STATE OF FLORIDA

CF OPERATING PROCEDURE
NO. 175-94

TALLAHASSEE, June 4, 2007

Office of Family Safety

CRIMINAL HISTORY AND DELINQUENCY RECORD CHECKS FOR INVESTIGATIONS, PLACEMENT AND EMERGENCY PLACEMENT

The purpose of this operating procedure is to ensure that required criminal history and delinquency record checks are requested in a timely manner and the results protected in accordance with existing law, policy and procedure. It also provides information regarding the procedures for the Crime Intelligence Unit at the Florida Abuse Hotline.

BY DIRECTION OF THE SECRETARY:

(Signed original copy on file)

DON WINSTEAD
DEPUTY SECRETARY

SUMMARY OF REVISED, DELETED, OR ADDED MATERIAL

This operating procedure has been completely re-written to reflect current access and handling of criminal history and delinquency record information. Criminal history and delinquency record checks are performed by the Florida Abuse Hotline for child and adult investigations as well as placement, therefore the process for requesting as well as the process for completing criminal history checks has been included in this operating procedure. The operating procedure includes how to access national criminal history information for emergency placement of children in urgent circumstances. The importance of fingerprinting non-licensed relative and non-relative placements is also addressed in this revision. The previous operating procedure required a Unit Dissemination Log be kept at the secured printer where the criminal history checks were received from the Florida Abuse Hotline. This has been deleted as it is no longer required. The initial dissemination is now tracked in the phoeniX database at the Florida Abuse Hotline and in the current legal electronic system of record (HomeSafenet/Florida Safe Families Network). References to the secure fax have been deleted because this process was replaced 4/2/07 by an automatic email notification.
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Chapter 1

GENERAL

1-1. **Purpose.** This operating procedure provides requirements to ensure that criminal history and delinquency record checks for the purposes of investigation of allegations of child abuse, neglect and abandonment and adult abuse, neglect and exploitation, planned placements, or emergency child or vulnerable adult placements with unlicensed in home caregivers are requested in a timely manner and the results protected in accordance with existing law, policy and procedure. It also provides information regarding the procedures for the Crime Intelligence Unit at the Florida Abuse Hotline.

1-2. **Scope.** This operating procedure is applicable to all Department of Children and Families employees and designees involved in the investigation of child abuse, abandonment, neglect or threatened harm, adult abuse, neglect or exploitation, emergency placement of children and vulnerable adults with unlicensed in home caregivers, service provision to children and families and the Florida Abuse Hotline.


1-4. **References.**

*Regulations*


*Rules*

11C-6, Florida Administrative Code (FAC), 65C-28.011 FAC, 65C-29.009 FAC

*Policy*

CFP 15-7 Record Retention Schedules Used by the Department of Children and Families
CFOP 50-2 – Security of Data and Information Technology Resources
CFOP 50-6 – Security
CFP 60-1 – Employee Handbook
HRSOP 175-26 – Confidentiality of Children and Families Records
CFOP 175-34 Removal and Placement of Children
CFOP 175-39 Change of Custody
Florida Crime Information Center (FCIC) Criminal Justice Information System (CJIS) Certification Manual, July 2005 *(Users will receive this manual when they attend training. A copy is also on file in and available from the Florida Abuse Hotline.)*
Florida Department of Law Enforcement (FDLE) Criminal Justice Agency User Agreement with the Department of Children and Families (DCF) *(A copy is on file and available from the Office of Family Safety.)*
1-5. **Definitions.** Definitions of terms and acronyms for the purposes of this operating procedure can be found in Appendix A. Printing a copy of Appendix A and referring to the copy during any usage of this operating procedure is recommended.

1-6. **General Requirements.**

   a. The Information Access program refers to the Department’s ability to obtain criminal history information from the Florida Department of Law Enforcement (FDLE) and the Department of Juvenile Justice (DJJ). The agreement with FDLE allows the Department to access the Florida Crime Information Center (FCIC) and the National Crime Information Center (NCIC) records.

   b. The Information Access program follows existing law and interagency agreements or contracts to establish what information the Department may access, how the information can be accessed, how the information can be used, and how the information can be shared. Department employees and designees must abide by the terms of these documents and maintain the confidentiality of the information obtained. Information received from agencies under the Information Access program must never be shared outside of the Department, except authorized agency designees and the courts. Some information requires special handling and cannot be shared within the Department or with designees or the courts except for the purposes of investigation and/or emergency placements of children with unlicensed relatives and non-relatives.

   c. When criminal history, delinquency, or other information is requested from the Florida Abuse Hotline Crime Intelligence Unit (CI Unit), the protective investigator or contracted provider assigned to the case at the time of the request is responsible for any follow-up associated with the requested information.

   d. The protective investigator or contracted provider is responsible for ensuring all available information is reviewed, evaluated and retained in the case file.

   e. Child and Adult Investigations can request checks or rechecks from the Florida Abuse Hotline at any time for the purpose of investigation. Requests for criminal history checks for placement of children or vulnerable adults or releasing children to a parent can only be made of the Florida Abuse Hotline for the initial placement or release; any rechecks must be made by the caseworker through local law enforcement, public records databases, or purchased from the Florida Department of Law Enforcement by calling (850) 410-7000, or visiting the FDLE internet website at http://www.fdle.state.fl.us.

   f. The purpose of the request, not the requestor’s job title, dictates what information can be requested and accessed. Whether the requestor works for the Department or a contracted provider dictates what can be received.

   g. Any person who will request or receive criminal history and/or delinquency record information from the Florida Abuse Hotline must read this operating procedure and sign the Operating Procedure Receipt (Appendix B) prior to receiving such information. The signed form shall be kept in the employee’s personnel file. Districts/regions shall be responsible for ensuring that this is completed prior to an employee receiving criminal history information.

   h. If someone refutes the charges or information on any criminal history record, he or she may contact the Florida Department of Law Enforcement (FDLE) to contest the accuracy of the record.

   i. Private individuals, clients, and requests for state and/or national criminal history checks outside the scope of this operating procedure should be directed to the Florida Department of Law Enforcement, Post Office Box 1489, Tallahassee, Florida 32302-1489, or call (850) 410-7000, or visit the FDLE internet website at [http://www.fdle.state.fl.us](http://www.fdle.state.fl.us).
1-7. Security and Confidentiality

a. The Department has agreements with FDLE and DJJ that allow access to criminal history records for the purposes of protective investigation and placement. These records shall be held confidential and shall only be released to other parties who are allowed to view or have the records under state and/or federal law.

b. FDLE has specific requirements regarding what criminal history information can and cannot be documented in case files and the legal electronic system of record as well as physical and verbal release of information. Chapter 3 details filing, dissemination, and documentation of criminal history information.

c. Results of criminal history checks will be available in phoeniX online (also referred to as the online link) accessible through the CI Unit link in the current legal electronic system of record (HomeSafeNet [HSn], Florida Safe Families Network [FSFN]) for one business day from the time the CI Unit at the Florida Abuse Hotline completes the check. When the criminal history check is completed, the full information is viewable in phoeniX online for the appropriate person to view and print.

d. The security level for users of the legal electronic system of record dictates what, if any, criminal history information they can access and print from phoeniX online.

   (1) Users with a security level of protective investigator or protective investigator supervisor can access all information in phoeniX online including Florida sealed and expunged and NCIC information.

   (2) Users with a security level of protective services/caseworker can access Florida non sealed and non expunged criminal history information in phoeniX online.

   (3) Users with other security levels cannot access information in phoeniX online.

e. Districts/Regions shall be responsible for changing a user’s security level in the legal electronic system of record if the user moves into a position for which they are not legally allowed access to certain criminal history information. For example, if a protective investigator leaves the Department and is employed by a contracted provider as a caseworker, their security level must be changed to avoid any illegal access of information.

f. Investigative and contracted provider staff should make every effort to retrieve and print criminal history information from phoeniX online while the information is available. This will prevent staff from having to call the CI Unit to request the criminal history check multiple times because the criminal history information is no longer available.

1-8. Record Retention, Storage and Destruction.

a. All files must be retained in accordance with CFOP 15-4 Records Management.

b. Files containing criminal history information may be stored with a licensed and bonded private vendor provided clear contract language prohibits the vendor from accessing information contained in the files.

c. The destruction of criminal history records and files containing criminal history records must be witnessed by an employee of the agency who has possession of the record. If a private vendor is used for record destruction, the record holder employee must remain with the record until it is destroyed.
1-9. **Job Aids.** The Criminal History Reference Sheet (Appendix J) and Out-of-Home Care Record Checks (Appendix K) are included to assist Department employees and contracted providers. It is recommended that users print a copy of these appendices and refer to the copy during any usage of this operating procedure.

1-10. **Abuse and Misuse.** All requests and system access must be for official state business purposes only. Any request, system access or disclosure outside of the specified use will be treated as a breach of statutory confidentiality and disclosure of client records per CFOP 60-5, Chapter 3, Standards of Conduct and Standards for Disciplinary Action for Career Service Employees. Incidents of abuse or misuse may also result in civil suit and/or criminal prosecution and may be considered falsification of client records. Criminal history checks shall **never** be requested for diligent searches or efforts to locate persons.

1-11. **Point of Contact.**

a. All Points of Contact (POC) will be responsible for ensuring compliance with policy and procedures regarding access to external agency databases and serves as the contact person for all issues regarding the handling of criminal history information.

b. Each district shall designate the following Points of Contact (POC); CPI POC for each county, API POC for each county and NCIC POC for the district/zone. The district will determine whether one individual will serve multiple POC roles.

(1) The CPI POC will receive an automatic email for every criminal history check completed for child investigations or completed at the request of a child protective investigator.

(2) The API POC will receive an automatic email for every criminal history check completed for adult investigations or completed at the request of an adult protective investigator.

(3) The NCIC POC will receive an automatic email for every criminal history check completed for emergency placement made at the request of a contracted child provider.

(4) These emails will include the intake/report number, the purpose of the check (initial, additional, recheck, planned placement, emergency placement in exigent circumstances), the sequence number of the intake, and the name of the requestor. The purpose of these emails is to ensure that criminal history is being accessed before it is purged after one business day.

(5) The NCIC POC receives the email notification because contracted child providers cannot receive NCIC information and the district is responsible for reviewing the information and completing a final Placement Consideration Letter. Details regarding this process are in Chapter 2, Section 2-3 1.(4)(c)-(d).

(6) The district will be responsible for designating a POC as responsible for tracking all NCIC Purpose Code “X” name checks and ensuring that fingerprint cards/livescans are completed as required. This can be accomplished by using the NCIC Tracking form (Appendix D), Non-licensed Relative/Non-Relative Placement Fingerprint Based Criminal History Check Form (Appendix F), Non-licensed Relative/Non-Relative Placement Live Scan Fingerprint Demographic Form (Appendix G), and the National Crime Information Center Explanation Form (Appendix E) or similar tracking mechanisms.

(7) The designated POC will be responsible for completing the monthly Purpose Code X audits from FDLE. Details are in 1-12 below.
(8) The CI Unit link accessible in the current legal electronic system of record allows access to phoeniX online which has reports of all criminal history checks and NCIC Purpose Code X checks. Users will specify a date range and can pick one county or a district/zone. The information returned includes the intake/report or case number, the date and time of the check, the district, county and the requestor. It also indicates if the requestor is a Department employee or a contracted provider.

c. Each contracted Community Based Care Lead Agency shall designate a POC for FCIC for each county. The Community Based Care Lead Agency POC will receive an automatic email for every criminal history check completed for placement at the request of a contracted child provider for their county/area.

d. The district and Lead Agencies shall be responsible for notifying the Florida Abuse Hotline of any changes to the POC using the form in Appendix L.

1-12. Purpose Code “X” Audits for NCIC Name Checks for Emergency Placement

a. The Department has an agreement with FDLE that details responsibilities regarding allowing access to criminal history records. Part of the agreement pertains to recordkeeping and audits. Searches for records within FCIC and NCIC have a Purpose Code that identifies the reason for the inquiry. The information returned varies by purpose code. NCIC name checks for emergency placement of children with unlicensed relatives or non-relatives use Purpose Code X. Purpose Code X is only for emergency placement of children.

b. Every month, FDLE reviews the Purpose Code X checks completed by the Crime Intelligence Unit and attempts to match them to fingerprint cards/live scans submitted in the districts/region. FDLE creates a list of names it was unable to match and sends it to the Florida Abuse Hotline for an audit.

c. The Florida Abuse Hotline will distribute the audit list to the POC for NCIC. The due date for completion of the audit will be at least two weeks from the date the audit is emailed. The email will be encrypted and the Excel spreadsheet will be password protected. The district/zone is responsible for completing the audit including obtaining information from contracted providers. The POC shall email the completed audit back to the Florida Abuse Hotline. Any emailing of the audit shall be encrypted. The Florida Abuse Hotline will compile the audit and return it to FDLE.

d. Reminder emails will be sent to the districts/zones that miss the deadline for returning the audit to the Florida Abuse Hotline. The district/zone operations manager(s) will be copied on reminder emails. The email will include the date and time the audit will be sent to FDLE. If the audit is not received prior to that date and time, the district/zone is still responsible for completing the audit and returning it to the Florida Abuse Hotline. When it is received, the Florida Abuse Hotline will send it to FDLE.

e. FDLE may use the audits to determine when it will conduct on site compliance audits. Failure to complete audits or audits that lack complete information may alert FDLE to the need for an on site audit. FDLE reserves the right to conduct compliance audits at any time.

f. For each person who had an NCIC check completed by the CI Unit, the POC will indicate whether or not fingerprint cards/live scans were submitted and if not, why not. Some reasons require the POC to also explain what corrective action took place. The explanation of corrective action does not need to be lengthy. An example without any identifying information is in appendix H. The following are the categories and what explanation, if any is required:

(1) Child not placed. No explanation required.
(2) Court ordered child released to parent before fingerprints could be obtained. No explanation required.

(3) Subject moved out of household. No explanation required.

(4) Duplicate transmission. This explanation is for instances in which the name was run more than one time during the month.

(5) Ran in error – this is a parent. This reason requires the documentation of corrective action. For example, requestor was reminded that we do not request NCIC for parents.

(6) Ran in error – this is a minor in the home. This reason requires the documentation of corrective action. If this occurs, the person completing the form does not need to complete the column for remarks. The Florida Abuse Hotline will be responsible for the corrective action and documenting it.

(7) Ran in error – investigation. This reason requires the documentation of corrective action.

(8) Alias (AKA). This reason should only be used if the individual is on the same audit under more than one name, for example, maiden name and married name. The main name will be entered in the Remarks column.

(9) Child Placed - Fingerprints Submitted on time. This reason requires the documentation of the date fingerprints were submitted and Transaction Control Number (TCN) in the Remarks column.

(10) Child Placed - Fingerprinted Late. This reason requires the documentation of the date fingerprints were submitted, the TCN number, an explanation for not submitting within 10 calendar days, and the documentation of corrective action.

(11) Child Placed and subsequently moved to another setting. This reason requires the documentation of the date the child was moved. If the child was in placement for more than 10 calendar days, it also requires an explanation why fingerprints were not submitted on time and corrective action.

(12) Subject Refused to be Fingerprinted. This reason requires the documentation of the date the Court was advised and what was ordered.

g. To ensure that NCIC checks for emergency placement are not being requested for persons who are not household members or frequent visitors such as paramours, FDLE also requires the role the person who had an NCIC name check performed has in the household.

(1) The Purpose Code “X” audit sent out by the Florida Abuse Hotline will include a column to indicate the role of the person in the household where placement is being considered.

(2) The roles are as follows:

(a) Proposed caregiver. There can be more than one proposed caregiver.

(b) Household member of proposed caregiver

h. It is recommended that districts/zones create a way to track NCIC requests and outcomes to facilitate completion of the audit. Sample forms that can be utilized are in appendices D and E.
Chapter 2

CRIMINAL HISTORY CHECKS

2-1. Types of Criminal History Checks. The following criminal history checks will be obtained for Child and Adult Investigations, child planned placement or emergency placement with a non-licensed relative or non-relative, child releases to a parent, and adult planned or emergency placement with unlicensed in home caregivers. All types of checks completed by the Crime Intelligence (CI) Unit at the Florida Abuse Hotline apply to all the reasons for checks unless otherwise noted below.

a. Florida criminal history will be obtained from the Florida Criminal Information Center (FCIC) by the CI Unit at the Florida Abuse Hotline for subjects/participants who are age 12 and older.

(1). Protective investigations is the only component of our agency classified as criminal justice in §943.045(10)(d) F.S.; thus criminal history generated for the purpose of an investigation may include sealed and expunged information per §943.0585(4)(c) F.S. and §943.059(4) F.S.

(2) Pursuant to Florida law, a criminal history record that has been sealed and information relating to the existence of an expunged criminal history record are deemed confidential and exempt from the provisions of the Florida public records law. This confidential information is not accessible for placement purposes, and cannot be disseminated outside the confines of the criminal justice sector. The requestor cannot further disseminate this information verbally, by documenting in the case file, or by sharing the documents with anyone other than the attorney for the Department who is handling the case and the judge hearing the case.

(3) Purpose Code C contains sealed and expunged records. This check will be completed by the CI Unit only for child and adult investigations.

(4) Purpose Code Q contains Florida public criminal history without sealed or expunged records.

b. Delinquency history will be obtained from the Juvenile Justice Information System (JJIS) by the Crime Intelligence Unit at the Florida Abuse Hotline for subjects/participants who are age 12 to 26.

c. The Department of Corrections (DOC) database and the Sexual Offender/Predator database will be checked by the Crime Intelligence Unit at the Florida Abuse Hotline for subjects/participants who are age 12 and older.

d. For child protective investigations only, National Crime Information Center (NCIC) checks will be completed using Purpose Code “C” for participants/subjects who are age 12 and older.

e. For child emergency placements in urgent circumstances with delayed fingerprint submission, NCIC checks will be completed using Purpose Code “X” for household members age 18 and older.

f. Child protective investigators and contracted child providers will contact Local Law Enforcement for local criminal history checks.

g. Results of the criminal history checks completed by the Crime Intelligence Unit at the Florida Abuse Hotline will be available in phoeniX online for one business day from the time the criminal history check was completed.

h. As with any live database, the information received from any criminal history check is only current as of the date and time the check was completed. Decisions must not be made using old rap sheets. A new rap sheet is required as part of the placement review procedure for each placement.
Old rap sheets are retained solely to show why prior decisions were made, not as the basis for making future decisions.

2-2. **Child and Adult Investigations**

a. For each initial and additional child and adult intake/report received, the CI Unit at the Florida Abuse Hotline will perform the applicable criminal history checks on all known participants/subjects prior to assigning the intake/report for counties in which protective investigators are employees of the Department. Departmental systems (i.e., HomeSafenet [HSn], Florida Safe Families Network [FSFN]) will be checked by the intake staff entering the intake/report for prior Department involvement with all participants/subjects of the intake/report.

b. The child protective investigator shall request a local history check from local law enforcement on all participants/subjects of the intake/report, household members and frequent visitors age 12 or older. See appendix A for the definition of frequent visitors. Frequent visitors do not need to be entered as participants/subjects in the investigation unless they are associated with the allegations.

c. The child or adult protective investigator must contact the CI Unit at the Florida Abuse Hotline to request criminal history checks and delinquency checks on persons residing in the household and other participants/subjects who were not included in the initial or additional intake/report or for whom there was insufficient information for an accurate check when the intake/report was received. The protective investigator will perform a check of Department systems on these persons. The protective investigator will request record checks as persons or corrected demographic information becomes known. Results of the criminal history checks will be available in phoeniX online for one business day from the time the criminal history check was completed.

d. For institutional investigations, the only persons who should have criminal history checks are the alleged victims who are 12 years of age or older and the alleged perpetrator/alleged caregiver responsible. Even when the facility is a foster home, group home or Assisted Living Facility, the only participants/subjects of the intake/report are the alleged victim(s) and alleged perpetrator(s).

   (1) If the alleged perpetrator on the intake/report is unknown and the investigation identifies a small number of staff who could reasonably be the alleged perpetrator, the child or adult protective investigator can request criminal history checks for the possible alleged perpetrators as rechecks.

   (2) The protective investigator should not contact the CI Unit for criminal history checks on all employees of a facility, unless the employees are alleged perpetrators.

e. If sealed or expunged information exists, the CI Unit will retrieve both Purpose Code "C" and "Q" results and document each separately. Purpose Code “Q” does not contain sealed or expunged information. Both results will be available to the protective investigator through phoeniX online for one business day from the time the criminal history check was completed.

f. If no sealed or expunged information exists, the CI Unit will retrieve using Purpose Code “Q” and the results will be available for the protective investigator in phoeniX online for one business day from the time the criminal history check was completed.

2-3. **Planned Placements of Children with a Non-licensed Relative/Non-Relative, Releases to a Parent and Emergency Placement of Children in Urgent Circumstances with Delayed Fingerprint Submission.**

a. Planned placement with a non-licensed relative or non-relative is different from release to a parent.
(1) Although releases to a parent are planned, the distinction is made because the criminal history checks that can be completed are different for parents verses unlicensed relatives or non relatives.

(2) It may help to understand the distinction by thinking in these terms: A child is “placed” with an unlicensed relative or non-relative but is “released” to a parent regardless of whether or not the child was removed from that parent.

(3) There are situations in which the proposed caregiver for a sibling group is the parent of one or more of the children and an unlicensed relative or non relative of the other children. For example, the proposed caregiver is the father of one child which is considered a release to a parent. He is also the stepfather of the other children which is considered a planned placement. In this case, all criminal history checks apply including national criminal history checks.

b. If placement with an unlicensed relative or non-relative is planned, and there are no exigent circumstances requiring an emergency placement within seventy-two hours, court approval shall be received prior to making the placement.

c. When a child is in placement with a relative or non-relative, criminal delinquency, and abuse/neglect history checks are required for new household members, frequent visitors or paramours of household members if they have not received the checks within the previous twelve months and there has been no break in service for over ninety days.

d. The CI Unit does not have authority to run criminal history checks for purposes of judicial review, adoption, visitation, baby-sitting, and respite.

e. Prior to recommending the placement to the court, all criminal, delinquency and abuse/neglect history check activities must be performed and the results reviewed including the results of fingerprinting.

f. Prior to recommending to the court that a child be released to a parent, the parent, household members, frequent visitors and any paramours of household members shall undergo all criminal, delinquency and abuse/neglect history checks that are required for placement with unlicensed relatives and non-relatives.

(1) Parents are not subject to national criminal history checks/fingerprinting, however a local and state criminal history check and state delinquency check are required on parents and the results reviewed prior to a child being released to the care of his or her parent.

(2) A national criminal history check may be performed when placement is with a caregiver who is the parent of one, but not all of the children being placed. National criminal history checks will be obtained via fingerprint submission for planned placements and from the Crime Intelligence Unit for emergency placements. See Chapter 3, Section 3-2 Receipt and Dissemination for details regarding fingerprint results.

g. Our agreement with FDLE recognizes that there are situations in which a child must be placed with an unlicensed relative or non-relative caregiver but there is insufficient time to complete fingerprinting of the proposed caregiver and notification to the court prior to the placement. This is considered an emergency placement in urgent circumstances with delayed fingerprint submission only if the placement must be made within 72 hours.

(1) This includes any emergency placement with an unlicensed relative or non-relative while the child is in shelter status or a disrupted protective supervision environment when it is anticipated that placement will occur within 72 hours. If it is anticipated that it will be more than 72
hours before the placement is made, this section does not apply because it is a planned placement, not an emergency placement in urgent circumstances.

(2) NCIC Purpose Code "X" checks will be completed by the CI Unit at the Florida Abuse Hotline for emergency placements in urgent circumstances with delayed fingerprint submission.

(3) Individual states determine what information, if any, will be returned when Purpose Code "X" is used in NCIC. If there is an indication that a record on an individual exists in another state (e.g., an FBI Number received as a result of a query), however detailed information is not returned or is incomplete on the rap sheet, a child must never be placed with that individual until fingerprints are submitted to and the results are received from the FDLE and/or FBI and reviewed.

h. No child shall be placed with a relative or non-relative who has offenses listed in §39.0138 Florida Statutes (F.S.) and Florida Administrative Code (F.A.C) 65C-28.011. F.A.C. 65C-28.011 lists specific charges and references the statutes that define those charges. The following is found in §39.0138 F.S.

(1) The Department may not place a child with a person other than a parent if the criminal history records check reveals that the person has been convicted of any felony that falls within any of the following categories:

   (a) Child abuse, abandonment, or neglect;

   (b) Domestic violence;

   (c) Child pornography or other felony in which a child was a victim of the offense; or

   (d) Homicide, sexual battery, or other felony involving violence, other than felony assault or felony battery when an adult was the victim of the assault or battery.

(2) The Department may not place a child with a person other than a parent if the criminal history records check reveals that the person has, within the previous 5 years, been convicted of a felony that falls within any of the following categories:

   (a) Assault;

   (b) Battery; or

   (c) A drug-related offense.

i. For a release to a parent, there are no offenses that automatically disqualify the parent regardless of whether the offense was committed by the parent, a household member, a frequent visitor or a paramour of a household member. All criminal, delinquency and abuse/neglect information will be provided to the court which shall make the final decision regarding the placement decision when the results of the checks raise concerns about the safety of the child.

j. The protective investigator or contracted provider must perform a check of Department systems on all household members and frequent visitors of the proposed placement with an unlicensed relative or non-relative or release to a parent.

k. The protective investigator or contracted provider will contact local law enforcement to request the local criminal history checks for all members and frequent visitors of the placement household age 12 or older. If the protective investigator or contracted provider makes the placement decision after regular business hours and is unable to obtain local criminal history checks before the
placement is made, they must request them the next working day. The placement must be re-evaluated if the local criminal history check reveals new information.

I. The protective investigator or contracted provider shall contact the CI Unit at the Florida Abuse Hotline to request the criminal history and delinquency record checks.

(1) The requestor must provide the following: his/her name, Social Security Number (SSN) or UserID for the legal electronic system of record, district, county, the agency where the individual works, the appropriate intake/report number or ongoing services case number and a call back telephone number. The following demographic information is required for each individual where a potential placement might exist: first name, last name, DOB, role in the proposed placement household, and SSN.

(2) For criminal history check requests for emergency placement of children, the requestor must provide answers to five questions to determine if the CI Unit is authorized to complete the NCIC check. The questions and required answers are in Chapter 4, Crime Intelligence Unit, Section 4-2 d.(6).

(3) For planned placement requests, the CI Unit at the Florida Abuse Hotline shall complete the applicable Florida checks. If any information exists, it will be available in phoeniX online for one business day from the time the check was completed.

(4) For emergency placement requests, the CI Unit will complete Florida criminal history checks.

   (a) If any disqualifying criminal history exists in Florida, no additional checks are necessary unless ordered by the court.

   (b) If any non-disqualifying criminal history exists in Florida, the protective investigator or contracted provider will be advised of the record and asked if he or she still intends on pursuing placement with the individuals. If the protective investigator or contracted provider intends on pursuing placement, or if no criminal history record exists, then the CI Unit will perform a National Crime Information Center (NCIC) check using Purpose Code “X”.

   (c) If the request is submitted by a contracted provider, the CI Unit will use the analysis of National Criminal History Checklist and Score Sheet Matrix (Appendix O). This document results in a preliminary recommendation either for or against the proposed placement.

   (d) If the placing agency is a contracted provider, then the district will evaluate the criminal history results, prepare a Final Placement Consideration Letter and transmit it to the contracted provider. (Appendix I)

(5) If criminal history is found in FCIC, JJIS, DOC or Sexual Offender/Predator databases, the results will be available through phoeniX online for one business day and an email notification will be sent to the POC for FCIC. Contracted providers can access this criminal history information in phoeniX online.

(6) If criminal history is found in NCIC, the results will be available for Department staff through phoeniX online for one business day. NCIC information will not be available to contracted providers.

(7) The CI Unit will attempt to contact the requestor via telephone.
(a) If the requestor is Department staff, the CI Unit will provide all information from the checks.

(b) If the requestor is with a contracted provider the CI Unit will provide FCIC information excluding sealed and expunged information and inform the requestor that based on the preliminary information, no information was found that prohibits placement consideration OR that placement is not recommended.

(8) When a child is placed with a non-licensed relative or non-relative due to urgent circumstances, the protective investigator or contracted provider placing the child must advise the adult household members that fingerprints should be submitted the next business day. Fingerprints must be submitted no later than ten calendar days following the NCIC name check.

(a) The protective investigator or contracted provider who requested the emergency placement checks is responsible for ensuring that the adult household members submit fingerprints the next business day.

(b) When the placement occurs before or as the case is transitioning from investigations to a contracted provider, and the protective investigator requested the emergency placement checks, they are responsible for following up with the adult household members to ensure they submit fingerprints the next business day.

(c) If fingerprinting would cause the household member undue hardship, the CW/CBC Program Administrator or his or her designee may grant an exception to the person from the NCIC and fingerprinting requirement.

1. Exceptions can only be granted when fingerprinting would cause an individual undue hardship based on the individual’s physical and/or mental limitations.

2. The person’s presence in the home, the limitations that justify the exception and access to the child must be addressed in the home study.

3. The court must be advised of any persons who received an exception from the fingerprinting requirement and the reason for such exemption.

(d) All documentation regarding the exception must be retained in the case file and documented on the Purpose Code X audit report.

(9) If no hardship exception has been issued and fingerprint submission does not occur within the ten calendar days, on the eleventh day the protective investigator or contracted provider must advise the court of the caregiver’s failure to comply with the fingerprinting requirement.

(a) Should the failure to comply be due to a reasonable or unforeseen circumstance (e.g. caregiver hospitalized the day after the placement), then the protective investigator or contracted provider will advise the court of the date he or she anticipates fingerprints will be submitted.

(b) Should the failure to comply not have a reasonable explanation, then the protective investigator or contracted provider must petition the court to order the subject(s) to submit fingerprints by a given date and, if fingerprints are not submitted by the given date, the petition will ask that the child be removed.
m. For planned placements, the protective investigator or contracted provider will request the national criminal history via the submission of fingerprints for unlicensed relatives and non-relatives. This includes proposed caregivers who are the parent of one but not all the children who are proposed to be placed/released. See Chapter 3, Section 3-2 Receipt and Dissemination for details regarding fingerprint results.

2-4. Planned and Emergency Placement of Vulnerable Adults with Unlicensed In Home Caregivers

   a. Adult Services may request criminal history checks for placement reasons. Criminal history for placement shall only be requested if Adult Services is arranging placement of a vulnerable adult with an in home caregiver who is not licensed. Criminal history checks shall not be requested for placement in a licensed facility.

   b. The Adult Services staff member shall contact the CI Unit at the Florida Abuse Hotline to request state criminal history and delinquency record checks.

   c. Adult Services staff are not required to request local criminal history checks from local law enforcement, however they are encouraged to do so if possible. The information from these checks may not be in the FCIC system and may provide information to assist in making decisions about placing a vulnerable adult with non-licensed caregivers.
Chapter 3.

FILING, DISSEMINATION AND DOCUMENTATION OF CRIMINAL HISTORY INFORMATION

3-1. Filing Criminal History Information

a. The printable pages accessible through phoeniX online contain the following disclaimer for FCIC Purpose Code “C” and NCIC Purpose Code “C” queries:

| Investigations. This document is confidential pursuant to state law. It shall not be disseminated beyond the confines of government personnel directly responsible for adult/child protective investigations and the court. Any wrongful dissemination will subject the parties to administrative and criminal penalties. This information must be placed in a separate envelope marked CONFIDENTIAL and include the aforementioned language. |

b Upon printing any criminal history record generated using FCIC or NCIC Purpose Code “C”, the protective investigator must review the record and place it in an envelope marked with the above language. The envelope shall be retained in the case file.

c. The printable pages accessible through phoeniX online contain the following disclaimer for FCIC Purpose Code “Q” queries, JJIS queries, DOC and Sexual Offender/Predator checks:

| Confidential information for use only by personnel responsible for child welfare or adult services placement casework activities and the court. Any wrongful dissemination will subject the parties to administrative and criminal penalties. |

d. Upon printing any criminal history record generated using Purpose Code “Q” JJIS queries, and other criminal history information, the protective investigator or contracted child provider must review the record and place it in the case file.

e. Fingerprint results may contain Florida sealed and expunged information and National criminal history information.

(1) Upon printing the Florida fingerprint results that do not contain Florida sealed or expunged information, the person printing the results will mark each page of the fingerprint results with the information in the box that follows. After the results are reviewed, they shall be placed in an envelope marked with the same information which is:

| FLORIDA FINGERPRINT RESULTS |
| This document is confidential pursuant to state and federal law. It must not be disseminated beyond the confines of personnel responsible for child placement and the court. Any wrongful dissemination will subject the parties to administrative and criminal penalties. |

(2) Upon printing the National or combined Florida and National fingerprint results which may include Florida sealed and expunged information, the person printing the results will mark each page with the information in the box that follows. After the results are reviewed, they shall be placed in an envelope marked with the same information which is:
f. The printable pages accessible through phoeniX online will contain the following disclaimer for NCIC Purpose Code “X” results:

**NCIC RESULTS**

This document is confidential pursuant to state and federal law. It must not be disseminated beyond the confines of governmental personnel responsible for child placement and the court. Any wrongful dissemination will subject the parties to administrative and criminal penalties.

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**FLORIDA/NATIONAL FINGERPRINT RESULTS**

This document is confidential pursuant to state and federal law. It must not be disseminated beyond the confines of governmental personnel responsible for child placement and the court. Any wrongful dissemination will subject the parties to administrative and criminal penalties.

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g. After the results are reviewed, they shall be placed in an envelope marked with the above statement and retained in a Departmental file.

3-2. **Receipt and Dissemination of Criminal History Information**

a. Criminal history obtained from FCIC and NCIC checks and fingerprinting is confidential and shall only be received and disseminated as prescribed in this section.

b. All secondary dissemination of criminal history information shall be recorded on the Secondary Dissemination Log (Appendix C).

   1. Secondary dissemination means the releasing of criminal history information either by physically providing documents or verbally providing information.

   2. If the contracted provider initiated the request, they are the requestor and the dissemination to them has already been documented, so there is no need to make an additional notation on the Secondary Dissemination Log; however the contracted provider must record any secondary dissemination they make to the court, state attorney, Department, or inspection by a Guardian ad Litem.

   3. The Secondary Dissemination Log is used to document all secondary disseminations for all cases that are made by staff in a unit, service center, agency, etc.

   4. Each entry on the Secondary Dissemination Log must be maintained for at least four years.

   5. Districts/Zones or counties and contracted child providers will determine how many Secondary Dissemination Logs are needed and where to maintain the Logs.

   6. When FDLE audits, the auditor will check to see that the District or contracted agency is maintaining the Secondary Dissemination Log in an appropriate manner.

c. FCIC Purpose Code “C” shall only be received by Department staff directly responsible for child and adult protective investigations and shall only be provided to the court for an *inspection in camera* and shall only be disseminated to Department Child Welfare Legal Services (CWLS) attorneys and state attorneys. It shall not be disseminated to contracted providers.
d. NCIC Purpose Code “C” shall only be received by Department staff directly responsible for child protective investigations. NCIC Purpose Code “C” information shall only be provided to the court for an inspection in camera and shall only be disseminated to Department CWLS attorneys and state attorneys. It shall not be disseminated to contracted providers.

e. NCIC Purpose Code “X” shall only be received by Department staff directly responsible for child protective investigations and the POC designated to receive this information for criminal history requests for emergency placement made by contracted providers. NCIC Purpose Code “X” information shall only be provided to the court for an inspection in camera and shall only be disseminated to Department CWLS attorneys. It shall not be disseminated to contracted providers.

f. Fingerprinting

   (1) The fingerprint results may contain information concerning criminal activity within and outside of Florida. The results may contain sealed and expunged Florida information. This confidential information is only accessible for placement purposes.

   (a) Florida sealed and expunged information and national criminal history information from outside of Florida can only be received by the Department. Contracted providers cannot receive this information in any form.

   (b) Florida non-sealed and non-expunged information can be received by contracted providers.

   (c) If a contracted provider initiated the fingerprinting, the Department will receive any results containing Florida sealed and expunged information and national criminal history information.

   (d) The contracted provider will receive any Florida public criminal history without sealed and expunged information.

   (2) The district is responsible for evaluating any Florida sealed and/or expunged information as well as any national criminal history information and will issue a Final Placement Consideration Letter (Appendix G). The district may take any available information under consideration when issuing the Final Placement Consideration Review Letter (Appendix I).

   (a) The district/zone will determine who will be responsible for this evaluation. The district may take any available information under consideration in the evaluation.

   (b) The district will issue a Final Placement Consideration Letter (Appendix G) and will be responsible for filing a copy of the letter.

   (c) The contracted provider shall retain the Final Placement Consideration Review Letter in their case file.

   (d) The district will be responsible for determining where to file a copy of these letters when there is no open investigative file. Criminal history records for closed investigation cases will be retained in the Child Welfare Legal Services (CWLS) or contracted governmental attorney legal case file. Districts may choose to file the Final Placement Consideration Letters with the criminal history information that was used for the decision in the letter.

   (3) The contracted provider is responsible for reviewing all available information.
(4) Information from fingerprint results is confidential and cannot be disseminated either verbally, by notating results in the case file or any computer systems, or by sharing the documents with anyone other than the Department CWLS attorney who is handling the case and the judge hearing the case.

(a) Department staff shall give the judge hearing the case a copy of the fingerprint results in an envelope marked as outlined in section 3-1, e.

(b) If a judge requests a copy of the national fingerprint results for a placement initiated by a contracted provider, the provider will relay the request to the Department and the Department will supply the judge with a copy. The district/zone will be responsible for determining who will be responsible for receiving and processing these requests.

(c) Results of fingerprinting must not be read into the court record by any Department or contracted employee.

g. FCIC Purpose Code “Q” and JJIS information shall only be received by Department staff directly responsible for child and adult protective investigations and contracted child providers. It can only be disseminated to Department CWLS attorneys, the court, state attorney or contracted child provider. It may be inspected by a Guardian ad Litem which is also considered a secondary dissemination.

h. Upon transfer of the case to a contracted child provider, the FCIC Purpose Code “C”, NCIC Purpose Code “C”, NCIC Purpose Code “X” and fingerprint results that contain national information or Florida sealed and expunged information criminal history records must be removed from the case file and retained in the Child Welfare Legal Services (CWLS) or contracted governmental attorney legal case file. When the record holder is a contracted provider, CWLS or the contracted governmental attorney is responsible for providing the court with a copy of any Florida sealed and expunged criminal history information or national criminal history information for an inspection in camera.

i. When filing the Pre-Disposition Study (PDS) with the court, a copy of any Florida sealed or expunged or national criminal history records must be given to the judge at the hearing for an inspection in camera. Ensure the results are marked with the appropriate language and placed in an unsealed envelope that is marked on the outside as well. While dependency records are not public records, persons other than criminal justice agencies can view them; we must advise the judge of all information we know and the judge will determine if the information should be included in the court file. All other information, including local and Florida non sealed and non expunged criminal history information and any delinquency information, must be included with the filing of the PDS.

j. Upon closure of an investigation, the protective investigator shall protect the confidential information from criminal history checks by completing the following:

(1) Child protective investigations

(a) Criminal history information that has been provided to a contracted child provider shall be placed in an envelope marked with the appropriate language, sealed and retained in the case file.

(b) If the case is not being transferred to a contracted child provider, criminal history from FCIC Purpose Code “Q”, JJIS, DOC and Sexual Offender/Predator database shall be placed in an envelope marked with the appropriate language, sealed and retained in the case file.

(c) Criminal history from FCIC Purpose Code “C”, any NCIC and fingerprint results that contain Florida sealed and expunged and/or national information shall be placed in an
envelope marked with the appropriate language and retained in the Child Welfare Legal Services (CWLS) or contracted governmental attorney legal case file.

(2) Adult protective investigations: All criminal history information shall be placed in an envelope marked with the appropriate language, sealed and retained in the investigations case file.

3-3. Documentation

a. The Florida Department of Law Enforcement has very specific guidelines regarding what can and cannot be documented in case notes or in the legal electronic system of record. The primary issues are as follows:

(1) If written notes include specifics regarding whose criminal history information it is, a criminal history record is created that is not sanctioned by any statute.

(2) Contracted providers are prohibited from receiving or viewing Florida sealed and expunged information and NCIC information. If any written note or documentation in the legal electronic system of record available to a contracted provider contains this information, confidentiality of criminal history records has been violated.

(3) Criminal history information must be protected from public record requests.

b. FDLE has approved the following wording as appropriate for documentation in case notes and the legal electronic system of record. “The appropriate background checks were conducted on (date) for (individual's name), there is or is no impact on the victim's safety.”

c. FCIC, NCIC and JJIS information cannot be transmitted via email.
Chapter 4

THE CRIME INTELLIGENCE UNIT AT THE FLORIDA ABUSE HOTLINE

4-1. Security for the Information Access Program

a. The Crime Intelligence Unit (CI Unit) staff at the Florida Abuse Hotline are considered Information Access Users and must be certified through the Florida Department of Law Enforcement (FDLE); this certification must be renewed every two years. A user may be granted supervised access to the Florida Crime Information Center (FCIC) database for up to six months prior to certification in accordance with the regulations established by FDLE. CI Unit staff will complete certification in Pre-Service Training.

b. Each CI Unit staff member must be provided with a copy of HRSOP 175-26, Confidentiality of Children and Families Records, and CFOP 50-6, Security, and sign the Security Agreement (form CF 114). CI Unit staff members must sign the Information Access User Agreement (Appendix Q), DJJ user access application (Appendix R) and the Information Access Operating Procedure Receipt (Appendix B). A copy of the Security Agreement and the original of the Information Access User Agreement must be kept in the individual user’s file maintained by the person designated as the Terminal Agency Coordinator (TAC). If an employee leaves his or her position, this file shall be merged with the employee’s personnel file. The Information Access Operating Procedure Receipt shall be filed in the employee’s unit file and merged into his or her personnel file upon leaving the position.

c. All CI Unit staff must have a current (within the last 12 months) background check done through Human Resources prior to initially accessing any system. No CI Unit staff members may have a felony conviction. A conviction or record of any kind must be referred to FDLE prior to gaining FCIC access. The results of background checks must be kept in the individual user’s personnel file maintained by Human Resources.

d. No one is authorized to access FCIC/NCIC/JJIS without being provided this operating procedure and signing the Information Access Program System Access Request Form (Appendix B).

e. The site must meet the following security regulations as defined by FDLE:

   (1) The computers with access to FCIC must be in a room that remains locked when unoccupied,

   (2) the monitor screens must face away from any open doors and not be visible from interior, ground floor, or cross-wing windows, and

   (3) Only individuals certified as users by FDLE or granted access pending certification may have unescorted access to the room and the computer(s).

f. Access to FCIC/NCIC/JJIS is limited to official state criminal justice purposes.

g. When querying FCIC or NCIC, an attention field must be completed. This field will be completed with the district number, the agency where the requestor works, the first initial and last name of the requestor, the intake/report or Ongoing services case number.

   (1) For example, if the requestor is Mary Jones, she works for the Department in District 4, and the intake/report number is 2007-111111. The attention field will be DCF/04/M Jones/07 111111.

   (2) If the requestor is Sam Brick who works for Children’s Home Society in District 2 with the intake/report number of 2007-222222, the attention field will be CHS/02/S Brick/07 222222.
h. As required by the Florida Department of Law Enforcement, criminal history will be purged from phoeniX online after one business day.

4-2. Crime Intelligence Unit procedures

a. Intakes/Reports.

(1) The Florida Abuse Hotline intake counselor creates a child or adult intake/report or a Special Conditions intake/report in the legal electronic system of record (HomeSafenet [HSn], Florida Safe Families Network [FSFN]) and participant/subject information will be documented in phoeniX or the current electronic system used at the Florida Abuse Hotline. Intake/reports will be Initial, Additional or Supplemental.

(a) Criminal and delinquency record checks will be completed for initial and additional intake/reports where the Department is responsible for investigating allegations of abuse, abandonment, neglect, and exploitation.

1. For all child intakes/reports, the CI Unit will complete NCIC Purpose Code “C”, FCIC purpose code “C” and “Q”, JJIS, Department of Corrections and Sexual Offender/Predator database checks.

2. For all adult intakes/reports, the CI Unit will complete FCIC Purpose Code “C” and “Q”, JJIS, Department of Corrections and Sexual Offender/Predator database checks.

(b) If the sheriff’s office is responsible for child protective investigations in the county where the intake/report will be assigned, the CI Unit will assign the intake/report without criminal history checks. The sheriff’s offices that are responsible for child protective investigations will conduct their own checks upon receipt of the intake/report.

(c) If the intake/report does not contain sufficient subject information to complete criminal history checks, the CI Unit will document in the intake/report that there was insufficient information to complete checks and assign the intake/report.

(d) If the intake/report is a supplemental, the CI Unit will assign the intake/report to the identified receiving unit. These intake/reports do not require criminal history checks as no participants/subjects can be added.

(e) If the initial intake/report contains sufficient information to complete a criminal history check, the CI Unit will complete the applicable checks. A summary of the results will be documented in a confidential section in the intake/report. The summary will only state the name of a charge and will not identify the subject to which it pertains or when it occurred. The full results of the criminal history check will be made available to the protective investigator through the current online link in the legal electronic system of record (HSn/FSFN).

(f) If the intake/report is an Additional, the CI Unit will determine if participants/subjects have been added. If no participants/subjects have been added, the intake/report will be assigned to the receiving unit. If participants/subjects have been added, the applicable criminal history checks will be completed. A summary of the results will be documented in a confidential section in the intake/report. The summary will only state the name of a charge and will not identify the subject to which it pertains or when it occurred. The full results of the criminal history check will be made available to the protective investigator through the current online link in the legal electronic system of record (HSn/FSFN).
(2) If criminal history and delinquency record checks can be completed and the intake/report assigned within one hour from the time the intake/report is accepted, a summary of the results will be documented in a confidential section in the intake/report. The summary will only state the name of a charge and will not identify the subject to which it pertains or when it occurred. The full results of the criminal history check will be made available to the protective investigator through the current online link in the legal electronic system of record (HSn/FSFN).

(3) If criminal history and delinquency record checks can not be completed and the intake/report assigned within one hour from the time the intake/report is accepted, the intake/report will be assigned to the appropriate county with a notation “Criminal History Checks to Follow”. As the workload permits, the full results will be made available to the protective investigator through the current online link in the legal electronic system of record (HSn/FSFN).

b. Rechecks.

(1) During an investigation, the child or adult protective investigator can contact the CI Unit for additional participants/subjects or household members that need criminal and delinquency record checks or to complete rechecks where subject demographic information has been updated.

(2) The protective investigator must provide the following: his/her name, Social Security Number (SSN) or UserID for the current legal electronic system of record, district, county, the appropriate intake/report number and provide a call back telephone number. Investigative staff are also required to provide the following demographic information for each individual that is identified as a needing a re-check: first name, last name, DOB or age, race, sex, role in the intake/report and SSN.

(3) The demographic information identified by the requestor will be documented in phoeniX or the current electronic system.

(4) If SSN is not available, approval from a CI Unit supervisor is required prior to completing the check. If no CI Unit supervisor or manager is available, a Point of Contact can approve the check.

(5) Any criminal or delinquency history will be made available to the child or adult protective investigator through the current online link in the legal electronic system of record (HSn/FSFN) as the workload permits or within 3 days from when the request was made.

c. Planned Placements for children.

(1) The CI Unit will complete criminal and delinquency record checks for planned placement requests made by child protective investigators or contracted providers.

(2) The requestor must provide the following: his/her name, SSN or UserID for the current legal electronic system of record, district, county, the agency where the individual works, the appropriate intake/report number or Ongoing services case number and a call back telephone number. The requestor is required to provide the following demographic information for each individual where a potential placement might exist: first name, last name, DOB or age, race, sex, role in the household of the proposed placement and SSN.

(3) The potential placement household member demographic information identified by the requestor will be documented in phoeniX or the current electronic system.
(4) If SSN is not available for a subject, approval from a CI Unit supervisor is required prior to completing the check. If no CI Unit supervisor or manager is available, a Point of Contact can approve the check.

(5) For planned placement requests, the CI Unit will complete FCIC purpose code “Q”, JJIS, Department of Corrections and Sexual Offender/Predator database checks.

(6) Any criminal or delinquency history will be made available to the protective investigator or contracted provider through the current online link in the legal electronic system of record (HSn/FSFN) as the workload permits or within 3 days from when the request was made.

**d. Emergency Placement of Children in Urgent Circumstances.**

(1) The CI Unit will complete criminal and delinquency record checks for emergency placement in urgent circumstances requests made by the child protective investigator or contracted provider.

(2) The requestor must provide the following: his/her name, SSN or UserID for the current legal electronic system of record, district, county, the agency where the individual works, the appropriate intake/report number or Ongoing services case number and a call back telephone number. The following demographic information is required for each individual where a potential placement might exist: first name, last name, DOB, race, sex, role in the household of the proposed placement, and SSN.

The following are the roles:

(a) Proposed caregiver. There can be more than one proposed caregiver.

(b) Household member of proposed caregiver.

(3) The potential placement household member demographic information identified by the requestor will be documented in phoeniX or the current electronic system.

(4) If SSN is not available for a subject, approval from a CI Unit supervisor is required prior to completing the check. If no CI Unit supervisor or manager is available, a Point of Contact can approve the check.

(5) For emergency placement requests, the CI Unit may complete NCIC Purpose Code “X”, FCIC purpose code “Q”, JJIS, Department of Corrections and Sexual Offender/Predator database checks.

(6) When requesting that an emergency placement check be completed, the requestor MUST answer the following 5 questions for the NCIC check:

(a) Is the person being checked a parent (Reunification)?
   If the answer is yes for any person, an NCIC check cannot be completed for that person but the other checks will be completed. This would be considered a release to a parent. While this scenario does not warrant NCIC checks, the request will be taken as a planned placement.

(b) Is the person being checked an unlicensed relative or non-relative with whom an emergency placement is being considered for a child?
   If the answer is no, the check cannot be completed.

(c) Is the person being checked 18 or older?
If the answer is no for any person, an NCIC check cannot be completed for that person but the other checks will be completed. (d) Is it anticipated that placement will be made within the next 72 hours? (Urgency must be documented in the case notes). If the answer is no, the check cannot be completed as an emergency placement but can be completed as a planned placement check. (e) Does the requestor understand that if placement is made, fingerprints of the person being checked through NCIC need to be submitted to FDLE the next business day? If the answer is no, the check cannot be completed. (7) Specific instructions regarding parents:

(a) When a child is released to a parent, we can not conduct an NCIC record check on the parent. All other record checks still apply.

(b) Whenever placement is with a caregiver who is the parent of one, but not all of the children being placed, NCIC record checks apply.

(c) When parent(s) reside in the placement residence, all household members except for the parents are subject to all record checks. The parents are subject to all record checks except for NCIC.

(8) The CI Unit will query FCIC using purpose code “Q” and will complete JJIS, DOC and Sexual Offender/Predator checks.

(a) If any criminal history or delinquency records are found in FCIC, JJIS, DOC and Sexual Offender/Predator databases the CI Unit employee will contact the requestor to advise of the results, and will ask if the requestor still intends to make placement with the subject(s).

(b) If placement is still being considered, the CI Unit employee will continue with the NCIC name check.

(c) If placement is no longer being considered, the process is stopped.

(9) The CI Unit will query NCIC using purpose code “X”.

(a) If the request is submitted by a CBC, the CI Unit will use the analysis of National Criminal History Checklist and Score Sheet Matrix (Appendix O).

(b) If criminal history is found in FCIC, JJIS, DOC or Sexual Offender/Predator databases, the CI Unit will make the results available in phoeniX online for one business day from the time the check was completed. If the requestor is a contracted provider, an automatic email will be sent to the FCIC POC for contracted child providers.

(c) If criminal history is found in NCIC, the CI Unit will make the results available in phoeniX online for one business day from the time the check was completed. An automatic email will be sent to the NCIC POC who is Department staff.

(d) The CI Unit will attempt to contact the requestor via telephone.

1. If the requestor is Department staff, the CI Unit will provide both FCIC and NCIC information from the checks.
2. If the requestor is with a contracted provider, the CI Unit will provide FCIC information and inform the requestor that based on the preliminary information, no information was found that prohibits placement consideration OR that placement is not recommended. The preliminary letter will be available electronically to the CBC(FCIC) and District(NCIC) point of contact.

e. Planned and Emergency Placement of Adults.

(1) The CI Unit will complete criminal and delinquency record checks for requests made by Adult Protective Services for planned and emergency placements for vulnerable adults.

(2) Requestors must provide the following: his/her name, SSN or UserID for the current legal electronic system of record, district, county, the agency where the individual works, a call back telephone number and appropriate intake/report number.

(3) Requestors are required to provide the following demographic information for each individual where a potential placement might exist: first name, last name, DOB or age, race, sex, role, and SSN.

(4) If SSN is not available for a subject, approval from a CI Unit supervisor is required prior to completing the check. If no CI Unit supervisor or manager is available, a Point of Contact can approve the check.

(5) The potential placement household member demographic information identified by the requestor will be documented in phoeniX.

(6) Any criminal or delinquency history will be made available to the Adult protective services staff through the current online link in the legal electronic system of record (HSn/FSFN) within 3 days from when the request was made.

(7) NCIC checks are not authorized for Adult placement. All other criminal history checks apply.
Appendices

A. Definitions
B. Operating Procedure Receipt
C. Secondary Dissemination Log
D. NCIC Tracking Form
E. NCIC Explanation Form
F. Fingerprint Request Form
G. Livescan Demographic Form
H. Sample Purpose Code X Audit
I. Final Placement Consideration Review Letter
J. Criminal History Reference Sheet
K. Out of Home Care Record Checks Job Aid
L. POC Designation
M. Recheck and Planned Placement Request Form (used by the CI Unit)
N. Emergency Placement Request Form (used by the CI Unit)
O. Analysis of National Criminal History Checklist and Score Sheet Matrix
P. Preliminary Placement Consideration Review Form
Q. Information Access Program System Access Request Form
R. Department of Juvenile Justice System Access Request Form
DEFINITIONS OF TERMS AND ACRONYMS

For the purposes of this operating procedure, the following terms and acronyms shall be understood to mean:

**CJNet** refers to the Florida Criminal Justice Network administered by FDLE. The Department’s access to CJNet is restricted to official state criminal justice purposes only.

**Contracted Provider** refers to an employee of an agency that has been contracted to provide child protective services within a county, district or region. The contract may be between the Department and the Lead Agency or between the Lead Agency and a sub-contracted provider.

**Criminal history information** means information collected by criminal justice agencies on persons, consisting of identifiable descriptions and notations of arrests, detentions, indictments, information, or other formal criminal charges and the dispositions thereof. The term does not include identification information, such as fingerprint records, where the information does not indicate involvement of the person in the criminal justice system.

**Criminal history record** means any non-judicial record maintained by a criminal justice agency containing criminal history information.

**Criminal justice agency** means (as stated in §943.045(10)(e) F.S.):
(1) A Court.
(2) the department
(3) The Department of Juvenile Justice.
(4) The protective investigations component of the Department of Children and Families which investigates the crimes of abuse and neglect.
(5) Any other governmental agency or sub-unit thereof which performs the administration of criminal justice pursuant to a statute or rule of court and which allocates a substantial part of its annual budget to the administration of criminal justice.

**Criminal justice information** means information on individuals collected or disseminated as a result of arrest, detention, or the initiation of a criminal proceeding by criminal justice agencies, including arrest record information, correctional and release information, criminal history record information, conviction record information, identification record information, and wanted person’s record information. The term shall not include statistical or analytical records or reports in which individuals are not identified and from which their identities are not ascertainable. The term shall not include criminal intelligence information or criminal investigative information.

**Criminal Justice Information System** (CJIS) means a system, including the equipment, facilities, procedures, agreements, and organizations thereof, for the collection, processing, preservation, or dissemination of criminal justice information.

**DOC** is the Department of Corrections, which is responsible for individuals and their records while incarcerated, on probation, on parole, and up to the point of release.

**DJJ** is the Department of Juvenile Justice that provides services to delinquent youth and families in need of services.

**Dissemination** means the transmission of information, by any means.
Emergency Placement: For the purposes of this operating procedure, the term is defined for child placements as a placement with an unlicensed relative or non relative that is expected to take place immediately or within 72 hours. For an adult placement, it is a placement with an unlicensed relative or non relative in home caregiver and excludes any licensed facility, or licensed in home provider.

Emergency Placement in Urgent Circumstances with Delayed Fingerprint Submission: Includes the immediate out of home placement for a child under the jurisdiction or supervision of the Department to ensure the safety of the child, other than placement in a licensed shelter, licensed foster care home, licensed facility, or approved adoptive home. Urgency must be documented in the case file indicating that it is anticipated that placement will be made immediately or within 72 hours. If a child is placed, then fingerprints must be submitted the next business day but no later than ten calendar days following the NCIC name check. If it is anticipated that placement will take more than 72 hours, then urgency does not exist; fingerprints should be submitted and the results received for review before placement is made.

Exigent means urgent. Our authority to access NCIC information pursuant to 28CFR901 uses the term exigent.

Expunged record refers to a record that, pursuant to §943.0585 F.S., no longer legally exists since the file and any reference to it is destroyed except for the reference contained in the FCIC database. EXPUNGED RECORDS ARE NOT PUBLIC RECORDS AND REQUIRE SPECIAL HANDLING.

FBI refers to the Federal Bureau of Investigation that investigates and tracks criminal activity for the United States and/or its territories.

FCIC or FCIC II is the Florida Crime Information Center; the division of the Florida Department of Law Enforcement (FDLE) that provides computerized criminal history for the State of Florida only. FCIC is the original system and FCIC II is the new system implemented in 1998. The terms are used interchangeably.

FDLE refers to the Florida Department of Law Enforcement.

Florida Abuse Hotline refers to the statewide resource for reporting allegations of abuse, abandonment, neglect, threatened harm, and exploitation of children and vulnerable adults.

Florida Safe Families Network (FSFN) is the legal electronic system of record that is scheduled to replace HomeSafenet beginning in May of 2007.

Frequent visitor is a term used in child protective services and refers to paramours of any of the adult household members, adult relatives and other individuals who interact with the family in the family’s home on a regular and consistent basis. This does not include babysitters even if they babysit in the home.

HomeSafenet (HSn) is the legal electronic system of record used by the Department to track child and adult intake/reports and investigations and case management for children. HomeSafenet is scheduled to be replaced with Florida Safe Families Network May of 2007.

Hot file is a record from the FCIC database that shows the subject is currently under an active criminal investigation, is wanted, has an outstanding warrant, or is a status offender (e.g. sexual predator/offender, career offender, etc.).

Information Access User means the person certified and/or authorized to access a non-DCF agency system.
Information Access Users System means a system, including the equipment, facilities, procedures, agreements, and organizations thereof, for the accessing, collecting, processing and disseminating of criminal investigative information.

Inspection in camera refers to a hearing or discussions with the judge in the privacy of his chambers (office rooms) or when spectators and those involved in the hearing have been excluded from the courtroom.

Intake: The document/section that will be completed in the Florida Safe Families Network system by staff at the Florida Abuse Hotline to document allegations accepted for investigation. Protective Investigations will investigate the allegations in the intake or respond to the Special Conditions intake. This is also referred to as a report.

JJIS/JJISWeb refers to the Juvenile Justice Information System operated by DJJ that contains juvenile delinquency history and services. Our Department utilizes the web-based version of JJIS through a direct connection to DJJ’s CJNet server, called JJISWeb, to obtain face sheets that contain information regarding delinquency history and services.

Legal electronic system of record refers to the electronic system in which intakes/reports, investigation and case work activities are documented. HomeSafenet (HSn) is the system that is scheduled to be replaced by Florida Safe Families Network (FSFN) beginning in May of 2007.

Local law enforcement refers to the local county and municipal law enforcement agencies (i.e. Sheriff or Police Department).

NCIC is the National Crime Information Center that is run by the Federal Bureau of Investigation (FBI). It provides computerized criminal history for the United States and/or its territories.

Participant is any person who is entered into an intake/report, investigation or ongoing services case. This is also referred to as a subject.

PhoeniX is the electronic system used by the Florida Abuse Hotline to track and maintain requests for criminal history checks and completion of checks. PhoeniX online is accessible through the CI Unit link in the current legal electronic system of record to those with appropriate security. PhoeniX online is where the results of criminal history checks will be viewed and printed. There are also two management reports in phoeniX online.

Placement occurs when a child is removed from a parent or legal guardian or a vulnerable adult is removed from his or her living arrangement and placed with a relative or non-relative (licensed or non-licensed). Release of a child to a parent does not involve a removal, but a change in the child's primary residence (emergency or planned). This is what differentiates a release to a parent from placement with a relative or non-relative.

Point of Contact (POC) is the designated staff person in each district/region/provider site who is responsible for ensuring compliance with policy and procedures regarding access to external agency databases and who serves as the contact person for all issues regarding the handling of criminal history information.

Purpose Code “C” is a code used in the FCIC II system to obtain criminal history records from FCIC and NCIC on individuals involved in an investigation of abuse, abandonment, neglect, threatened harm, or exploitation. FCIC Purpose Code “C” records may contain expunged or sealed information and NCIC contains national information. Criminal history records generated using Purpose Code “C” are for investigative purposes only and may not be shared with other individuals in or outside of the Department.
Purpose Code “Q” is a code used in the FCIC II system to obtain criminal history records on individuals in potential contact with children or vulnerable adults in need of placement. These records do not contain any expunged or sealed information. Criminal history records generated using Purpose Code “Q” may be shared with other individuals in the Department and its contracted providers charged with the responsibility to provide placement services.

Purpose Code “X” is a code used in the FCIC II system to obtain national (NCIC) criminal history records on individuals in potential contact with children in need of emergency placement in urgent circumstances with delayed fingerprint submission. These records do not contain expunged or sealed information. Criminal history records generated using Purpose Code “X” may not be shared with any non-governmental entity including contracted child providers.

Rap sheet is the document detailing the criminal history of an individual.

Receiving Unit is the unit where the Florida Abuse Hotline assigns the intake/report.

Record means any and all documents, writings, computer memory, microfilm, or any other form in which facts are memorialized, irrespective of whether such record is an official record, public record, or admissible record or is merely a copy thereof.

Release to a Parent occurs when a child is released to any parent, regardless of their offending status. Release of a child to a parent does not usually involve a removal, but a change in the child's primary residence (emergency or planned). This is what differentiates a release to a parent from placement with a relative or non-relative.

Re-placement occurs when a child is moved from one out of home placement to another out of home placement.

Report is the section completed in HomeSafenet to document allegations accepted for investigation. This will be referred to as an intake when we begin using the Florida Safe Families Network in May 2007.

Requestor is the person who requests a criminal history or delinquency record check from the Florida Abuse Hotline. The requestor must clearly indicate the purpose of the request (investigation or placement) and must be a person who is legally entitled to view the information. The Information Access user will return the results to the requestor. A clerical person making a request for a caseworker must clearly indicate the caseworker's name (e.g.: John Smith for Jane Jones).

Sealed record is a record that has been sealed by the court, pursuant to §943.059 F.S., and is not available to the general public. It can be opened for inspection by the individual, his/her attorney, a criminal justice agency and, in specific situations, a prospective employer. SEALED RECORDS ARE NOT PUBLIC RECORDS AND REQUIRE SPECIAL HANDLING.

TCN is the Transaction Control Number – a unique number assigned by the Live Scan device when fingerprints are being submitted.

TCR is the Transaction Control Reference – a unique number assigned to a fingerprint processing request by the FBI that references the TCN. The TCR begins with IFCS and is followed by 16 numbers. The TCR must be used when resubmitting fingerprints in order to avoid being billed a second time.
Operating Procedure Receipt

I, ________________________________________________________________, have read the Department of Children and Families Information Access Operating Procedure and agree to be bound by it. I understand that by not following these procedures that I shall be subject to disciplinary action, criminal prosecution, and civil suit.

CFOP 175-94, CRIMINAL HISTORY AND DELINQUENCY CHECKS FOR INVESTIGATIONS, PLACEMENT, AND EMERGENCY PLACEMENTS

Signed: ___________________________ Date: ______________
(Employee)

Supervisor’s Name: ___________________________

Signed: ___________________________ Date: ______________
(Supervisor)

District/Region: _____ Area: _____ Unit: __________
# Secondary Dissemination Log

(both physical and verbal dissemination shall be documented on this log)

<table>
<thead>
<tr>
<th>Date of Dissemination</th>
<th>Requestor/Recipient</th>
<th>Unit or Type (Judge, SAO, CBC, or GAL)</th>
<th>Name of Subject</th>
<th>SID, FDLE# or FBI#</th>
<th>Intake/report or Ongoing services case Number</th>
<th>Purpose Code (Q, C, or X)</th>
<th>Reason for Dissemination</th>
<th>Person Giving the Information or Copy</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

Purpose Code **Q** is for Investigations, Emergency Placement of children, Release to a Parent, or Adult placement with unlicensed in home providers.

FCIC Purpose Code **C** contains Sealed and/or Expunged Information for Investigations Only.

NCIC Purpose Code **C** is for child investigations only

Purpose Code **X** is NCIC Information for Emergency Placement in Urgent Circumstances with Delayed Fingerprint Submission Only

**CBCs can not have access to criminal history information generated using Purpose Code C or X. They can not have access to non-Florida fingerprint results.**

Reason for Dissemination must be completed when criminal history information is given (e.g. Case Transfer to Services).

All criminal history information is confidential and can only be used for the purpose it was generated. Copies are given to a Judge but not read in open court.
Instructions for Completing the Secondary Dissemination Log

All secondary dissemination shall be documented on this log. This includes both physically providing a copy of criminal history and verbally providing information.

1. Date Of Dissemination: Enter the date as mm/dd/yyyy

2. Requestor/Recipient: Enter the name of the person outside of the unit who is receiving a copy of the criminal history.

3. Unit or Type: Enter the recipient's unit if logging an incoming fax. If logging a secondary dissemination, enter the type of recipient: Judge, State Attorney (SAO), or the Community Based Care Agency (CBC) name (e.g. Children’s Home Society, Kid’s Central Incorporated, Devereux, etc).

4. Name of Subject: Enter the name of the person whose criminal history is being disseminated.

5. SID, FDLE # or FBI #: Enter the State Identification Number (SID), the FDLE #, or the FBI #.

6. Intake/report or Ongoing services case Number: Enter the appropriate identification (e.g.: 2007-xxxxxx) that this dissemination pertains to.

7. Purpose Code: Enter the Purpose Code that appears on the criminal history being disseminated (Q, C, or X). Enter all that apply.

8. Reason for Dissemination: Enter why the recipient needs a copy of the criminal history (e.g. Court, Case Transfer, etc.).

9. Person Giving the Information/Copy: Enter the name of the person who is disseminating the criminal history.

NOTE: ALL disseminations outside of the Department MUST be logged and the log maintained for at least four (4) years.
NCIC Tracking Form

<table>
<thead>
<tr>
<th>Date of Check</th>
<th>Name of Participant</th>
<th>DOB</th>
<th>Hit Y/N</th>
<th>Disqualify Y/N</th>
<th>Child Placed Y/N</th>
<th>Date Fingerprinted</th>
<th>Date Fingerprint Sent to FDLE</th>
</tr>
</thead>
<tbody>
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Appendix E to CFOP 175-94

National Crime Information Center (NCIC)

Explanation Form

☐ Child Not Placed  |  ☐ Name Run By Accident
(check one)

A National Crime Information Center (NCIC) name check was performed on the below named individual. No fingerprint card will be submitted because a child was not placed with them or the name check was performed by accident.

Name: _______________________________  DOB: __________________________

☐ FAHIS  |  ☐ HSn  |  ☐ CSA  |  ☐ ASA  |  ☐ ICS Case Number: __________________________

Requested By: _______________________________  Date: __________________________

Dist/Reg: __________________________  City: __________________________

If the name was run by accident:

• Was the error due to user policy/procedure misinterpretation?  ☐ Yes  ☐ No
  If Yes, date user was counseled as to correct policy/procedure: __________________________

• Was the error due to requestor policy/procedure misinterpretation?:  ☐ Yes  ☐ No
  If Yes, date requestor was counseled as to correct policy/procedure: __________________________

• Other (Explain including typos and misspellings): __________________________
  __________________________
  __________________________

Name of Person Completing Form: __________________________________________

Telephone Number: __________________________  SunCom: __________________________

Signature: __________________________  Date: __________________________

Completed forms are to be retained by the District or Region Point of Contact (POC)

NOTE: This form is not to report instances of abuse/misuse. Such instances should be reported to your supervisor immediately for appropriate action.
A fingerprint check is requested from adult persons who have not been licensed and thoroughly screened by the Department of Children and Families. This is to safeguard that a child is not left in the care of someone who may have criminal charges found in Florida Statute 39.0138 or any other charges which may indicate a potential risk to a child.

By signing this form and being fingerprinted, you understand that your criminal history will be checked with the Federal Bureau of Investigation (FBI) and you are certifying that the information below is correct. If fingerprints are not provided to the Department by the next business day, the child may be removed from your care.

PLEASE PRINT

Name: ___________________________  AKA: ___________________________

Nickname/Maiden Name: ___________________________

Date of Birth: _______________  Social Security #: ___________________________

Race: ___________________________  Sex: ___________________________

Signature: ___________________________  Date: ___________________________

FOR COUNSELOR’S USE ONLY

☐ Non-Rush (Fingerprint card attached)  ☐ RUSH (Fingerprint card to follow)

Requestor: ___________________________  Phone: ___________________________  Case ID: ___________________________

Unit: _______________  Date: _______________  Supervisor Signature: ___________________________

Placement Made? ☐ NO  ☐ YES (If YES, Date: _______________)

Date Fingerprint Card Given to Individual: _______________

FOR DISTRICT/REGION POINT OF CONTACT USE ONLY

Date Fingerprint Card Returned to DCF or Live Scan Prints Taken: ___________________________

Date Fingerprint Card Sent to FDLE or Live Scan Prints Transmitted: ___________________________

Date Results Received from FDLE: ___________________________  FBI: ___________________________

ID Verified?  ☐ No Additional Record – Placement May be Made/Continued.
              ☐ NO (If NO, Date Placement Notified: ___________________________)  ☐ Record Under Other ID (e.g.: Maiden Name): ___________________________

Child Removed Due To Fingerprints NOT submitted within 10 Calendar Days of NCIC Check? ☐ YES  ☐ NO

1317 Winewood Boulevard, Tallahassee, Florida 32399-0700

The Department of Children and Families is committed to working in partnership with local communities to ensure safety, well-being and self-sufficiency for the people we serve.
Transaction Information

☐ Emergency Placement
In Urgent Circumstances
With a Relative or Non-Relative
And with an NCIC Name Check
(FL9xxxx4Z)

☐ Non-Emergency Placement
With a Relative or Non-Relative
And no NCIC Name Check
(FL9xxxx3Z)

If resubmitting, TCR Number: _______________________________ (Begins with IFCS followed by 16 numbers)

Personal Information (PLEASE PRINT)

Name: ____________________________________________________________ (Last Name, First Name, Middle Initial, Suffix (e.g. Jr, III, etc.))

Maiden Name/Nickname/Alias: ____________________________________________

SSN: __________________ DOB: ___________________ POB: __________________
(e.g. 999876543) (YYYYMMDD) (State of Birth)

Country of Citizenship: __________________________________________

Residence Address: _____________________________________________________

Employer Name and Address: ______________________________________________

Physical Description (please check ONE in each category or complete as indicated)

Gender: ☐ Female | ☐ Male

Race: ☐ Asian | ☐ Black | ☐ Native American | ☐ White | ☐ Unknown

Color of Eyes: ☐ Black | ☐ Blue | ☐ Brown | ☐ Green | ☐ Gray | ☐ Hazel
☐ Maroon | ☐ MultiColor | ☐ Pink | ☐ Unknown

Hair Color: ☐ Bald | ☐ Black | ☐ Blonde or Strawberry | ☐ Blue | ☐ Brown
☐ Green | ☐ Gray or Partially Gray | ☐ Orange | ☐ Purple | ☐ Pink
☐ Red or Auburn | ☐ Sandy | ☐ White | ☐ Unknown

Height: _________ Weight: _________
(e.g. 603) (e.g. 190)

Signature: ___________________________ Date: ___________________________
Sample Purpose Code X audit

This would be sent by the Florida Abuse Hotline to the POC

<table>
<thead>
<tr>
<th>District</th>
<th>Date</th>
<th>Attention</th>
<th>Name</th>
<th>DOB</th>
<th>Explain</th>
<th>Remarks</th>
<th>Role</th>
</tr>
</thead>
<tbody>
<tr>
<td>D02</td>
<td>08/11/06</td>
<td>DCF/02/J Doe/06 123456</td>
<td>Smith, Jane</td>
<td>01/01/1960</td>
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<td>D02</td>
<td>08/05/06</td>
<td>DCF/02/B Brown/06 987654</td>
<td>Green, Gary</td>
<td>2/14/1954</td>
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<td>D02</td>
<td>08/05/06</td>
<td>DCF/02/B Brown/06 987654</td>
<td>Green, Marjorie</td>
<td>2/14/1958</td>
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<td>D02</td>
<td>08/05/06</td>
<td>DCF/02/B Brown/06 987654</td>
<td>Green, Sven</td>
<td>2/14/1978</td>
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<td>DCF/02/J Doe/06 124567</td>
<td>Smythe, Jane</td>
<td>01/01/1960</td>
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<td>D02</td>
<td>08/07/06</td>
<td>DCF/02/B Brown/06 125678</td>
<td>Campbell, Marquita</td>
<td>3/1/1963</td>
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<td>D02</td>
<td>8/15/06</td>
<td>CBC/02/P Shaw/ 555887643</td>
<td>Scott, Tiffany</td>
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<td>White, Brandy</td>
<td>10/25/1970</td>
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<td>CBC/02/M Jones/7624368</td>
<td>Gomez, Alfredo</td>
<td>11/20/1988</td>
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<td>CBC/02/M Jones/7624368</td>
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<td>8/26/06</td>
<td>CBC/02/M Jones/06 124668</td>
<td>Baker, Luann</td>
<td>7/4/1980</td>
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<td>D02</td>
<td>8/30/06</td>
<td>DCF/02/ B Brown/06 126580</td>
<td>Haley, Terri</td>
<td>12/26/1963</td>
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<tr>
<td>D02</td>
<td>8/15/06</td>
<td>DCF/02/J Doe/06 127560</td>
<td>Sailor, Ken</td>
<td>4/12/1976</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
This would be completed by the POC and returned to the Florida Abuse Hotline

<table>
<thead>
<tr>
<th>District</th>
<th>Date</th>
<th>Attention</th>
<th>Name</th>
<th>DOB</th>
<th>Explain</th>
<th>Remarks</th>
<th>Role</th>
</tr>
</thead>
<tbody>
<tr>
<td>D02</td>
<td>08/06/06</td>
<td>DCF/02/J Doe/06 123456</td>
<td>Smith, Jane</td>
<td>01/01/1960</td>
<td>AKA: (use only if the duplicate name is on this audit - enter main name in Remarks)</td>
<td>Actual name is Jane Smythe</td>
<td>Proposed caregiver</td>
</tr>
<tr>
<td>D02</td>
<td>08/05/06</td>
<td>DCF/02/B Brown/06 987654</td>
<td>Green, Gary</td>
<td>2/14/1954</td>
<td>Child Not Placed</td>
<td></td>
<td>Proposed caregiver</td>
</tr>
<tr>
<td>D02</td>
<td>08/05/06</td>
<td>DCF/02/B Brown/06 987654</td>
<td>Green, Marjorie</td>
<td>2/14/1958</td>
<td>Child Not Placed</td>
<td></td>
<td>Proposed caregiver</td>
</tr>
<tr>
<td>D02</td>
<td>08/05/06</td>
<td>DCF/02/B Brown/06 987654</td>
<td>Green, Sven</td>
<td>2/14/1978</td>
<td>Ran in error - this is a parent (enter corrective action in Remarks)</td>
<td>Father of child. PI informed not to run NCIC on biological parents.</td>
<td>Proposed caregiver</td>
</tr>
<tr>
<td>D02</td>
<td>08/09/06</td>
<td>DCF/02/J Doe/06 123456</td>
<td>Smythe, Jane</td>
<td>01/01/1960</td>
<td>Child Placed - Fingerprints Submitted on time (enter date fingerprints were submitted and TCN number in Remarks)</td>
<td>Fingerprints submitted on 8/14/06. TCN XXXXX.</td>
<td>Proposed caregiver</td>
</tr>
<tr>
<td>D02</td>
<td>08/07/06</td>
<td>DCF/02/B Brown/06 125678</td>
<td>Campbell, Marquita</td>
<td>3/1/1963</td>
<td>Child Placed and subsequently moved to another setting (enter date child was moved and, if child was in placement for more than 10 calendar days, explain why fingerprints were not submitted and corrective action in Remarks).</td>
<td>Moved 8/10/06</td>
<td>Proposed caregiver</td>
</tr>
<tr>
<td>D02</td>
<td>8/15/06</td>
<td>CBC/02/P Shaw/555887643</td>
<td>Scott, Tiffany</td>
<td>1/19/1950</td>
<td>Child Placed - Fingerprinted Late (enter date fingerprints were submitted, the TCN number, an explanation for not submitting within 10 calendar days,</td>
<td>Fingerprints were submitted on 10/18/06. TCN XXXXX. Notified Supervisor who counseled worker that prints must be submitted within</td>
<td>Proposed caregiver</td>
</tr>
<tr>
<td>Date</td>
<td>Case Number</td>
<td>Name</td>
<td>Date of Birth</td>
<td>Reason for Action</td>
<td>Description of Action</td>
<td>Remarks</td>
<td></td>
</tr>
<tr>
<td>------------</td>
<td>-------------------</td>
<td>---------------</td>
<td>---------------</td>
<td>-------------------</td>
<td>-----------------------</td>
<td>---------</td>
<td></td>
</tr>
<tr>
<td>8/20/06</td>
<td>DCF/02/J Doe/06</td>
<td>White, Brandy</td>
<td>10/25/1970</td>
<td>Ran in error</td>
<td>Investigation (enter corrective action in Remarks)</td>
<td>Informed PI NCIC is for placement situations only</td>
<td></td>
</tr>
<tr>
<td>8/14/06</td>
<td>CBC/02/M Jones/7624368</td>
<td>Gomez, Alfredo</td>
<td>11/20/1988</td>
<td>Ran in error</td>
<td>This is a minor in the home (enter corrective action in Remarks)</td>
<td>Hotline staff were told this person was under 18. Hotline supervisor informed and counseled staff.</td>
<td></td>
</tr>
<tr>
<td>8/14/06</td>
<td>CBC/02/M Jones/7624368</td>
<td>Garcia, Alberta</td>
<td>6/12/1966</td>
<td>Subject moved out</td>
<td>of household</td>
<td>Household member of proposed caregiver</td>
<td></td>
</tr>
<tr>
<td>8/26/06</td>
<td>CBC/02/M Jones/06 124668</td>
<td>Baker, Luann</td>
<td>7/4/1980</td>
<td>Court ordered</td>
<td>Child released to parent before relative fingerprints could be obtained</td>
<td>Proposed caregiver</td>
<td></td>
</tr>
<tr>
<td>8/30/06</td>
<td>DCF/02/B Brown/06 126580</td>
<td>Haley, Terri</td>
<td>12/26/1963</td>
<td>Subject refused</td>
<td>to be Fingerprinted (enter date Court was advised and what was ordered in Remarks)</td>
<td>9/7/06 Judge ordered fingerprinting which was completed 9/8/06 TCN XXXXX-</td>
<td></td>
</tr>
<tr>
<td>8/15/06</td>
<td>DCF/02/J Doe/06 127560</td>
<td>Sailor, Ken</td>
<td>4/12/1976</td>
<td>Child Placed</td>
<td>Fingerprints submitted on time (enter date fingerprints were submitted and TCN number in Remarks)</td>
<td>Printed 8/17/06 under James Sailor. TCN XXXXX</td>
<td></td>
</tr>
<tr>
<td>8/15/06</td>
<td>CBC/02/T Turner/555887643</td>
<td>Scott, Tiffany</td>
<td>1/19/1950</td>
<td>Duplicate</td>
<td>Transmission</td>
<td>One staff was assisting another and didn’t realize they had already requested the check.</td>
<td>Proposed caregiver</td>
</tr>
</tbody>
</table>
SAMPLE FINAL PLACEMENT CONSIDERATION REVIEW LETTER

June 1, 2005

Pauline Provider  
Take Care Community Based Care  
987 Take Care Lane  
Anytown, Florida 32399-0700

The Department has completed a final review of the information you and the prospective caregiver provided as part of the homestudy to place a child with the person listed below.

_____ The Department's review found no information that prohibits placement consideration.

_____ The Department does NOT recommend placement.

Please remember that this letter is not approval of a placement. The Community Based Care provider is responsible for conducting the homestudy and evaluating all factors regarding the safety of the child including, but not limited to, Florida public criminal history as well as local law enforcement and other systems checks available to them.

If you have any questions, please contact Susan Socialworker at (850) 555-1234 to discuss this matter further.

Thank you,

Susan Socialworker

cc: Rachel Relative, 123 Main Street, Anytown, FL 32399-0700
Criminal History Reference Sheet

Child Welfare Job Aid

I. **FCIC Placement Criminal History Record**

*Purpose Code:* ‘Q’
*Viewable by:* All DCF, Child Welfare Legal Services (CWLS), Private Providers, Guardians Ad-Litem (GALs), State Attorney, and the Court.
*Remove when:* File to be reviewed by anyone outside DCF or before copying.
*File:* Ok to be in file, does not have to be in envelope.
*Record Contains:* Florida arrests information (NO sealed or expunged).
*PDS:* A copy of this criminal history record may be attached to a PDS. This information can be summarized in HomeSafenet (HSn) or other documents.
*Dissemination:* A copy may be given to CWLS, States Attorney, and private providers. A copy must be given to Court. FCIC information generated via our direct access can not be used for licensing, employment, or adoptions.
*Discovery:* This information is released through discovery.

II. **FCIC Investigation Criminal History Record**

*Purpose Code:* ‘C’
*Viewable by:* DCF Protective Investigators, CWLS, State Attorney, and the Court.
*Not Viewable by:* Services Units, Private Providers or GALs.
*Remove when:* Before viewing by anyone outside DCF, before copying, or before being sent to a Services Unit or a Private Provider.
*File:* Must be in envelope, properly stamped, in file.
*Record Contains:* Florida arrest information including SEALED & EXPUNGED info.
*PDS:* Do not attach or mention (must be presented to Judge in an envelope).
*Dissemination:* Sealed & Expunged Records are CONFIDENTIAL & CANNOT leave the Criminal Justice Sector. You are prohibited from disseminating this info either verbally or in writing. Info cannot be noted in the case file, HSn, PDS, or in Court Testimony. A copy may be given to CWLS and the State Attorney. A copy must be given to the Court in a stamped envelope. FCIC information generated via our direct access can not be used for licensing, employment, or adoptions.
*Discovery:* This information is not released through discovery. It can only be released by Court Order.

---

**Florida law prohibits disclosing FCIC or NCIC information to any individual including the subject.**

**Hot File Information OK to be in file and to disseminate per Purpose Code ‘Q’ provisions.**

**REMEMBER:** Any dissemination outside of the receiving entity must be logged on the secondary dissemination form. Dissemination includes both physical and verbal.
### III. NCIC Placement Criminal History Record

**Purpose Code:** ‘X’

**Viewable by:** DCF Protective Investigators, CWLS, GALs, State Attorney, and the Court.

**Not Viewable by:** Private Providers.

**Remove when:** File to be viewed by anyone outside DCF, before copying, or being passed on to a Private Provider.

**File:** Must be kept in a properly stamped envelope at all times.

**Record Contains:** National arrest information—NO Sealed or Expunged.

**PDS:** Do not attach or mention (must be presented to Judge in an envelope).

**Dissemination:** You are prohibited from disseminating this info either verbally or in writing. Info cannot be noted in the case file, HSn, PDS, or in Court Testimony. A copy may be given to CWLS and the State Attorney. A copy must be given to the Court in a stamped envelope. NCIC information is considered preliminary information and can not be shared with or used for licensing, employment, or adoption purposes. Only through fingerprints can a positive identification be made to verify a criminal record or lack thereof.

**Discovery:** This information is not released through discovery. It can only be released by Court Order.

### IV. Fingerprint Results

**Purpose Code:** N/A

**Viewable by:** DCF Protective Investigators, CWLS, GALs, State Attorney, and the Court.

**Not Viewable by:** Private Providers.

**Remove when:** File to be viewed by anyone outside DCF, before copying, or being passed on to a Private Provider.

**File:** Must be kept in a properly stamped envelope at all times.

**Record Contains:** National arrest information—NO Sealed or Expunged.

**PDS:** Do not attach or mention (must be presented to Judge in an envelope).

**Dissemination:** You are prohibited from disseminating this info either verbally or in writing. Info cannot be noted in the case file, HSn, PDS, or in Court Testimony. A copy may be given to CWLS and the State Attorney. A copy must be given to the Court in a stamped envelope. Fingerprint results for relative and non-relative caregivers can be used by background screening for licensing or adoption purposes provided the results include all the necessary information for that level of screening, fingerprints were obtained within the last year, and there has not been a break in service of 90 days or more.

**Discovery:** This information is not released through discovery. It can only be released by Court Order.

---

**REMEMBER:** Any dissemination outside of the receiving entity must be logged on the secondary dissemination form. Dissemination includes both physical and verbal.
Criminal History Reference Sheet

Adult Services Job Aid

I. FCIC Placement Criminal History Record

Purpose Code: ‘Q’. This is used for placement other than in a hospital or licensed facility. It is also used for investigations but contains no sealed or expunged information.

Viewable by: All DCF, Child Welfare Legal Services (CWLS), Private Providers, Guardians Ad-Litem (GALs), State Attorney, and the Court.

Remove when: File to be reviewed by anyone outside DCF or before copying.

File: Ok to be in file, does not have to be in envelope. This information can be summarized in HomeSafenet (HSn) or other documents. FCIC information generated via our direct access can not be used for licensing, employment, or adoptions.

Record Contains: Florida arrests information (NO sealed or expunged).

Discovery: This information is released through discovery.

II. FCIC Investigation Criminal History Record

Purpose Code: ‘C’. This is used for requesting records during an investigation.

Viewable by: DCF Protective Investigators, DLC, CWLS, State Attorney, and the Court.

Not Viewable by: Services Units, Private Providers or GALs.

Remove when: Before viewing by anyone outside DCF, before copying, or before being sent to a Services Unit or a Private Provider.

File: Must be in envelope, properly stamped, in file.

Record Contains: Florida arrest information including SEALED & EXPUNGED info.

Dissemination: Sealed & Expunged Records are CONFIDENTIAL & CANNOT leave the Criminal Justice Sector. You are prohibited from disseminating this info either verbally or in writing. A copy may be given to DLC, CWLS and the State Attorney. A copy must be given to the Court in a stamped envelope. Sealed or expunged criminal information cannot be noted in the case file, HSn, or in Court Testimony; non-sealed and non-expunged criminal history information may be summarized in HSn or other documents. FCIC information generated via our direct access can not be used for licensing, employment, or adoptions.

Discovery: This information is not released through discovery. It can only be released by Court Order.

Florida Law Prohibits the Department from Disclosing FCIC Criminal History Sheets to an Individual, this includes the subject of the screening. If a questionable arrest is found, the API may suggest to an employer there may be a need to re-check an employee’s criminal history; however, the API can not disclose any criminal history information to the employer.

Hot File Information OK to be in file and to disseminate per Purpose Code ‘Q’ provisions.

REMEMBER: Any dissemination outside of the receiving entity must be logged on the secondary dissemination form. Dissemination includes both physical and verbal.
# Out-of-Home Care Record Checks

## Job Aid

<table>
<thead>
<tr>
<th></th>
<th>Release of a child to Parent or Legal Guardian</th>
<th>Child Placement with a Non-licensed Relative or Non-Relative</th>
<th>Adult placement with non-licensed in home provider</th>
<th>Frequent Visitors*</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>NCIC</strong></td>
<td>N</td>
<td>Y If emergency placement in urgent circumstances.</td>
<td>N</td>
<td>N</td>
</tr>
<tr>
<td>National Crime Information Center (National Name Check)</td>
<td>Household members age 18+</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Fingerprint</strong></td>
<td>N</td>
<td>Y In advance if part of a homestudy in non-urgent circumstance or within 10 calendar days if a child is placed subsequent to an NCIC name check.</td>
<td>N</td>
<td>N</td>
</tr>
<tr>
<td>FBI Results (National Fingerprint based Check)</td>
<td>Household members age 18+</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Direct Query to Other State</strong></td>
<td>Y</td>
<td>N</td>
<td>Y</td>
<td>Y</td>
</tr>
<tr>
<td>If made known to the Department that they resided in another state and that state allows for the release of such information</td>
<td>Household members age 18+</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>FCIC</strong></td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
</tr>
<tr>
<td>Florida Crime Information Center (Statewide Check)</td>
<td>Household members age 12+</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Local Law Enforcement</strong></td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
</tr>
<tr>
<td>(Local Check)</td>
<td>Household members age 12+</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>JJIS</strong></td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
</tr>
<tr>
<td>Juvenile Justice Information System</td>
<td>Household members age 12-26</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>HSn/FSFN</strong></td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
</tr>
<tr>
<td>Check of Department systems</td>
<td>All household members</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*If made known to the Department*
District/Region:______________ County/Counties:____________________________

Point of Contact Designation

Program (check all that apply): ___API | ___CPI | ___PS | ___FC | ___CWLS

_____NCIC District Designee

Name:______________________________________________________________

Telephone: SunCom:__________________________________________________

Secure Fax: SunCom:_________________________________________________

Mailing Address:_____________________________________________________

Email:______________________________________________________________

Certification: The POC will receive email notification upon completion of criminal history checks by county and program.

(check one)

_____DCF personnel responsible for the investigation of Intakes/reports and responsible for reviewing and storing national criminal history information.

_____DCF personnel responsible for reviewing and storing national criminal history information.

_____CBC personnel responsible for child placement/release to a parent.

Signature:______________________________ Date:_______________________

Title:______________________________________________________________

Complete a separate form for each Point of Contact using Acrobat Reader (or type), Print for signature and mail or fax to:

Florida Abuse Hotline
1317 Winewood Boulevard
Tallahassee, Florida 32399-0700
Telephone: (850) 487-6100 / SunCom 277-6100
Fax: (850) 488-1319 / SunCom 278-1319
Hotline Recheck and Planned Placement
Criminal History and Delinquency Record Check Request Form

Requestor: __________________________ SSN: __________________________
DISTRICT/REGION: _______ AREA: _______ UNIT: _______ ☐ PI or ☐ CBC
COUNTY: ______________ PROGRAM: ____________ INTAKE/REPORT NUMBER: _______________________
PRIMARY PHONE: _____________________ ALTERNATE CONTACT NUMBER ____________________
DATE OF REQUEST: _______________ TIME: _______________

REASON FOR REQUEST (INDICATE ONE REASON ONLY):
☐ Judicial Review {N/A} ☐ Adoption {N/A} ☐ Visitation {N/A} ☐ Baby-sitter {N/A} ☐ Respite {N/A}
STOP HERE IF ANY OF THE ABOVE BOXES ARE CHECKED!

☐ Investigation/Recheck (PI ONLY) [§943.045(10)(D) F.S.]
☐ Planned Placement [§39.521(2)(R)2. F.S.]
☐ Release to Parent/ Reunification [§39.401(3) F.S.]

IS THIS THE FIRST TIME THAT CRIMINAL HISTORY CHECKS HAVE BEEN REQUESTED ON THESE SUBJECTS? ☐ YES ☐ NO ☐ UNKNOWN
IF YES REASON:
☐ New Subject ☐ New Demographics ☐ New Placement ☐ Failed to Print

1. SUBJECT NAME: __________________________
RACE: ______________________ S EX: __________ DOB: ______________
SOCIAL SECURITY NUMBER: __________________________
ROLE (RECHECKS ONLY): ☐ aggressor child | ☐ alleged perp | ☐ child in home | ☐ parent in home
| ☐ parent not in home | ☐ significant other | ☐ victim

2. SUBJECT NAME: __________________________
RACE: ______________________ S EX: __________ DOB: ______________
SOCIAL SECURITY NUMBER: __________________________
ROLE (RECHECKS ONLY): ☐ aggressor child | ☐ alleged perp | ☐ child in home | ☐ parent in home
| ☐ parent not in home | ☐ significant other | ☐ victim

3. SUBJECT NAME: __________________________
RACE: ______________________ S EX: __________ DOB: ______________
SOCIAL SECURITY NUMBER: __________________________
ROLE (RECHECKS ONLY): ☐ aggressor child | ☐ alleged perp | ☐ child in home | ☐ parent in home
| ☐ parent not in home | ☐ significant other | ☐ victim

NAME OF PERSON ACCEPTING REQUEST __________________________ ID# __________________________
# Hotline Emergency Placement

## Criminal History and Delinquency Record Check Request Form

**Requestor:**

<table>
<thead>
<tr>
<th>SSN:</th>
</tr>
</thead>
</table>

**DISTRICT/REGION:** [Blank]  | **AREA:** [Blank]  | **UNIT:** [Blank]  | [□] PI  | [□] CBC  |

**COUNTY:** [Blank]  | **PROGRAM:** [Blank]  | **INTAKE/REPORT NUMBER:** [Blank]  |

**PHONE:** [Blank]  | **PAGER:** [Blank]  | **CELL:** [Blank]  |

**DATE OF REQUEST:** [Blank]  | **TIME:** [Blank]  | **PURPOSE:** [Blank]  |

### SYSTEM(S) TO BE CHECKED

<table>
<thead>
<tr>
<th>JJIS</th>
<th>FCIC</th>
<th>DC</th>
<th>NCIC (SEE NOTE AT BOTTOM OF PAGE)</th>
</tr>
</thead>
</table>

| [□] | [□] | [□] | 1. SUBJECT NAME: [Blank]  | **NO RECORD** |

| RACE: [Blank]  | **SEX:** [Blank]  | **DOB:** [Blank]  | **RECORD** |

| SOCIAL SECURITY NUMBER: [Blank]  | **ATTACHED** |

**IS THIS PERSON THE PARENT OF ALL CHILDREN BEING PLACED IN THE HOUSEHOLD?**  
[□] Yes  | [□] No  

**ROLE:**  
**PROPOSED CAREGIVER**  | [□] OR  
**HOUSEHOLD MEMBER OF CAREGIVER**  | [□]  

| [□] | [□] | [□] | 2. SUBJECT NAME: [Blank]  | **NO RECORD** |

| RACE: [Blank]  | **SEX:** [Blank]  | **DOB:** [Blank]  | **RECORD** |

| SOCIAL SECURITY NUMBER: [Blank]  | **ATTACHED** |

**IS THIS PERSON THE PARENT OF ALL CHILDREN BEING PLACED IN THE HOUSEHOLD?**  
[□] Yes  | [□] No  

**ROLE:**  
**PROPOSED CAREGIVER**  | [□] OR  
**HOUSEHOLD MEMBER OF CAREGIVER**  | [□]  

**NAME OF PERSON RECEIVING REQUEST:** [Blank]  | **ID #:** [Blank]  

**NAME OF PERSON PROCESSING REQUEST:** [Blank]  | **ID #:** [Blank]  

---

**NCIC CAN ONLY BE CHECKED FOR EMERGENCY PLACEMENT OF A CHILD IN EXIGENT CIRCUMSTANCES WITH A FINGERPRINT CARD TO FOLLOW. THE RESPONSE IN **Bold** MUST BE MARKED FOR ALL QUESTIONS IN ORDER TO COMPLETE AN NCIC CHECK:**

- Is the child being released to a parent?* If yes then proceed to planned placement form.  
  [□] Yes  | [□] No  

- Is the person being checked licensed as a caregiver by the Department of Children and Families?  
  [□] Yes  | [□] No  

- Do urgent circumstances exist? (Requestor must document circumstances in chronos)  
  [□] Yes  | [□] No  

- Is it anticipated that placement will be made within the next 72 hours?  
  [□] Yes  | [□] No  

- Is the person being checked through NCIC age 18 or older?  
  [□] Yes  | [□] No  

- Does the requestor understand that if placement is made fingerprints of the person being checked through NCIC need to be submitted to FDLE the next business day?  
  [□] Yes  | [□] No  

---

*If the child is being released to a parent, then parents and their household members are not subject to fingerprinting or NCIC; and release to parent is not considered an emergency placement.

- If placement is being made with another household member with whom a parent resides, then the household members are subject to fingerprinting and NCIC checks, but not the parent.

---

09/23/2005

Appendix N to CFOP 175-94
When a national criminal record exists, the Abuse Hotline will issue a statement that placement should not be made when a criminal history record reveals that an individual has a conviction for any crime listed in §39.0138 Florida Statutes including, but not limited to:

Child abuse, abandonment or neglect; Spousal abuse; A crime against children, including child pornography; A crime involving violence, including rape, sexual assault, or homicide, BUT not including other physical assault or battery, if the Department finds that the crime was committed at ANY time.

OR

Physical assault; Battery; or a Drug-related offense, if the Department finds that a court of competent jurisdiction has determined that the crime was committed within the past 5 years.

If placement is not precluded by convictions covered on the Automatic Disqualifiers Checklist, then a statement indicating that placement should not be made will be issued if the subject receives a score of 15 or more points using the following point matrix for any other charges:

<table>
<thead>
<tr>
<th>Arrest</th>
<th>Conviction</th>
</tr>
</thead>
<tbody>
<tr>
<td>F1 Felony – 1st Degree</td>
<td>6</td>
</tr>
<tr>
<td>F2 Felony – 2nd Degree</td>
<td>5</td>
</tr>
<tr>
<td>F3 Felony – 3rd Degree</td>
<td>4</td>
</tr>
<tr>
<td>M1 Misdemeanor – 1st Degree</td>
<td>3</td>
</tr>
<tr>
<td>M2 Misdemeanor – 2nd Degree</td>
<td>2</td>
</tr>
<tr>
<td>M3 Misdemeanor – 3rd Degree</td>
<td>1</td>
</tr>
</tbody>
</table>

NOTE: Points are awarded based on the best-fit corresponding crime in Florida. If the crime does not exist in Florida (i.e. “Blue Laws” in other states such as “It is illegal to sell beer on Sunday”), then treat as indicated by the other state or, if no indication, award M3 points.

Conviction includes any result other than Innocent, Not Guilty, Nolle Prosequi or Null Pros (Not Prosecuted). Pleas of Nolo Contendere or No Contest are treated as guilty for the purposes of scoring the subject’s record. If there is no indication of the verdict, the charge will be counted as guilty.

Upon receipt of the name check the district may staff the Abuse Hotline findings and reconsider placement. If placement is made, then fingerprints must be submitted to FDLE within ten calendar days of the date of the name check.

The total points for each charge will be weighted based on how recent the arrest or conviction occurred as follows:

<table>
<thead>
<tr>
<th>Years since incident</th>
<th>Weight</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 – 5</td>
<td>1.0</td>
</tr>
<tr>
<td>6 – 10</td>
<td>.75</td>
</tr>
<tr>
<td>11 – 15</td>
<td>.5</td>
</tr>
<tr>
<td>16 – 20</td>
<td>.25</td>
</tr>
<tr>
<td>21+</td>
<td>Not Counted</td>
</tr>
</tbody>
</table>
Subject Name: ____________________________________________________________

Case Number: ____________________________ County: _______________________

The subject is not eligible for placement consideration if he/she has been found guilty or entered a plea of guilty or nolo contendere (no contest), regardless of the adjudication, to any of the following charges under the provisions of the Florida Statutes or under any similar statute of another jurisdiction.

§39.0138 Florida Statutes:
☐ A crime relating to child abuse, abandonment or neglect
☐ A crime relating to spousal abuse
☐ A crime against children, including child pornography
☐ A crime involving violence, including rape, sexual assault, or homicide
☐ A crime relating to physical assault (within the last five years)
☐ A crime relating to battery (within the last five years)
☐ A crime relating to drugs (within the last five years)

§435.04 Florida Statutes
☐ A crime relating to sexual misconduct with certain developmentally disabled clients and reporting of such sexual misconduct
☐ A crime relating to sexual misconduct with certain mental health patients and reporting of such sexual misconduct
☐ A crime relating to adult abuse, neglect, or exploitation of aged persons or disabled adults
☐ A crime relating to murder
☐ A crime relating to manslaughter, aggravated manslaughter of an elderly person or disabled adult, or aggravated manslaughter of a child
☐ A crime relating to vehicular homicide
☐ A crime relating to killing of an unborn child by injury to the mother
☐ A crime relating to assault, if the victim of the offense was a minor
☐ A crime relating to aggravated assault
☐ A crime relating to battery, if the victim of the offense was a minor
☐ A crime relating to aggravated battery
☐ A crime relating to battery on a detention or commitment facility staff
☐ A crime relating to kidnapping
☐ A crime relating to false imprisonment
☐ A crime relating to taking, enticing, or removing a child beyond the state limits with criminal intent pending custody proceedings
☐ A crime relating to carrying a child beyond the state lines with criminal intent to avoid producing a child at a custody hearing or delivering the child to the designated person
☐ A crime relating to exhibiting firearms or weapons within 1,000 feet of a school
☐ A crime relating to possessing an electric weapon or device, destructive device, or other weapon on school property

This document is confidential pursuant to state and federal law. It must not be disseminated beyond the confines of governmental personnel responsible for child placement and the court. Any wrongful dissemination will subject the parties to administrative and criminal penalties.

Appendix O to CFOP 175-94
<table>
<thead>
<tr>
<th>Crime</th>
<th>Automatic Disqualifiers Checklist</th>
</tr>
</thead>
<tbody>
<tr>
<td>A crime relating to sexual battery</td>
<td></td>
</tr>
<tr>
<td>A crime relating to prohibited acts of persons in familial or custodial authority</td>
<td></td>
</tr>
<tr>
<td>A crime relating to prostitution</td>
<td></td>
</tr>
<tr>
<td>A crime relating to lewd and lascivious behavior</td>
<td></td>
</tr>
<tr>
<td>A crime relating to lewdness and indecent exposure</td>
<td></td>
</tr>
<tr>
<td>A crime relating to arson</td>
<td></td>
</tr>
<tr>
<td>A crime relating to theft, robbery, and related crimes, if the offense is a felony</td>
<td></td>
</tr>
<tr>
<td>A crime relating to fraudulent sale of controlled substances, only if the offense was a felony</td>
<td></td>
</tr>
<tr>
<td>A crime relating to abuse, aggravated abuse, or neglect of an elderly person or disabled adult</td>
<td></td>
</tr>
<tr>
<td>A crime relating to lewd or lascivious offenses committed upon or in the presence of an elderly person or disabled adult</td>
<td></td>
</tr>
<tr>
<td>A crime relating to exploitation of an elderly person or disabled adult, if the offense was a felony</td>
<td></td>
</tr>
<tr>
<td>A crime relating to incest</td>
<td></td>
</tr>
<tr>
<td>A crime relating to child abuse, aggravated child abuse, or neglect of a child</td>
<td></td>
</tr>
<tr>
<td>A crime relating to contributing to the delinquency or dependency of a child</td>
<td></td>
</tr>
<tr>
<td>A crime relating to negligent treatment of children</td>
<td></td>
</tr>
<tr>
<td>A crime relating to sexual performance by a child</td>
<td></td>
</tr>
</tbody>
</table>

Crime Intelligence Analyst Name: _____________________________ Extension: _____________

Date: ____________
Instructions for completing the Score Sheet

**NOTE:** The Score Sheet must be completed in Excel. The yellow areas automatically calculate based on the Date, Arrest Degree, and Conviction Degree.

1. Complete the Subject Name, County, and Intake/Report/Case Number.

2. List each arrest.

3. Insert the date of conviction (or arrest if conviction date is not known).

4. Enter the degree for each charge and conviction. Points will automatically be assessed per the following chart:

<table>
<thead>
<tr>
<th>Degree</th>
<th>F1</th>
<th>F2</th>
<th>F3</th>
<th>M1</th>
<th>M2</th>
<th>M3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Arrest Points</td>
<td>6</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Conviction Points</td>
<td>12</td>
<td>10</td>
<td>8</td>
<td>6</td>
<td>4</td>
<td>2</td>
</tr>
</tbody>
</table>

- If the conviction is Innocent, Not Guilty, or similar enter NG.
- If the conviction is Nolle Prosequi, Null Pros, Not Prosecuted, or similar enter NP.

5. The Excel spreadsheet will automatically calculate the weight for the charge based on the number of years since the incident. Points will be weighted per the following chart:

<table>
<thead>
<tr>
<th>Years since incident</th>
<th>Weight</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 – 5</td>
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<td>.25</td>
</tr>
<tr>
<td>21+</td>
<td>Not Counted</td>
</tr>
</tbody>
</table>

6a. If the Weighted Total Points TOTAL is 15 or higher, then check “Placement is NOT recommended at this time” on the Preliminary Placement Consideration Review.

6b. If the Weighted Total Points TOTAL is 1-14, then on the Preliminary Placement Consideration Review:
   - If any charges are of a violent nature or against a child, check “Placement is NOT recommended at this time”.
   - If the charges do not appear to present a danger to child safety, then check “Placement may be considered”; a supervisor must review and sign-off prior to communicating the response if this option is selected.

**NOTE:** If the subject has ever been arrested for: Child abuse, abandonment or neglect; Spousal abuse; A crime against children, including child pornography; A crime involving violence, including rape, sexual assault, or homicide, BUT not including other physical assault or battery, "Placement NOT recommended at this time" must be checked. Once the Weighted Total Points TOTAL reaches 15, no further analysis is necessary.

8. Insert your name and extension. The date and time will automatically be inserted when the document is printed.

9. If “Placement may be considered” is checked, obtain supervisory approval.

District/Region: __________  County: __________  Case Number: ________________
Case Worker: ___________________________  Phone: ________________________

Preliminary Placement Consideration Review
Based on Demographic Information

Subject Name: ___________________________  SSN: __________________________
Race: ______________  Sex: ___________  Date of Birth: ________________

Based on a preliminary review of the demographic information above:

_____ The Department's review found no information that prohibits placement consideration.

_____ The Department does NOT recommend placement.

_____ The Department does NOT recommend placement at this time. The placement may be reconsidered upon review and/or staffing by the district or region.

_____ The Department requires additional information to determine the appropriateness of this placement. Please provide any missing demographic information.

Please remember that this letter is not approval of a placement. The Community Based Care provider is responsible for conducting the homestudy and evaluating all factors regarding the safety of the child including, but not limited to, Florida public criminal history as well as local law enforcement and other systems checks available to them.

The Crime Intelligence Unit at the Florida Abuse Hotline performs criminal history and delinquency record checks on behalf of districts and regions. If a child is placed in a non-licensed setting, it is the case workers responsibility to ensure that fingerprints are submitted within ten calendar days of an NCIC name check.

Upon receipt and review of the fingerprint results and any additional information that is made available, the district will re-review all information regarding the above named individual and issue a final placement consideration letter.

Please be reminded that should an individual wish to become licensed or be considered for adoptive home approval, a separate screening process is required. An individual may have a child placed with them as a non-licensed caregiver, but may also be denied a license or adoptive home approval.
Instructions for completing the Preliminary Placement Consideration Review:

1. If the individual is disqualified based on the Automatic Disqualifiers Checklist, then the CIU will check:
   _____ The Department does NOT recommend placement.

2. Based on the individual Score Sheet TOTAL, check the appropriate response:
   _____ The Department does NOT recommend placement at this time. The placement may be reconsidered upon review and/or staffing by the district or region.
   OR
   _____ The Department's review found no information that prohibits placement consideration.

3. If there is insufficient information to make a determination regarding an individual’s criminal history (i.e. too many matches, missing disposition information, etc.), then the CIU will check:
   _____ The Department requires additional information to determine the appropriateness of this placement. Please have the individual contact the worker named above.

4. Upon completion of the Preliminary Placement Consideration Review, contact the CBC requestor and verbally relate the response EXACTLY AS CHECKED ON THE FORM. The existence or non-existence of national criminal history can not be discussed with a CBC employee.

5a. Send the Preliminary Placement Consideration Review to the CBC.

5b. Send the Checklist and/or Score Sheet to the DCF NCIC Point of Contact for the CBC along with the NCIC results.
INFORMATION ACCESS PROGRAM
System Access Request Form
(Please print or type)

User Name: First: ___________________________ MI: ______ Last: ___________________________
District/Region: _____ Area: _____ Unit: _______ Social Security Number: _______________________
Position/Title: ____________________________________________________________
Agency/Address: ____________________________________________________________

Work Telephone: (____) ___________________________ SunCom: _______________________
Work Facsimile: (____) ___________________________ SunCom: _______________________
Program Component: ☐ Investigations ☐ Protective Supervision ☐ Foster Care ☐ Adoptions ☐ Other
Describe Other: ______________________________________________________________________
System(s) to be Accessed: ☐ JJIS / CJNet ☐ FCIC / NCIC ☐ Other
Describe Other: ______________________________________________________________________
(Date) (Date)

CERTIFICATION

I understand that children’s records and related client specific information are confidential under Florida law and can only be released to such individuals and for such purposes as the law allows. I have been provided access to and shall comply with the confidentiality requirements contained in the law, particularly Chapter 39 (39.0132 F.S., 39.202 F.S., and 39.908 F.S.) and Chapter 63 (63.162 F.S.). I have been provided a copy of and have read the Confidentiality of Children and Families Records operating procedure (HRSOP 175-26) and understand that I am bound by it. I have read the Security operating procedure (CFOP 50-6), Chapter 815 of the Florida Statutes, and have signed the Security Agreement Form (CF 114) as well.

Information obtained from agencies outside the Department of Children and Families may be both confidential and privileged; therefore I agree to only share such information as authorized by the agency that provided the information.

Assurance is hereby given that the confidentiality of the records made available to me will be maintained in accordance with Florida Statutes and Department administrative rules and that I will not further release the information from these records to any unauthorized person or for any unauthorized purpose. Further, I understand that I may be subject to disciplinary action, criminal prosecution, and/or liable to civil suit if I violate that confidentiality.

User Signature: ___________________________ Date: ___________________________
Supervisor Signature: ___________________________ Date: ___________________________
Supervisor Name & Title (Print): ________________________________________________

Attachment Q to CFOP 175-94
## User Access Application - Please PRINT Clearly

<table>
<thead>
<tr>
<th>New User</th>
<th>Update Current User</th>
<th>Delete User</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**User’s Last Name**

**First Name**

**Middle Name**

**Social Security Number**

**Sex**

**Date of Birth**

**Department/Agency**

**Business Street Address, City, State, Zip**

**Business Phone Number**

**Business Email Address**

### Department of Juvenile Justice - CJNET Network Access User Agreement

The Department of Juvenile Justice ("the Department") is providing Access to the Criminal Justice Network (CJNET). The user agrees that the following terms and conditions apply to all information contained within the Department’s CJNET:

1. I understand that the purpose of my access to the Department’s CJNET is to perform State of Florida business related functions.
2. I agree I will not use the Department’s CJNET for any personal purposes, including entertainment, personal business or personal gain.
3. I understand that access to, and transmission of, any data or material deemed to be a violation of any federal, state or local law or rule, or the Department’s Policy is prohibited.
4. I understand I cannot access or distribute any information that is deemed confidential pursuant to sections 984.06 and 985.04 of the Florida Statutes without written authority from the Department.
5. I am responsible for safeguarding my access to the Department’s CJNET; and that I will not provide my access capabilities to anyone for any reason, unless authorized by Department policy or otherwise authorized by the Department in writing.
6. I understand that violating the conditions of this CJNET Access User Agreement shall cause the immediate revocation of all access to the Department’s CJNET.
7. I understand and agree that my use of the Department’s CJNET may be monitored or audited by the Department by various means, including monitoring or auditing that may occur without my knowledge or prior notice.

### Acknowledgement - Please PRINT Clearly

I ______________________ on behalf of __________________________

User name, Title Department/Agency

located at ____________________________

Address

acknowledge that I have read, understand and agree to the terms and conditions of the CJNET Access User Agreement outlined above.

**User’s Signature**

**Date**

**Authorized by Name and Title (Please print clearly)**

**Date**

**Authorizing Signature**

**Phone Number**

**Point of Contact (Please print clearly)**

**Phone Number**