



CDSS

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STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY  
**DEPARTMENT OF SOCIAL SERVICES**

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ARNOLD SCHWARZENEGGER  
GOVERNOR

December 1, 2008

ALL COUNTY LETTER NO. 08-58

TO: ALL COUNTY WELFARE DIRECTORS  
ALL COUNTY CHILD WELFARE PROGRAMS MANAGERS  
ALL JUVENILE COURT JUDGES  
ALL CHIEF PROBATION OFFICERS  
ALL TITLE IV-E AGREEMENT TRIBES

SUBJECT: RELATIVE AND NONRELATIVE EXTENDED FAMILY MEMBER  
(NREFM) CAREGIVERS - CRIMINAL RECORD CLEARANCE AND  
EXEMPTION TRANSFERS

REFERENCE: SENATE BILL (SB) 776 (CHAPTER 580, STATUTES OF 2007)

The purpose of this All County Letter (ACL) is to implement the provisions of SB 776, which amended Health and Safety Code Section 1522 and Welfare and Institutions Code Section 16504.5.

The SB 776 allows a county child welfare agency with criminal record clearance and exemption authority to accept (transfer) a criminal record clearance or exemption from another county welfare agency with similar criminal record clearance and exemption authority (also known as an inter-county transfer (ICT)). This authority facilitates processing a change in jurisdiction from one county to another of a court dependent child's placement with a relative or NREFM caregiver, making it less likely that a foster child would be removed from care during the time it takes for the new county to conduct criminal record clearances and/or exemptions.

The new law now permits that when jurisdiction changes from one county to another, the caregiver and all adults residing in the home will not have to be fingerprinted by the new county of jurisdiction. Instead, the county with initial jurisdiction (transferring county) may transfer criminal record clearances and exemptions to the county with new jurisdiction (receiving county). The transfer must be of the same applicant type: subarrest rel/child place (i.e., relative or NREFM caregiver home to relative or NREFM

REASON FOR THIS TRANSMITTAL

- State Law Change
- Federal Law or Regulation Change
- Court Order
- Clarification Requested by One or More Counties
- Initiated by CDSS

caregiver home). In order for the transfer to be processed, the caregiver and all adults in the home who were initially cleared or exempted must have an active status at the Department of Justice (DOJ); that is, the original approval agency is still authorized to receive subsequent criminal history information from DOJ and has not made the caregiver or any of the adults residing in the home inactive by returning a No Longer Interested (BCII 8302) form to DOJ. Approval for a transfer must be requested for each adult in the home by submitting a Substitute Agency Notification Request (BCII 9002) to DOJ. For any transfer that is not approved, the receiving county must ensure that the individual whose request is denied is Live Scanned, with subsequent arrest notification (rapback) established, and a new criminal record clearance and/or exemption are done immediately following notice of DOJ denial.

### **COMPLETING THE BCII 9002**

A BCII 9002 form (attached) must be completed for every adult (or person over the age of 14 who has had a criminal record clearance or exemption approved) residing in the home for which transfer is required. The form must be completed in its entirety to ensure proper processing. The shaded area of the form is reserved for DOJ use only. Any required information that is not provided will result in the application being denied and returned to the receiving county agency. The request may be denied for other reasons as indicated in the "DOJ use only" area of the form.

<http://www.dss.cahwnet.gov/cdssweb/entres/forms/English/BCII9002.pdf>

### **Instructions for the Transferring County**

The transferring county is responsible for ensuring completion of Steps I and II of the form. Step I may be completed by either the county or caregiver/adult; however, the individual, not the county worker, must sign the form in this section. The transferring county should complete Step II for the individual as the county will have maintained this information as part of the approval process and child's case record. Check the box "**Relative Placement (includes NREFM).**"

### **Instructions for the Receiving County**

The receiving county is responsible for ensuring completion of Step III and for submitting the form to DOJ at the address at the bottom of the form. Completion of Step III indicates that the receiving agency has approved the transfer. The receiving county is responsible for the cost of processing each request. DOJ will process the request and if approved, use the effective date provided in Step III.

### **DOCUMENTATION**

Pending release of the revised Approval of Family Caregiver Home (SOC 815), which will allow for recordation of an ICT on page three, the receiving county should ensure that the court order accepting the transfer is recorded on the "Results Page" in the

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Page Three

Hearing Notebook within the Court Report Notebook of the Child Welfare Services/Case Management System (CWS/CMS). Once the revised SOC 815 is available, record the date provided as the "Effective Date" in Step III of the BCII 9002 on page three of the SOC 815 under the "ICT" column.

If you have any questions about this ACL, please contact the Kinship Care Policy and Support Unit at (916) 657-1858.

Sincerely,

***Original Document Signed By:***

GREGORY E. ROSE  
Deputy Director  
Children and Family Services Division

Enclosure

c: County Welfare Directors Association  
Chief Probation Officer of California

**SUBSTITUTE AGENCY NOTIFICATION REQUEST**

BCII 9002 (Orig. 08/05)

\*Check if re-submission

Form must be filled out completely to ensure processing. Any required information that is not provided will result in the application being denied and returned to the requesting agency.

\* Form may be resubmitted for corrections one time without additional charge using the original document only.

**STEP I - To be completed by applicant (please print):**

Name		
(Last)	(First)	(Middle)
Aliases (Maiden name, AKA's)		Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
Date of Birth (Month/Day/Year)		Social Security Number (optional)
<i>I am requesting that my fingerprint clearance or exemption be transferred to the receiving licensing agency below.</i>		
Applicant Signature _____		

**STEP II - Original application information - to be completed by applicant:**

Date Fingerprinted (if known):	Original Application Type (check one): <input type="checkbox"/> Family day care <input type="checkbox"/> Family day care volunteer <input type="checkbox"/> Foster family home
Original Applicant Agency/ORI:	

**STEP III - To be completed by receiving licensing agency:**

*Completion of this section indicates that the receiving agency has approved the transfer*

Agency	Effective date
Address <small>Street or P.O. Box</small>	Agency/ORI
	Contact Name
City                      State                      Zip Code	Phone Number (    )
Billing Code	

**DOJ use only**

<p><b><u>Request approved for processing</u></b></p> <p><input type="checkbox"/> Fee Received</p> <p><input type="checkbox"/> On authorized agency list</p> <p><input type="checkbox"/> <b>Transfer complete</b></p>	<p><b><u>Request Denied (CACI not processed)</u></b></p> <p><input type="checkbox"/> Fee not received/incorrect billing code</p> <p><input type="checkbox"/> Not on authorized agency list</p> <p><input type="checkbox"/> Required data missing</p> <p><input type="checkbox"/> App type does not match</p> <p><input type="checkbox"/> Original application not on file</p>
<p><b><u>Child Abuse Central Index (CACI) processing</u></b></p> <p><input type="checkbox"/> <b>CACI Transfer complete</b>                      Technician stamp _____</p> <p><input type="checkbox"/> CACI Transfer not completed - Submit New LIC 198 Form</p>	

*Receiving licensing agency must transmit this notification to:*

**Department of Justice**  
**Bureau of Criminal Identification and Information**  
**P.O. Box 903417**  
**Sacramento, CA 94203-4170**