

# YOUTH SERVICES POLICY

<b>Title:</b> Criminal Record Check	<b>Type:</b> A. Administrative <b>Sub Type:</b> 2. Personnel <b>Number:</b> A.2.18
	<b>Page 1 of 7</b>
<b>References:</b> La. R.S. 15:587, 15:587.1, 15:825.3, and 17:15; Civil Service Chapter 12; US DOJ PREA Standards 115.317(a), 115.317(b), 115.317(c), 115.317(d), 115.317(e), 115.317(f), 115.317(g), and 115.317(h); ACA Standards 2-CO-1C-18 and 2-CO-1G-05 (Administration of Correctional Agencies); 4-JCF-6C-05 (Performance-based Standards for Juvenile Correctional Facilities); 2-7036 and 2-7224 (Standards for Juvenile Probation and Aftercare Services); YS Policies A.1.7 "Risk Management", A.2.1 "Employee Manual", A.2.12 "Personnel Records", A.2.48 "Driver Safety Program", B.7.1 "Education", B.8.3 "Volunteer Services Program", C.2.8 "Youth Visitation in Secure Facilities", C.2.11 "Prison Rape Elimination Act (PREA)", and C.5.3 "Quality Assurance Reviews – Central Office Audits, Secure Facilities and Regional Offices"	
<b>STATUS: Approved</b>	
<b>Approved By:</b> Otha "Curtis" Nelson, Jr., Deputy Secretary	<b>Date of Approval:</b> 10/06/2023

## I. AUTHORITY:

Deputy Secretary of Youth Services (YS) as contained in La. R.S. 36:405. Deviation from this policy must be approved by the Deputy Secretary.

## II. PURPOSE:

To gain knowledge of any prior criminal activity, or of any substantiated or inconclusive child abuse complaint, on the part of a current or prospective employee, volunteer, intern, visitor, and contracted health care and treatment providers; to identify annually any criminal activity that could adversely affect an individual's job performance or has the potential to affect the safety and security of YS youth and staff.

## III. APPLICABILITY:

This policy applies to all current and prospective employees, volunteers, interns, visitors, contracted health care and treatment providers, and educational staff.

Each Unit Head shall be responsible for ensuring that all necessary procedures are in place to comply with the provisions of this policy.

#### IV. DEFINITIONS:

***Automated Fingerprint Identification System (AFIS)*** - The national system used by police departments and United States federal agencies such as the CIA and the FBI. AFIS is a real time system that provides “hit” alerts once an employee has been entered, eliminating the need for annual criminal record checks to be conducted.

***Contract Provider*** – An outside entity or company, inclusive of all employees, that provides materials and services on a contract under the supervision of Youth Services.

***Hits*** - Any convictions, charges or arrests on the National Criminal Information Center report, or any match on the Louisiana Child Abuse Registry report.

***Intern*** - An advanced student or recent graduate undergoing supervised practical training.

***State Central Registry (SCR)*** – A centralized database maintained by the Louisiana Department of Children and Family Services (DCFS) that compiles records from all investigations of child abuse, and categorizes such cases as substantiated, inconclusive or invalidated. [Formerly known as the Louisiana Child Abuse Registry (LCAR)].

***Summons*** – A ticket or citation issued to a person in lieu of his arrest for the commission of any traffic, criminal or drug offense.

***Terminal Agency Coordinator (TAC)*** – Designated staff trained to ensure agency compliance with National Criminal Information Center and the Louisiana Law Enforcement Telecommunications System (LLETS).

***Unit Head*** - For purposes of this policy, Unit Head refers to Deputy Secretary, Assistant Secretary, Undersecretary, Chief of Operations, Probation and Parole Director - Juvenile, Youth Facilities Director - Statewide, Executive Management Advisor, General Counsel, Regional Administrators, Facility Directors and Regional Managers.

***Visitor*** – Any person who is on the facility grounds for an authorized visit, or who is attempting to gain entry to the grounds for a visit to conduct business with YS staff or youth, or for purposes of a tour (refer to YS Policy No. C.1.18), or as a volunteer, etc. Pursuant to YS Policy No. C.1.18, searches of tour groups shall be conducted in a professional manner that avoids unnecessary force and supports the dignity of each person, while still accomplishing the objectives of the search.

***Volunteer*** - An individual who donates time and effort to enhance YS' activities and programs. These individuals are selected on the basis of their skills or personal qualities to provide services in such areas as transition back into the

community, recreation, counseling, education, religion, etc. Volunteers may include student interns, job service training program participants, senior citizens, faith-based organizations, and others workers who serve without financial compensation.

**V. POLICY:**

It is the Deputy Secretary's policy that all current and prospective YS employees, and all secure care facility volunteers, interns, visitors and contracted health care and treatment providers shall undergo a criminal record background check through the Automated Fingerprint Identification System (AFIS) prior to their employment, initiation of volunteer services or visitation as appropriate.

In addition, it is the Deputy Secretary's policy that, as a part of this background check, the names of all prospective employees, as well as contract providers that will have direct access to youth in custody, shall be cross-referenced against the State Central Registry (SCR) maintained by the Louisiana Department of Children and Family Services (DCFS).

Current YS employees who may be transferred to work at another facility/office, or be temporarily assigned to assist with operations at another facility/office, shall not be required to undergo additional criminal record checks at the time of the reassignment. Therefore, record checks shall be honored across all agency units to prevent multiple checks being performed.

Unauthorized access or dissemination of any information regarding criminal activity to unauthorized persons or failure by designated staff herein to report SCR and AFIS "hits" to the Unit Head shall result in disciplinary action commensurate with the violation.

**VI. PROCEDURES:**

A. **Prospective** YS employees, all secure care facility volunteers, interns, visitors, contracted health care and treatment providers, and educational staff.

1. The unit's Human Resource (HR) Liaison shall provide the required paperwork to the prospective employee, volunteer, intern, visitor, contract health care and/or treatment provider, or educational staff for completion prior to their employment or initiation of services, authorizing the unit's Terminal Agency Coordinator (TAC) to initiate a "YS Criminal Record Check Request" form [see Attachment A.2.18 (a)] and to initiate a SCR check.

In addition, the unit's HR Liaison shall provide a copy of this policy to the pertinent individual listed above for review and required completion of the "Confirmation of Receipt of Policy" [see Attachment A.2.18 (d)]. The signed confirmation shall be

maintained by the unit's HR Liaison, and a copy shall be forwarded to Office of Management and Finance (OMF) HR.

**REMINDER:** If serving time in the military applies when completing Attachment A.2.18 (a), a copy of the DD Form 214 "Certificate of Release or Discharge from Active Duty" reflecting the type of discharge must be attached to the form for submission to OMF/HR.

2. Completed fingerprint cards shall be submitted to the Central Office (CO) Administrative Program Director, who shall forward them to the Louisiana State Police (LSP) for processing through the Bureau of Criminal Identification and Information.

An email shall be sent to the CO Administrative Program Director by LSP with an attachment to verify if applicant is eligible for employment. The CO Administrative Program Director shall forward a copy of the email attachment to OMF/HR.

3. All AFIS and SCR "hits" on prospective employees, interns, contracted health care and treatment providers, and educational staff shall be communicated to the Unit Head in writing by the unit's TAC. Prior to making an offer of employment, the Unit Head shall forward the "Report of Hits" [see Attachment A.2.18 (b)], to the Regional Administrator/Chief of Operations/Youth Facilities Director - Statewide for review and approval or denial.

The HR Liaison shall maintain a copy of the "approval" or "denial", and a copy shall be forwarded to OMF/HR.

4. All AFIS "hits" on prospective volunteers shall be communicated to the Unit Head in writing by the unit's TAC. Prior to the commencing of services, the Unit Head shall forward the "Report of Hits" to the appropriate Regional Administrator for review and approval or denial. "Approval" or "denial" of volunteers shall be copied to the unit's Volunteer Services Coordinator for informational purposes
5. All AFIS "hits" on prospective visitors shall be communicated to the Unit Head in writing by the unit's HR Liaison. Prior to allowing visitation privileges, the Unit Head shall forward the "Report of Hits" to the appropriate Regional Administrator for review and approval or denial.

- B. For **Newly hired** YS employees, volunteers or interns, DPS HR will send a list of newly hired OJJ employees to DCFS on the first and the fifteenth of each month. Should the designated date fall on a non-working day, the list will be sent on the closest regularly scheduled work day immediately

preceding the designated send date. In the event of a violation, OJJ will be immediately notified; otherwise, a quarterly review of submissions will be sent to the Undersecretary, Deputy Undersecretary or designee(s) of the results for record keeping and auditing purposes.

Notification of hire must be received in HR no later than 12pm on the last working day prior to the list being sent to DCFS for screening. Should notification be received in HR of a pending new hire after this deadline, or the number of allowable submissions to DCFS have been exceeded, that applicant will be added to a future submission.

- C. For **Current** YS employees, volunteers, interns and visitors, as well as contracted health care and treatment providers, and educational staff providing services in secure care facilities:

1. **Annual** LCAR background checks on current employees shall be conducted by Central Office Legal Services.
2. Real time AFIS "hits" shall be communicated to the Unit Head by the unit's TAC in writing by forwarding a copy of the report upon receipt from the CO Administrative Program Director.

The Unit Head shall forward the AFIS "Report of Hits" to the appropriate Regional Administrator/Chief of Operations/Youth Facilities Director - Statewide the same day or within one (1) calendar day for review and approval or denial pursuant to the guidelines established in Section VI. C. of this policy.

- D. At the discretion of the Assistant Secretary, the following action may be taken as a result of a "hit" from AFIS or an annual SCR check showing criminal charges or substantiated child abuse:

1. State employees may be put on LI - Leave Pending Investigation/Suspended with Pay.
2. Volunteers may be denied entrance onto facility grounds or reassigned, pending a review or the outcome of the charges.
3. Visitors may be denied visitation depending on past felony convictions. (Refer to YS Policy C.2.8).
4. Contract staff shall be notified by the Unit Head, with approval from the Assistant Secretary, to suspend or reassign the individual in question pending a review or the outcome of the charges.

- E. A YS employee, secure care facility intern, contracted health care or treatment provider, or educational staff shall inform their immediate supervisor, or the Unit Head if the immediate supervisor is not available, of

an arrest or receipt of a criminal summons within 72 hours of receiving the summons or release from custody after arrest.

The Unit Head shall immediately notify the appropriate Regional Administrator/Chief of Operations/Youth Facilities Director - Statewide, who shall immediately inform the Deputy Secretary, Assistant Secretary, Probation and Parole Director - Juvenile, and OMF/HR of the arrest or receipt of criminal summons.

The following shall also occur within 72 hours of receipt of the summons or release from custody:

1. The supervisor or the Unit Head shall complete the "Report of Employee Arrest or Receipt of Summons" form [see Attachment A.2.18(c)], and attach a copy of the summons or any other documentation, including the UOR, pertinent to the occurrence provided by the employee.

If the supervisor is completing this form, the supervisor shall deliver it to the Unit Head, along with the UOR.

2. The Unit Head shall provide a copy of the notification report to the appropriate Regional Administrator/Chief of Operations/Youth Facilities Director - Statewide, Deputy Secretary, Assistant Secretary, Probation and Parole Director - Juvenile, along with all pertinent documentation.

The "Report of Employee Arrest or Receipt of Summons" form only shall be forwarded to OMF/HR.

3. OMF/HR shall maintain a copy of this report in the confidential section of the employee's personnel file. Failure to report may result in disciplinary action, up to termination of employment or services.

- F. In the event of an arrest or receipt of a criminal summons of a volunteer or visitor, it shall be the volunteer or visitor's responsibility to report the information to the Unit Head within 72 hours of receiving the summons or release from custody, along with a UOR.

The Unit Head shall complete the "Report of Arrest or Receipt of Summons" form and provide a copy, along with the UOR, to the Regional Administrator/Chief of Operations/Youth Facilities Director - Statewide, the unit's Volunteer Services Coordinator or the unit's TAC.

Failure to report on the part of the volunteer or visitor may result in termination of services or visitation privileges.

**VII. RECORD KEEPING:**

- A. AFIS criminal record background checks on prospective employees, interns, contracted health care and treatment providers, and educational staff, and any “hits” thereafter, as well as SCR records are strictly confidential, and shall be retained in a secure location to be accessed only by trained and authorized personnel.
- B. AFIS criminal record background checks on prospective volunteers and visitors, and any “hits” thereafter, shall be retained in a secure location to be accessed only by trained and authorized personnel.
- C. AFIS and SCR record checks SHALL NOT be maintained by anyone other than those designated through this policy.

**VIII. EXCEPTION:**

The Deputy Secretary may grant an exception to any provision of this policy, provided such exception is not in conflict with law, State Civil Service rules, or other pertinent policies.

**Previous Regulation/Policy Number:** A.2.18

**Previous Effective Date:** 03/17/2022

**Attachments/References:** A.2.18 (a) Criminal Record Check Request 7-1-11.docx  
A.2.18 (b) Report of Hits October 2023.doc  
A.2.18 (c) Report of Arrest or Receipt of Summons October 2023.doc  
A.2.18 (d) Confirmation of Receipt of Policy October 2023.doc

## Youth Services Criminal Record Check Request

This request must be completed and submitted by all applicants for employment or volunteer/intern services. The information solicited on this request shall be used only as an investigative and identification aid to evaluate suitability for appointment or volunteer/intern services with this unit. Written consent must be given for release of information contained herein, provided that if the investigation discloses participation in criminal acts, unlawful or illegal activities, this guarantee of confidentiality is null and void.

☐ Annual Review      ☐ Pre-Employment  
☐ Special Agent Status    ☐ Volunteer/Intern

**PLEASE PRINT OR TYPE**

Name: (First, Middle, Last) \_\_\_\_\_

List any other names you have used: \_\_\_\_\_

SS#: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Hair Color: \_\_\_\_\_ Eye Color: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_ Ethnic Origin: \_\_\_\_\_

If additional space is required to complete answering a question, use *the reverse* side of this form.

List current and previous home addresses for the past ten years in chronological order. Account for all time.

Date (Mo/Yr)	Address
_____	_____
_____	_____
_____	_____

Do you possess a valid driver's license? _____ Yes _____ No	Driver's License #:	State:	Date Issued:	Expiration Date:
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Have there been any judgments against you as a result of an accident? \_\_\_\_\_ Yes \_\_\_\_\_ No

Have you had your driver's license suspended or revoked? \_\_\_\_\_ Yes \_\_\_\_\_ No

Have you ever been arrested or convicted of any law violation, including federal or state fish and game Laws? (Exclude minor traffic violations) \_\_\_\_\_ Yes \_\_\_\_\_ No

Have you ever been on Probation or Parole? \_\_\_\_\_ Yes \_\_\_\_\_ No

Explain "Yes" answers below: give details, reasons, dates, locations, etc. (If you need additional space, use the reverse side of this form.)

Place of employment and address:

Have you served in the military? _____ Yes _____ No	Branch:	Dates of Service:	Highest Rank Attained:	Type of Discharge: ( <i>Attach copy of DD214</i> )
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List any organizational affiliation to which you belong and include full name and address. (Exclude any church organizations.)

Have you ever worked for a law enforcement-related agency? _____ Yes _____ No	If yes, give locations and dates. If rejected, give date you applied and reasons for rejections, if known:
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List three persons who may be contacted for professional and/or character references:

1	Name	Address	Telephone #	Place of Employment
2	Name	Address	Telephone #	Place of Employment
3	Name	Address	Telephone #	Place of Employment

I certify that the information I have provided herein is complete and true to the best of my knowledge. I know that any misrepresentation herein may cause my application to be rejected, my name removed from consideration for employment or volunteer/intern services or subject me to dismissal from state service.

Applicant's Signature

Date

For Office Use Only

TAC Signature / Date

Facility Director Signature/Date

☐ Approve      ☐ Disapprove



## Report of "Hits"

Date: \_\_\_\_\_ Unit: \_\_\_\_\_

To: \_\_\_\_\_  
Regional Administrator/Chief of Operations/Youth Facilities Director - Statewide

From: Unit Head \_\_\_\_\_  
Name / Title

Attached please find the AFIS Criminal Record Check Request which resulted in a "hit" on the following person:

Name: \_\_\_\_\_

Purpose:

- |  |   |   |  |
|--|---|---|--|
| <input type="checkbox"/> Annual Review | <input type="checkbox"/> Pre-Employment | <input type="checkbox"/> Special Agent Status | <input type="checkbox"/> Contract Provider |
| <input type="checkbox"/> Intern        | <input type="checkbox"/> Visitor        | <input type="checkbox"/> Volunteer            | <input type="checkbox"/> Educational Staff |

**Date Received by Appropriate Regional Director/Chief of Operations/Youth Facilities Director - Statewide:** \_\_\_\_\_

### RECOMMENDED ACTION:

Below is a description of the action to be taken as a result of the "hit", effective \_\_\_\_\_.  
Date

- ☐ Recommend Hire      ☐ Recommend do NOT Hire      ☐ Discuss w/Employee/Applicant
- ☐ LI - Pending Investigation/Suspend Duties (State Employees)
- ☐ Suspend or Reassign Duties (Intern / Contract Staff / Volunteers)
- ☐ Visitation Denied (Visitors)

\_\_\_\_\_  
Regional Administrator/Chief of Operations/  
Youth Facilities Director - Statewide

\_\_\_\_\_  
Date

Send copies to: Assistant Secretary  
Volunteer Services Coordinator, if applicable  
Visitation Coordinator, if applicable



**YOUTH SERVICES**  
**Report of Arrest or Receipt of Summons**

- ☐ Employee      ☐ Intern      ☐ Contract Provider      ☐ Educational Staff  
☐ Visitor      ☐ Volunteer

Date: \_\_\_\_\_

To: \_\_\_\_\_  
 Regional Administrator/Chief of Operations/Youth Facilities Director - Statewide

In accordance with YS Policy A.2.18, Section VI., this is notification that the person named below notified this office that he/she was arrested or has received a summons on

\_\_\_\_\_.

Notification received by: \_\_\_\_\_  
 (Name/Title)

- ☐ Arrest Notice      ☐ Notice of Receipt of Summons

Date Unit Head was notified: \_\_\_\_\_

Unit Head Notified by:      ☐ Phone      ☐ Letter      ☐ In Person

Date Deputy Secretary was notified: \_\_\_\_\_

Date Assistant Secretary was notified: \_\_\_\_\_

Date OMF HR was notified: \_\_\_\_\_

This notice is being submitted by: \_\_\_\_\_ / \_\_\_\_\_  
 Unit Head Name / Title      Date



## YOUTH SERVICES

### YS Policy No. A.2.18 "Criminal Record Check"

#### Attachment (d) - Confirmation of Receipt of Policy

This is to acknowledge that I, \_\_\_\_\_ have received a copy of YS Policy No. A.2.18 "Criminal Record Check", which requires that all current and prospective Youth Services employees, secure care facility volunteers, interns, visitors, contracted health care and treatment providers, and education staff shall undergo an AFIS criminal record background check and a Louisiana Child Abuse Registry check prior to employment, initiation of volunteer services, visitation, or on the employee's anniversary hire date, as appropriate.

I understand that I am responsible for familiarizing myself with the contents of this policy.

I further acknowledge that if I have any questions or need assistance, I will seek guidance from my supervisor.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name (printed and legible)

\_\_\_\_\_  
Date

c: HR Liaison  
OMF HR