 20000440

Home Demo Licensing Information **Household Member Detail** Home History Events Agy./Worker Information Home Study Narrative Annual Reauth. Narrative FAD Checklist Contacts

Name	Sex	DOB	Age	Language	Religion	Marital Status	Ethnicity	Race	Rel/Int	Date Add to Stage
Holmes, Barbara	F	3/5/63	40	English	Catholic	Single, never t	Non-Hispanic	Black or A	Foster Parent	9/3.

Medical Exam Date	FP Cards Sent	FP Cards Recd	FP Results	Safety Asmnt Dt	SCR DB Check Sent	SCR DB Check Recd	SCR I
	8/29/03				8/29/03		

Discretionary Disqualifier
Hold in Abeyance
No Record Found
Presumptive Disqualification

Save
Cancel

A.K.A. Names Case List Training Details Safety Assessment Template Training Comments Med/CHRC and SCR Comments Employment Comments

Person ID Person Detail FA

Submit Help on Narratives Generate Report Close

Record Safety Assessment/Date

Foster and Adoptive Home Record Summary

File Options Help

Resource Name: Holmes, Barbara Auth From Date: 9/3/03 Auth To Date: 12/2/03 Vendor ID: 07120090
Resource ID: 81200090 Agency Name/Resource ID: Onondaga County Dss / 20000440

Home Demo.	Licensing Information	Household Member Detail	Home History Events	Agy./Worker Information	Home Study Narrative	Annual Reauth. Narrative	FAD Checklist	Contacts
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Name	Sex	DOB	Age	Language	Religion	Marital Status	Ethnicity	Race	Rel/Int	Date Add to Stage
▶ Holmes, Barbara	F	3/5/63	40	English	Catholic	Single, never m	Non-Hispanic	Black or A	Foster Parent	9/3/03

Medical Exam Date	FP Cards Sent	FP Cards Recd	FP Results	Safety Asmnt Dt	SCR DB Check Sent	SCR DB Check Recd	SCR I
✎	8/29/03			1/1/04	8/29/03		

Save
Cancel

A.K.A. Names	Case List	Training Details	<input checked="" type="checkbox"/> Safety Assessment Template	<input type="checkbox"/> Training Comments	<input type="checkbox"/> Med/CHRC and SCR Comments	<input type="checkbox"/> Employment Comments
Person ID	Person Detail FA					

Submit Help on Narratives Generate Report Close

Record CHRC Comments

Foster and Adoptive Home Record Summary

File Options Help

Resource Name: Holmes, Barbara Auth From Date: 9/3/03 Auth To Date: 12/2/03 Vendor ID: 07120090
Resource ID: 81200090 Agency Name/Resource ID: Onondaga County Dss / 20000440

Home Demo. **Medical, CHRC and SCR Comments** Contacts

Medical:

CHRC: Record a summary of the reasons why the prospective or existing foster or adoptive parent was determined to be appropriate and acceptable to receive a foster care or adoptive placement, when there is a criminal history record.

SCR:

Save Cancel

Spell Check Save Cancel

A.K.A. Names Case List Training Details Safety Assessment Template Training Comments **Med/CHRC and SCR Comments** Employment Comments

Person ID Person Detail FA

Submit Help on Narratives Generate Report Close

Access Contacts

Foster and Adoptive Home Record Summary

File Options Help

Resource Name: Holmes,Barbara Auth From Date: 9/3/03 Auth To Date: 12/2/03 Vendor ID: 07120090
Resource ID: 81200090 Agency Name/Resource ID: Onondaga County Dss / 20000440

Home Demo. Licensing Information Household Member Detail Home History Events Agy./Worker Information Home Study Narrative Annual Reauth. Narrative FAD Checklist **Contacts**

	Date/Time Recorded	Contact Date	Contacted By	Method	Purpose	Location
▶	9/3/03 11:56:26 AM	8/28/03	Darryl Wilson	Face to Face	Recruitment	Office

Add New Contact Details Delete

Submit Help on Narratives Generate Report Close

Record Contacts

Contacts

File

Date/Time Recorded: 1/29/04 3:10:24 PM Contact Date: 1/4/04

Contacted By: OCFS-CHRU

Method: Correspondence Received

Participants:

- Both Foster Parents
- Foster child(ren)
- One Foster Parent
- Other

Location: Office

Purpose:

- Case Planning
- Casework Counseling
- Foster Parent Training
- Family/Parent Visit
- Initial Visit
- Investigation
- Monthly Visit
- Other
- Placement
- Placement Disruption
- Placement Selection

Comments:

Record the name of the person, date of the arrest of charge, type of offense, if known and the date notification was received.

Save Cancel

Complete Interim Home Study

Foster and Adoptive Home Record Summary

File Options Help

Resource Name: Holmes, Barbara Auth From Date: 1/12/04 10:14: Auth To Date: 4/11/04 10:1 Vendor ID: 07120090
Resource ID: 81200090 Agency Name/Resource ID: Onondaga County Dss / 20000440

Home Demo. Licensing Information Household Member Detail Home History Events Agy./Worker Information **Home Study Narrative** Annual Reauth. Narrative FAD Checklist Contacts

Reason(s) for Home Study

- Agency Transfer
- Initial Home Study
- Interim - Change in Age Range/Gender
- Interim - Change in Capacity
- Interim - Change in Criminal Records Results
- Interim - Change in HH Comp
- Interim - Change in Home Addr
- Interim - Change in Level of Care
- Interim - Change in Marital
- Interim - Change in Program Type
- Reopen a Home

Save Cancel

Home Study Narratives

- Standard Home Study
- GPS/MAPP Home Study
- Other

Retrieve/Edit Narrative

Submit Help on Narratives Generate Report Close

Today's Program

- The fingerprint submission process
- The duplicate waiver process
- Inter-agency foster home transfers
- "Search and retain" tracking
- How to expunge records with the Division of Criminal Justice Services

Today's Program

- How to evaluate criminal history records including safety assessments
- Legal Affairs investigations
- CONNECTIONS

Presumptive Qualifying Crimes

- Child Abuse or Neglect
- Spousal Abuse
- Crimes Against a Child, Including Child Pornography
- Crime Involving Violence, Including Rape, Sexual Assault or Homicide
- Physical Assault/Drug-Related Offense (Previous 5 years)

Child Abuse or Neglect

- Reckless Endangerment
- Incest
- Abandonment

Spousal Abuse

- Assault 1st (of spouse)
- Assault 2nd (of spouse)
- If non-spouse or non child – 5 year rule applies

Crimes Against a Child Including Child Pornography

- Promoting Prostitution 1st
- Use of Child in a Sexual Performance
- Dissemination of Indecent Material to Minors 1st
- Patronizing a Prostitute 1st

Crime Involving Violence

- Rape 1st, 2nd, 3rd
- Murder 1st and 2nd
- Manslaughter 1st and 2nd
- Criminally Negligent Homicide
- Violent Felonies
 - Criminal Sale Firearm 2nd
 - Arson 2nd
 - Burglary 1st
 - Hate Crimes

Physical Assault/Drug Related Offense

Conviction with Past 5 years...

- Assault 1st
- Assault 2nd (Victim not spouse/child)
- Criminal Sale of Controlled Substance 1st – 5th
- Criminal Possession of Controlled substance 1st – 5th

Safety Assessment Consideration

- Foster/adoptive children in the home
- Plan or request to place foster/adoptive children in the home
- Non-foster children in the home

AND

- The type of crime

Decision Making

- Whether to place
- Whether to continue placement
- Whether to remove
- If so, how soon

Additional Considerations

- Seriousness of crime
- Involvement of force or violence
- Circumstances of commission of crime
- Person's explanation of crime
- Person's explanation
- Relationship between type of crime to child caring

Additional Considerations

- Recency of crime
- Productive time in community since commission of crime
- Age at occurrence of crime
- Number of crimes and pattern
- Penalties for convictions

Additional Considerations (Child in the Home)

- Degree of unsupervised access of contact with the child
- Length of time child has been in the home
- Person's influence on care and/or upbringing
- Strong ties or bonding with caretakers
- Child's adjustment in the home
- Foster/adoptive parents' success with other placements

- Safety Assessment Template
- CHRC Comment Box
- Contacts and (Interim) Home study

NO Transfers

- Presumptive Disqualifier

- Hold in Abeyance

Notice to NYS OCFS of Foster Home Transfer

ATTACHMENT 1 NOTICE TO NYS OCFS OF FOSTER HOME TRANSFER BETWEEN AUTHORIZED AGENCIES
(USE COMPLETELY SEPARATE AGENCIES)

NAME OF FOSTER HOME _____
 RESOURCE ID# / VENDOR ID# (VND) _____
 FACILITY ID# _____

RECEIVING AGENCY ID#	SENDING AGENCY ID#
RECEIVING AGENCY NAME AND ADDRESS	SENDING AGENCY NAME AND ADDRESS

FOR THE PURPOSES AND PURPOSES FOR ALL MEMBERS OF THE HOUSEHOLD AGE 18 AND OVER (18 AND UNDER) RESIDENTS OF THE STATE OF NEW YORK, THE STATE IS PROVIDING THE FOSTER CARE SERVICES OF THE CHILDREN'S COUNCIL ON CHILDREN'S SERVICES (CCCS) TO THE CHILDREN OF THE HOUSEHOLD OF THE FOSTER HOME. THE FOSTER CARE SERVICES OF THE HOUSEHOLD OF THE FOSTER HOME ARE PROVIDED BY THE FOSTER CARE SERVICES OF THE HOUSEHOLD OF THE FOSTER HOME. THE FOSTER CARE SERVICES OF THE HOUSEHOLD OF THE FOSTER HOME ARE PROVIDED BY THE FOSTER CARE SERVICES OF THE HOUSEHOLD OF THE FOSTER HOME.

Sending Agency

- Ascertain acceptance, effective date, responsible person at receiving agency
- Review and update record
- Provide home status
- Written confirmation to foster parents
- If foster children in home, establish case/child planning responsibility

Receiving Agency

- Review Record – note home status and any unmet requirements
- COMPLETE THE TRANSFER FORM
- Accept the transfer in CONNECTIONS

- Print a new Certificate to Board for foster parents
- Maintain WMS (POS line) and CCRS (agency/worker changes)

Additional CONNECTIONS Info

NYS OCFS CONNECTIONS Website Link

- <http://sdssnet5/ocfs/connect>

Enterprise Help Desk

- 1 (800) 697-1323

Today's Program

- The fingerprint submission process
- The duplicate waiver process
- Inter-agency foster home transfers
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- How to expunge records with the Division of Criminal Justice Services

Today's Program

- How to evaluate criminal history records including safety assessments
- Legal Affairs investigations
- CONNECTIONS

Locate the RID and PID

TRAINING - CONNECTIONS Toolbar - Wilson90,Darryl

File Edit Options Person Search Help

Person List - Jarret,Angela - R:42200998 - C:32200998

File Options Pages Reports Help

Case Name: Jarret,Angela Stage: FAD

Name	MS	Sch	DOB	T	Sex	Type	Role	Rel/fut	Person ID	Date
Jarret,Marty		Y	03/02/1942		M	PRN	NO	Foster Parent	12200275	4/9/0
Jarret,Angela		Y	02/01/1964		F	PRN	NO	Foster Parent	12200274	4/9/0
Jarret,Jane		Y	05/14/1984		F	PRN	NO	Other Family member	12200276	4/9/0
Smith,Bill		Y	02/01/1985		A.M	PRN	NO	Foster Child	19000000	6/1/2

Presumptive Disqualifying Crimes

- **Child Abuse or Neglect**
- **Spousal Abuse**
- **Crimes Against a Child, Including Child Pornography**
- **Crime Involving Violence, Including Rape, Sexual Assault or Homicide**
- **Physical Assault/Drug-Related Offense (Previous 5 years)**

Child Abuse or Neglect

- **Reckless Endangerment**
- **Incest**
- **Abandonment**

Spousal Abuse

- **Assault 1st (of spouse)**
- **Assault 2nd (of spouse)**
- **If non-spouse or non child – 5 year rule applies**

Crimes Against a Child Including Child Pornography

- Promoting Prostitution 1st
- Use of Child in a Sexual Performance
- Dissemination of Indecent Material to Minors 1st
- Patronizing a Prostitute 1st

Crime Involving Violence

- Rape 1st, 2nd, 3rd
- Murder 1st and 2nd
- Manslaughter 1st and 2nd
- Criminally Negligent Homicide
- Violent Felonies
 - Criminal Sale Firearm 2nd
 - Arson 2nd
 - Burglary 1st
 - Hate Crimes

Physical Assault/Drug Related Offense

Conviction within past 5 years...

- Assault 1st
- Assault 2nd (Victim not spouse/child)
- Criminal Sale of Controlled Substance 1st – 5th
- Criminal Possession of Controlled substance 1st – 5th

Safety Assessment Considerations

- Foster/adoptive children in the home
 - Plan or request to place foster/adoptive children in the home
 - Non-foster children in the home
- AND**
- The type of crime

Decision Making

- Whether to place
- Whether to continue placement
- Whether to remove
- If so, how soon

Safety Assessment Must Include:

- Whether subject of charge or conviction resides in the household
- Extent of contact with foster, or other children
- Status and nature of charge or conviction

Additional Considerations

- **Seriousness of crime**
- **Involvement of force or violence**
- **Circumstances of commission of crime**
- **Person's explanation of crime**
- **Relationship between type of crime to child caring**

Additional Considerations

- **Recency of crime**
- **Productive time in community since commission of crime**
- **Age at occurrence of crime**
- **Number of crimes and pattern**
- **Penalties for convictions**

Additional Considerations **(Child in the Home)**

- **Degree of unsupervised access of contact with the child**
- **Length of time child has been in the home**
- **Person's influence on care and/or upbringing**
- **Strong ties or bonding with caretakers**
- **Child's adjustment in the home**
- **Foster/adoptive parents' success with other placements**

Connections Recording Requirements

- Safety Assessment Template
- CHRC Comment Box
- Contacts and (Interim) Home study
- Closing Report

Record Sent/Received Dates

Person Detail FA - Holmes, Barbara

Birth Location
 US Birth State: NY Non-US Born
 Birth City: Unica
 Birth County: ONEIDA
 Birth Country: USA

General Info
 Highest Education: Associate Degree
 Citizenship Status: US Citizen
 Maiden Name:
 Most Recent Employer:

Fingerprint Information
 Date Card Sent: 08/23/2003
 Results Received: / /

Foster Parent
 Medical Exam Date: / /

Buttons: Save, Cancel

Record Original FP Results

Foster and Adoptive Home Record Summary

Resource Name: Holmes, Barbara Auth From Date: 9/3/03 Auth To Date: 12/2/03 Vendor ID: 07120090
 Resource ID: 8120000 Agency Name/Resource ID: Onondaga County Dist / 20000440

Name	Sex	DOB	Age	Language	Religion	Marital Status	Ethnicity	Race	Rel/Inv	Date Add to Stage
Barbara Holmes	F	3/5/63	40	English	Catholic	Single, never	Non-Hispanic	Black or A Foster Parent		9/3

Medical Exam Date	FP Card Sent	FP Card Recd	FP Results	Safety Assess	SCR DB Check Sent	SCR DB Check Recd	SCR
6/29/03			(Circumstantially Unacceptable - Hold in Abeyance - No Record Found - Presumptive Disqualification)			6/29/03	

Buttons: Save, Cancel

Options: A.K.A. Names, Case List, Training Details, Safety Assessment Template, Training Comments, Med/CHRC and SCR Comments, Employment Comments

Buttons: Save, Close

Sending Agency

- Ascertain acceptance, effective date, responsible person at receiving agency
- Review and update record
- Provide home status
- Written confirmation to foster parents
- If foster children in home, establish case/child planning responsibility

Receiving Agency

- Review Record – note home status and any unmet requirements
- COMPLETE THE TRANSFER FORM
- Accept the transfer in CONNECTIONS
- Print a new Certificate to Board for foster parents
- Maintain WMS (POS line) and CCRS (agency/worker changes)

CHRU Contact Information

- Phone: (518) 473- 8595
Fax: (518) 486- 9470
- Bureau of Criminal Investigations (Legal)
John Stupp (518) 474-8490
John.Stupp@dfa.state.ny.us

Regional Contacts

- Rochester Regional Office
Linda Kurtz (585) 238-8201
Linda.Kurtz@dfa.state.ny.us
- Buffalo Regional Office
Linda Brown (716) 847-3145
Linda.Brown@dfa.state.ny.us
- Syracuse Regional Office
Jack Klump (315) 423-1200
JackKlump@dfa.state.ny.us

Regional Contacts

- Albany Regional Office
William McLaughlin (518) 486-7078
William.McLaughlin@dfa.state.ny.us
- NYC Regional Office
Fred Levitan (212) 383-1788
Fred.Levitan@dfa.state.ny.us
- Yonkers Regional Office
Patricia Sheehy (914) 377-2080
Patricia.Sheehy@dfa.state.ny.us

Regional Contacts

- Out-of-State
Michelle Rafael (518) 474-4352
Michelle.Rafael@dfa.state.ny.us

Intranet/ Public Folders

From Microsoft Outlook, go to
“Public Folders”:

- **All/ Statewide /OCFS/
ASFA-Policy/ Practice**

Intranet/ Public Folders

What you’ll find:

- **00 OCFS INF-06 Sept. 21, 2000**
- **00 OCFS ADM-04 Dec. 7, 2000**
- **01 OCFS INF-04 Oct. 11, 2001**
- **03 OCFS INF-01 Jan 7, 2003**

Additional CONNECTIONS Info

**NYS OCFS CONNECTIONS Website
Link**

<http://sdssnet5/ocfs/connect>

**Enterprise Help Desk
1 (800) 697-1323**

For Evaluations and Handouts

Intranet

<http://sdssnet5/ohrd>

Internet

<http://www.dfa.state.ny.us/ohrd>
