LONG-TERM CARE
CRIMINAL HISTORY AND PATIENT ABUSE
BACKGROUND SEARCH PROGRAM

REPORT TO THE GENERAL ASSEMBLY
FEBRUARY 1, 2012

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EXECUTIVE SUMMARY

In September 2010, the Department of Public Health (DPH) was the recipient of a $1.9 million United States Health and Human Services grant award to design a comprehensive background check program for nursing homes and other long-term care providers to strengthen protections for elderly and disabled care recipients.

The grant award was provided to the DPH through Section 6201 of the Patient Protection Affordable Care Act of 2010 (ACA), and is designed to establish state background check programs to help identify whether job applicants possess disqualifying criminal convictions that may make certain job applicants unsuitable to work directly with recipients of long-term care. Under the grant award, the background checks for each prospective direct patient care employee must include a search of both state and federal criminal records, as well as searches of relevant abuse and neglect registries and databases, such as the Nurse Aide Registry and Office of the Inspector General List of Excluded Individuals and Entities.

Public Act 11-242, An Act Concerning Various Revisions to Public Health Related Statutes, Section 90, requires that the DPH develop a plan to create and implement a criminal history and patient abuse background search program in order to facilitate the performance, processing and analysis of such criminal history and patient abuse background searches on prospective employees who may have direct access to residents in long-term care settings.

The DPH has been working closely with its partners at the Department of Emergency Services and Public Protection (DESPP), the Centers for Medicare & Medicaid Services (CMS) and CMS’ technical assistance vendor CNA Analysis & Solutions (CNA) to develop a web-based Applicant Background Check Management System (ABCMS) to provide long-term care entities with a centralized, automated database to process and manage the background checks on prospective direct patient access employees under this program.

In September and December 2011, the DPH held collaborative stakeholder meetings to obtain information on current background check processes utilized by long-term care providers and provide updates on the grant requirements and anticipated features of the ABCMS. In addition, the DPH has been appointed as a member of a CMS Criminal Conviction Workgroup established to provide recommendations for possible federal legislation requiring such background checks on the national level. Moreover, as a result of the dedication that the State of Connecticut has demonstrated to this program, CMS has requested that the DPH serve as a “mentor” state agency to additional states that are awarded grant funds under Section 6201 of the ACA.

The DPH remains committed to this important program to further strengthen protections for Connecticut’s long-term care recipients and to support the requirements of Public Act 11-242.
**BACKGROUND**

In September 2010, the DPH was the recipient of a $1.9 million United States Health and Human Services grant award to design a comprehensive background check program for employees of nursing homes and other long-term care entities to strengthen protections for elderly and disabled residents.

The grant award was provided to the DPH through Section 6201 of the ACA,\(^1\) and is designed to establish state background check programs to help identify whether job applicants possess disqualifying criminal convictions that may make certain job applicants unsuitable to work directly with residents or clients in long-term care settings. The federal grant award currently runs through September 29, 2012. CMS has indicated to grantee states that the grant period may be extended for an addition year. A determination by CMS to extend the grant period would be reached in the final quarter of the current grant schedule (i.e., July through September 2012). Any such extension will not result in additional funding but, rather, allow grant funds to continue to be expended during a third grant year.

The first step for Connecticut in developing a program supported by ACA grant funds was the enactment of enabling legislation.

Accordingly, Public Act 11-242, *An Act Concerning Various Revisions to Public Health Related Statutes*, Section 90, requires that the DPH develop a plan to create and implement a criminal history and patient abuse background search program for long-term care providers in order to facilitate the performance, processing and analysis of criminal history and patient abuse background searches.\(^2\)

In developing such a plan, the DPH held collaborative stakeholder meetings on September 7 and December 7, 2011, to obtain information on the background check processes presently utilized by long-term care providers.\(^3\) The DPH also provided stakeholders with information on the ACA’s grant requirements and various features of the anticipated ABCMS. The DPH and other stakeholders also heard an informative presentation by the Board of Pardons and Paroles concerning the effect of full and provisional pardons on employment in Connecticut.

As set forth more fully below, the DPH envisions a phased-in implementation of the ABCMS by category of long-term care provider referenced in the legislation. It is

\(^1\) Section 6201 of the ACA is attached hereto as Appendix 1.

\(^2\) Public Act 11-242, Sections 90-95, are attached hereto as Appendix 2.

\(^3\) These stakeholder meetings included representatives from the various agencies and organizations referenced in Public Act 11-242, Section 90(b)(2). Stakeholder representatives indicated that long-term care providers currently perform various forms of background checks on prospective direct access employees. Costs for such background checks range from between $8 to $75, depending on the types of checks performed and nature of the position. Current background checks typically do not include a fingerprint-based check of criminal history databases.
envisioned that this program will facilitate automation in obtaining scanned applicant
fingerprints, electronically transmitting fingerprints to the DESPP and Federal Bureau of
Investigations (FBI) and clearing applicants for employment through a web-based
ABCMS database. The DPH, in collaboration with the DESPP, Bureau of Enterprise
Systems & Technology (BEST) and other stakeholders, intends to establish a website
“dashboard” in an effort to facilitate and streamline the background check process under
this program and integrate a variety of applications in one user-friendly location. In
addition, the DPH and DESPP will integrate a “rap-back” feature into the ABCMS
database, whereby DESPP will continually monitor its criminal history records and notify
the DPH and long-term care employer should additional crimes be entered on an
applicant’s criminal record after the initial background check is performed.

The ABCMS database will display prospective employee profiles and import related
background check history from various data sources, thereby enhancing safeguards to
protect the health and welfare of long-term care residents and clients while facilitating
informed hiring decisions.

**OVERVIEW AND STRUCTURE**

**A. Brief Synopsis**

The DPH is establishing a comprehensive background check program for long-term
care facilities and providers pursuant to Public Act 11-242’s mandate that background
checks be conducted on all prospective direct patient/resident or client access
employees. This program shall be referred to as the ABCMS. The ABCMS will expand current background check processes by requiring that long-term care facilities
and providers obtain fingerprint-based criminal history records checks, checks of any
proceedings that may contain disqualifying information such as hearings conducted
by professional licensing and disciplinary boards, and checks of other relevant
national and State-based registries.

The primary goal of the ABCMS will be to protect the vulnerable residents and
clients who reside in and/or receive direct care and services within a long-term care
setting and identify convictions that would disqualify a prospective employee from
working in such a setting – while at the same time avoiding the creation of
unnecessary barriers to applicants obtaining meaningful employment or significantly
reducing the available workforce in Connecticut.

**B. Lead State Agency**

The DPH will be the lead State agency responsible for overseeing the development,
implementation and coordination of Connecticut’s ABCMS for direct patient access
employees of long-term care facilities and providers. In coordination and in
partnership with the DESPP and BEST, the DPH will oversee the design of the
ABCMS including, but not limited to, the implementation of mechanisms to report the results of requested criminal history records checks to prospective employers, and the design of appropriate security safeguards for use in the review of the results of any State or national criminal history records checks conducted on applicants.

C. Categories of Providers Identified In Public Act 11-242

Long-term care facilities and providers presently identified by Public Act 11-242, Section 90, as participating in the ABCMS include:

- Any facility, agency or provider that is a nursing home, as defined in section 19a-521 of the general statutes;
- A home health agency, as defined in section 19a-490 of the general statutes;
- An assisted living services agency, as defined in section 19a-490 of the general statutes;
- An intermediate care facility for the mentally retarded, as defined in 42 USC 1396d(d);
- A chronic disease hospital, as defined in section 19a-550 of the general statutes; or
- An agency providing hospice care which is licensed to provide such care by the DPH or certified to provide such care pursuant to 42 USC 1395x.

D. Employment Agencies

Employment agencies, including temporary agencies, that supply direct patient access staff to long-term care facilities and providers, will be required to comply with the ABCMS’ mandatory background check requirements prior to placing or attempting to place any direct care staff in covered entities under the same rules that will apply to new employees of long-term care facilities and providers.

Employment agencies will need to provide documentation to long-term care facilities and providers to demonstrate that the worker who they are placing has no disqualifying information under the law and is eligible to work in the setting.

E. Inclusion of Homemaker-Companion Agencies & Registries

Public Act 11-242, Section 90(b)(2) specifically requires that the DPH make a recommendation as to whether homemaker-companion agencies should be included in the scope of this background search program. The DPH has not identified any compelling justification to exempt homemaker-companion agencies or registries from the background check provisions under this program.
The DPH recommends that the Legislature include homemaker-companion agencies and registries within the scope of this background check program. Current statutory requirements related to comprehensive background checks performed by homemaker-companion agencies and registries should remain in effect until such providers are transitioned into the ABCMS.

**F. Implementation Plan**

The ABCMS represents the construction of an entirely new state database to process and manage fingerprint-based criminal background checks for employment purposes. As a result, the DPH has been working in coordination with the DESPP and CMS’ technical assistance vendor, CNA, to develop an integrated web-based portal under the ABCMS to effectively and efficiently process the anticipated volume of background checks to be received under this program with a limited expenditure of state resources. The ABCMS will require a significant degree of automation – utilizing technological advances and processes not currently employed by the DESPP in other state background check programs – in an effort to process background checks and distribute criminal history results to providers in a timely and accurate manner.

Given that the ABCMS will develop and implement technical advances not currently being utilized within the state, background checks processed under this program will be phased-in by provider type in an attempt to achieve an orderly implementation of the program, avoid unnecessary disruptions in facility hiring processes and reduce strain on limited state resources.\(^4\)

\[^4\] The phased-in implementation of the criminal history and patient abuse search program by category of long-term care facility is provided for within Public Act 11-242, Section 90(g). Pursuant to Section 90(g), notice shall be published by the Commissioner of Public Health in the Connecticut Law Journal indicating that the commissioner is implementing the criminal history and patient abuse background search program for the particular category of such long-term care facility.
**ANTICIPATED BACKGROUND CHECK PROCESSES UNDER THE ABCMS**

For any new job applicant, the first point of entry into the ABCMS will be by long-term care providers. Long-term care providers will register their facilities with the ABCMS and will be provided with secure password-protected access to the ABCMS database.

Based upon current discussions with the DESPP, CMS, CNA and other stakeholder organizations, the DPH anticipates the following to be operational functions of the ABCMS plan.

**A. Registry Checks**

Once a long-term care provider has determined that a given job applicant may be a prospective direct patient access employee, the long-term care facility shall access the ABCMS database and enter certain basic information obtained from the applicant’s employment application into the ABCMS (such as name and address).

The facility will then conduct required name-based registry checks as specified by the ABCMS prior to initiating the process for a fingerprint check. Checking certain name-based registries prior to sending an applicant for fingerprints is designed to avoid the unnecessary time and expense of obtaining fingerprint results where the facility determines that an applicant may be unsuitable to work directly with residents based solely upon information obtained from name-based registries.

Registry searches under the ABCMS provide long-term care employers with instantaneous results and are free of charge.

The DPH anticipates that links to the following registries will be incorporated into the ABCMS:


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5 The ABCMS only applies to new hires, not current employees.
• Connecticut Nurse Aide Registry
  (https://registry.prometric.com/registry/publicCT);

• Connecticut Practitioner Licensing and Investigations Section License Verification System
  (http://www.ct.gov/dph/cwp/view.asp?a=3121&q=476312); and

• Judicial Branch Criminal Convictions Database

Long-term care entities will record the results of the registry searches into the ABCMS. Any entry into the ABCMS that reflects information that disqualifies an applicant from direct patient access employment will alert DPH staff to review that determination for accuracy and provide the applicant with an opportunity to obtain a waiver of the disqualifying offense pursuant to the waiver provisions provided in Public Act 11-242, Section 90(d) (see “Waivers”, below).

**B. Collection of Fingerprints**

Once registry checks have been conducted, the long-term care entity will print an authorization form for the collection of fingerprints that will contain a unique, computer-generated identification number for that applicant. The ABCMS will then note that a fingerprint authorization form has been generated for the specific applicant.

Applicants will be directed to obtain fingerprints through LiveScan devices at one of Connecticut’s 12 State Police Troops located throughout the state or at the State Police Headquarters in Middletown.6

**Technology**

The DESPP utilizes the Automated Fingerprint Identification System (AFIS). Connecticut’s AFIS database consists of both criminal and applicant fingerprint images. The State Police Bureau of Identification, which is the central repository for all fingerprint cards throughout Connecticut, receives approximately 15,000 fingerprint cards per month from State, local and private agencies. Connecticut’s AFIS database currently has over 1.2 million sets of prints in its system.

The DESPP will collect fingerprints through the use of LiveScan Fingerprint technology. LiveScan technology has replaced traditional, manual ink

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6 A listing of Connecticut’s State Police Troops with addresses may be found at DESPP’s website at http://www.ct.gov/dps/cwp/view.asp?a=2153&q=294418.
fingerprint methods. Under LiveScan, a trained fingerprint technician rolls each finger of the applicant on a glass-plated scanner. The image then appears on a screen which allows for closer inspection and a retake of any prints if necessary. When complete, the fingerprints can be electronically submitted to the AFIS database.

- **Checking with the FBI**

Connecticut DESPP electronically transmits fingerprints for the national criminal records check through the Integrated Automated Fingerprint Identification System (IAFIS) for a national fingerprint and criminal history search. The FBI maintains communication lines and equipment at the DESPP’s headquarters in Middletown, which provides Connecticut’s AFIS secure access to the FBI’s IAFIS.

- **Costs and Fees**

The DPH has committed $577,500 of grant funding to offset the cost of fingerprint criminal records checks under the ABCMS, once established. Beyond any allocated grant funds to offset the cost of fingerprint criminal records checks, long-term care providers will be responsible for payment of DESPP’s costs and fees associated with fingerprinting and criminal history record searches.

DESPP currently charges $50 for a Connecticut fingerprint record search. There is a $19.25 fee for the FBI criminal records history check. Connecticut’s State Police presently charge a collection fee of $15 at State Police Troops for LiveScan fingerprint scans.\(^7\)

_C. Lifespan of Checks_

A completed background check with no disqualifying information will remain valid for three years without requiring a new background check if the applicant seeks another long-term care position with a new employer.\(^8\) A new background check is not required by legislation or the ABCMS for so long as the applicant/employee does not change long-term care employers. Connecticut’s existing “rap-back system” will provide ongoing, automated notification to the DPH and long-term care employer of any subsequent criminal record “hits” during the period of employment subsequent to the initial fingerprinting and criminal history record search.

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\(^7\) DESPP’s authority to assess fees in connection with fingerprinting and criminal history records checks is established pursuant to Section 29-17a of Connecticut’s General Statutes.

\(^8\) See Public Act 11-242, Section 90(c)(2).
D. Rap-Back System

DESPP currently possesses a functioning “rap-back system” for state criminal history records. Under this useful technical feature, DESPP will be able to inform DPH staff of any criminal convictions against an employee/applicant that occurred following the initial pre-employment background check. The DPH will review the updated criminal history record obtained through the rap-back feature for disqualifying offenses and will contact the facility where the applicant/employee is listed as working and confirm that the applicant/employee continues to be employed at the facility.

If the provider responds to the DPH that the applicant/employee is no longer so employed (providing the DPH with last date of employment), no further information regarding a “hit” will be conveyed to the provider.

If the DPH receives notification that the applicant/employee is employed at the facility, DPH will notify the facility of the occurrence of a disqualifying “hit” and that the applicant/employee is disqualified from further direct patient access employment. This information will be recorded within the ABCMS database.

The applicant/employee will be notified of the disqualifying “hit” as would an initial applicant and has the opportunity to seek a waiver of the disqualifying offense. Protocols for processing waiver requests would apply with respect to notification of a disqualifying offense through the rap-back process and the facility may continue to employ an individual pursuant to the requirements of conditional employment (see “Conditional Employment”, below) during the review of any such waiver request, if received.

If an updated criminal history record is received through the rap-back process, but it does not contain a disqualifying offense, that record will be forwarded to the employee’s long-term care employer for further review and assessment as to whether the specific employer wishes to continue employment of the individual based upon the updated criminal history record.

DESPP does not assess an additional fee in connection with the rap-back notification system.

E. Conditional Employment

Prospective employees will be required to disclose any crimes or other relevant information, including but not limited to information pertaining to any findings of abuse or licensure actions, concerning their background as part of the job application process. If potentially disqualifying offenses are disclosed on their application, the applicant will not be eligible for conditional employment.
Pursuant to Public Act 11-242, Section 90(f), if no disqualifying offenses are disclosed on the application and a check of name-based registries finds no disqualifying offenses, the provider may conditionally employ an individual while the fingerprint criminal records check is being conducted. The provider must conduct the registry searches and request the fingerprint criminal record check before the individual begins conditional work in any direct patient access capacity. Conditional employment may last up to 60 calendar days.

F. Fitness Determinations

• Definitions

Pursuant to Public Act 11-242, Section 90(a)(3), “disqualifying offense” for the purpose of this background check program means a conviction of any crime described in 42 USC 1320a-7(a)(1), (2), (3) or (4) or a substantiated finding of neglect, abuse or misappropriation of property by a State or Federal agency pursuant to an investigation conducted in accordance with 42 USC 1395i-3(g)(1)(C) or 42 USC 1396r(g)(1)(C).

The crimes described in 42 USC 1320a-7(a)(1) – (4) are as follows:

(1) Conviction of program-related crimes — Any individual or entity that has been convicted of a criminal offense related to the delivery of an item or service under title XVIII or under any State health care program.

(2) Conviction relating to patient abuse — Any individual or entity that has been convicted, under Federal or State law, of a criminal offense relating to neglect or abuse of patients in connection with the delivery of a health care item or service.

(3) Felony conviction relating to health care fraud — Any individual or entity that has been convicted for an offense which occurred after the date of the enactment of the Health Insurance Portability and Accountability Act of 1996, under Federal or State law, in connection with the delivery of a health care item or service or with respect to any act or omission in a health care program (other than those specifically described in paragraph (1)) operated by or financed in whole or in part by any Federal, State, or local government agency, of a criminal offense consisting of a felony relating to fraud, theft, embezzlement, breach of fiduciary responsibility, or other financial misconduct.

(4) Felony conviction relating to controlled substance — Any individual or entity that has been convicted for an offense which occurred after the date of the enactment of the Health Insurance Portability and Accountability Act of 1996, under Federal or State law, of a criminal offense consisting of a felony relating to the unlawful manufacture, distribution, prescription, or dispensing of a controlled substance.
• **Agency**

DPH staff will be responsible for making determinations as to disqualifying offenses upon receipt of fingerprint check results.

• **Integrity**

DPH will work closely with the DESPP to assure the validity of the background check results through the use of LiveScan technology, the rap-back system and AFIS technology. To the extent that inaccuracies in the background check process are identified, DPH will provide, through its website and other published media, contact numbers to alert the agency of such inaccuracies. DPH will work closely with its contacts at the DESPP to address any issues regarding the accuracy of information received and/or provided in relation to the background check program.

G. **Waiver Process**

Pursuant to Public Act 11-242, Section 90(d), an individual may file a written request for a waiver of a disqualifying offense with the DPH not later than thirty days after the date the department mails notice of disqualification to the individual.

The DPH may grant a waiver from disqualification to an individual who identifies mitigating circumstances surrounding the disqualifying offense, including (A) inaccuracy in the information obtained from the background search, (B) lack of a relationship between the disqualifying offense and the position for which the individual has applied, (C) evidence that the individual has pursued or achieved rehabilitation with regard to the disqualifying offense, or (D) that substantial time has elapsed since committing the disqualifying offense.9

The DPH will mail a written determination indicating whether DPH shall grant a waiver not later than fifteen business days after DPH receives the written request from the individual, except that said time period shall not apply to any request for a waiver in which an individual challenges the accuracy of the information obtained from the background search.

In the absence of a disqualifying offense, employment determinations are made by the long-term care provider. Even if a waiver is provided, the long-term care provider will not be required to employ the applicant.

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9 Waiver determinations shall be made by supervisors within the DPH Healthcare Quality and Safety Branch’s Facility Licensing and Investigations Section.
H. Compliance Monitoring

Compliance with the mandatory background check laws and regulations will be monitored during routine licensure inspections for those facilities and providers regulated by the DPH.

I. Checking Sequences

As a summary, the following is an outline of the primary steps in the background check sequence under the anticipated ABCMS:

1. Applicant provides permission to the long-term care provider to conduct a background check with his/her signature as part of the initial application.

2. When the applicant consents to the ABCMS background check, the provider enters basic applicant information in the password-secured ABCMS database.

3. The provider conducts a search of name-based registries for evidence of disqualifying offenses.

4. If the provider deems an applicant to be an appropriate candidate for hire after the registry checks, the applicant is provided with a fingerprint authorization form and information to proceed to a State Police Troop for LiveScan fingerprinting.

5. LiveScan fingerprints are obtained and transmitted to DESPP.

6. State and National fingerprint record searches are conducted and coordinated through DESPP. Results are sent in an automated manner from DESPP to the ABCMS.

7. Once LiveScan fingerprints are obtained and the criminal history record search is in process, long-term care providers may conditionally employ the applicant for a period of not more than sixty days pursuant to Public Act 11-242, Section 90(f)(2).

8. If no “hits” for a disqualifying offense are found, the DPH sends notification to the applicant and provider stating that the applicant is eligible for employment and updates the ABCMS database. The applicant’s search results are retained within the ABCMS database and subject to rap-back notification. A new fingerprint scan is not required under the ABCMS should the applicant change employment within the next three years.

9. If “hits” for a disqualifying offense are identified, the DPH sends notification with a summary to the applicant and provider and updates the ABCMS
database. The applicant has an opportunity to submit a written request to seek a waiver of the disqualifying offense.

10. If there is a state criminal record, but not for a disqualifying offense, the state criminal record will be forwarded in an automated manner to the long-term care provider for review and consideration as a part of an informed hiring decision. However, the FBI does not permit the dissemination of any FBI “rap sheet”. In other words, FBI rap sheets can only be reviewed by DPH staff to ascertain whether the FBI rap sheet contains a disqualifying offense and cannot be forwarded to the provider.

11. Even if a waiver is granted by DPH staff through the ABCMS, the long-term care provider is under no obligation to hire the applicant.

J. Outreach and Technical Assistance Plan

DPH anticipates that a comprehensive outreach and educational program will be required to ensure that long-term care facilities and providers have a clear and concise understanding of the expectations for both the provider and the potential employee under the ABCMS.

DPH has active collaborations with long-term care facility and provider associations that include LeadingAge Connecticut (formerly the Connecticut Association for Not For Profit Providers for the Aging), Connecticut Association of Health Care Facilities, Connecticut Association for Home Care and Hospice, and the Connecticut Assisted Living Association. Partnering with associations to provide criminal background check information and education ensures a wider audience supported by the associations’ memberships. Mechanisms to provide education regarding changes in Federal and State laws and regulations are currently well established as DPH provides educational programs to long-term care provider groups several times a year. DPH has the electronic capability with the tools of WebEX to engage the long-term care provider community in a large interactive, automated conference and plans to host several educational sessions regarding the ABCMS.

The ABCMS website will be updated with information regarding the criminal background check program, including forms, policies and procedures and a frequently asked questions document. Collaboration with professional associations and other organizations such as the Departments of Education and Higher Education and the Community College System is another vehicle that DPH intends to pursue to provide education regarding the criminal background check program to the current health care workforce as well as students who are graduating from health care programs and entering the work force.