DEPARTMENT OF SOCIAL SERVICES

744 P Street, Sacramento, California 95814

August 5, 1998

ALL COUNTY LETTER NO: 98 - 61

TO: ALL COUNTY WELFARE DIRECTORS

[X] State Law Change [] Federal Law or Regulation	
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Change	1011
[] Court Order or Settleme Agreement	ent
[X] Clarification Requested by One or More Countin	A 5
[] Initiated by CDSS	65

SUBJECT: ASSEMBLY BILL 857 (Chapter 911, Statutes of 1996) FINGERPRINTING CRIMINAL RECORDS CHECK FOR IN-HOME SUPPORTIVE SERVICES PROVIDERS (IHSS)

The purpose of this All County Letter (ACL) is to provide counties with information and instructions regarding Assembly Bill (AB) 857. The bill amends section 15660 of the Welfare and Institutions Code (W&IC). This bill requires counties to notify In-Home Supportive Services (IHSS) and Personal Care Services Program (PCSP) recipients or applicants upon their application, the annual redetermination, or upon the changing of providers, of the availability of the criminal records check, and that it can be performed by the Department of Justice (DOJ). The recipient would be responsible for paying any fees incurred for obtaining the providers' fingerprints and for submitting those fingerprints to DOJ.

Public Authorities (PA) may opt to inform the recipient of his/her right to have providers fingerprinted. Contractors have the option of fingerprinting their own employees. However, the state will not provide additional funds for the PA or contractor for this purpose.

County Responsibilities

Counties are mandated only to inform their IHSS and PCSP recipients of the availability of the criminal record check. This notification may be by mail or by a face to face contact with the recipient or applicant.

Recipient Responsibilities

IHSS recipients may request that their provider be fingerprinted. The recipient is responsible for payment of the fingerprinting fees. The following is a brief explanation of the DOJ's fingerprinting process:

- 1. There is a fee of approximately \$10.00 to \$16.00 to have the provider's fingerprints taken. The provider may go to his/her local law enforcement agency, a private agency, or any other agency that is designated by the county welfare department to take fingerprints.
- 2. A fingerprint card will be provided at the time of fingerprinting. Providers are instructed to indicate on the card the reason for being fingerprinted as "Elder Care Certification per W& IC section 15660." The recipient's name and address must be placed in the "employer" box of the fingerprint card.
- 3. The recipient must send the provider's fingerprints to the DOJ along with a processing fee of \$32.00. The payment should be in the form of a check or money order, made payable to the **Department of Justice**. The fingerprint card should be mailed along with the payment to:

Department of Justice Bureau of Criminal Identification P.O. Box 903417 Sacramento, California 94203-4170

4. The DOJ will return the results of the provider's fingerprint check to the recipient within thirty calendar days.

Please contact me at (916) 657-2265 or Diane Just, Chief, Adult Programs Branch, at (916) 229-4582 if you have any questions regarding this ACL.

Sincerely

Original Document Signed By Donna L. Mandelstam on 8/5/98

DONNA L. MANDELSTAM Deputy Director Disability and Adult Programs Division