

NEW YORK STATE OFFICE FOR THE AGING

2 Empire State Plaza, Albany, NY 12223-1251

Andrew M. Cuomo, Governor

An Equal Opportunity Employer

Corinda Crossdale, Director

PROGRAM INSTRUCTION	Number 15-PI-21
	Supersedes
	Expiration Date

DATE: October 27, 2015

TO: LTCOP Coordinators

SUBJECT: Criminal Background Check and Sex Offender Registry Search

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ACTION REQUESTED:

Regional Ombudsman Programs will now be required to screen all current and future coordinators, volunteers and staff associated with the Long Term Care Ombudsman Program (LTCOP) using the New York State Division of Criminal Justice Services Sex Offender Registry. In addition, regional ombudsman programs are encouraged to conduct criminal background checks on all coordinators volunteers and staff associated with LTCOP. If the regional LTCOP entity conducts a background check that is more comprehensive and includes a check of the Sex Offender Registry, the regional LTCOP entity may continue to use its own background check process instead of following the procedure outlined in this PI.

All coordinators and staff associated with LTCOP must be screened using the Sex Offender Registry PRIOR to that coordinator or staff member being offered employment by the regional LTCOP entity. State Office staff will conduct checks of the Sex Offender Registry of all local coordinators and staff associated with LTCOP. Regional coordinators will conduct checks on all current and prospective volunteers. Regional coordinators must complete the Sex Offender Registry check on prospective volunteers PRIOR to offering the prospective volunteer a slot in the regional LTCOP's certification training class. Any individual listed on the state's Sex Offender Registry is prohibited from working or volunteering for the New York State Long Term Care Ombudsman Program. If any of your current staff or volunteers appear on the registry please contact the Office of the State Long Term Care Ombudsman immediately.

In order to conduct a check of the Sex Offender Registry, regional coordinators should follow the instructions found in Attachment A of this PI. If there is uncertainty about an individual's status with regard to the Sex Offender Registry, regional coordinators must verify that the individual is not listed on the Sex Offender Registry before offering the individual a volunteer position.

PURPOSE:

In order to provide additional protections for the residents of long-term care facilities LTCOP is requiring that all coordinators, volunteers and staff associated with LTCOP be screened using the New York State Division of Criminal Justice Services Sex Offender Registry.

BACKGROUND:

LTCOP serves the most frail and vulnerable older New Yorkers. As a result, coordinators, volunteers and staff associated with LTCOP must be individuals who can be trusted and relied upon to protect the residents that LTCOP serves.

PROGRAMS AFFECTED:

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|--------------------------------------|--|--|---------------------------------|---|
| <input type="checkbox"/> Title III-B | <input type="checkbox"/> Title III-C-1 | <input type="checkbox"/> Title III-C-2 | | |
| <input type="checkbox"/> Title III-D | <input type="checkbox"/> Title III-E | <input type="checkbox"/> CSE | <input type="checkbox"/> SNAP | <input type="checkbox"/> Energy |
| <input type="checkbox"/> EISEP | <input type="checkbox"/> NSIP | <input type="checkbox"/> Title V | <input type="checkbox"/> HIICAP | <input checked="" type="checkbox"/> LTCOP |
| <input type="checkbox"/> Other: | | | | |

CONTACT PERSON: Mark Miller

TELEPHONE: (518) 408-1469

ATTACHMENT A

NYS DCJS

Sex Offender Registry Searches

A search of the Sex Offender Registry is a free and simple service provided by DCJS.

The method for submitting a search request will vary depending upon the number of individuals requested to be checked against the Registry:

- **Search requests of 30 or more** individuals *must be made by e-mail or Compact Disc (CD).*
- **Search requests of fewer than 30** individuals *must be made by regular mail or fax, or up to five names at a time by telephone.*

Requirements for E-mail and CD submission for Registry Searches

To submit a list of 30 or more individuals, enter the prospective employee's or volunteer's full name (last and first) and complete birth date **or** Social Security number (SSN) into an Excel spreadsheet (one item per field), and submit the spreadsheet to the Registry via an e-mail attachment or on a CD.

There are no restrictions for the number of characters for name data fields. The fields in the Excel spreadsheet must be formatted exactly as specified below.

Please note that there is no space between words in the column headings for LastName and FirstName, and an underscore is used to separate the words in the column heading for Birth_Date.

Birth_Date format – Birth_Date (must be MM/DD/YYYY):

LastName	FirstName	Birth_Date
Sample	Sam	01/05/1978

SSN format – SSN (must be 9 numbers, no spaces or dashes):

LastName	FirstName	SSN
Sample	Sam	123456789

E-mail submissions

The Excel spreadsheet may be attached to an e-mail and sent to SORSearch@dcjs.ny.gov. The e-mail must include the camp name, address, telephone and fax numbers, and contact person for DCJS to call if there are questions. In the subject line of the e-mail, type “**800 # search.**”

CD submissions

A letter containing the camp name, address, telephone and fax numbers, and the contact person for DCJS to call if there are questions must accompany CD submissions. CDs are to be sent to:

New York State Division of Criminal Justice Services
Sex Offender Registry
Alfred E. Smith Building
80 South Swan St.
Albany, New York 12210

Please write company/camp name and the date submitted on CD with permanent marker; CDs will not be returned.

A letter indicating search results, whether submitted via e-mail or CD, will be mailed or faxed to the requestor.

Requirements for fax or regular mail submissions

Requests for fewer than 30 individuals must be made by fax or regular mail by submitting the following information to the Registry:

The prospective employee's or volunteer's full name (first and last) and one of the following: complete address, social security number, birth date, or driver's license number.

All information must be submitted on camp letterhead or other pages, each of which contain the camp name, address, telephone and fax numbers, and contact person for DCJS to call if there are questions.

Information should be faxed to (518) 485-5805, or mailed to the New York State Division of Criminal Justice Services, Sex Offender Registry, Alfred E. Smith Building 80 South Swan St. Albany, New York 12210

Requirements for name checks by telephone

To check up to five names per call by telephone, call 518-457-5837 or 1-800-262-3257. When calling, you will be asked to provide your name, address and phone number. After this, provide the prospective employee's or volunteer's full name (first and last) and one of the following: complete address, social security number, birth date, or driver's license number.