TO: Nursing Home Administrators, Nursing Facilities, ICFs/MR 16 Beds and Over, HDCs, ICFs/MR Under 16 Beds, Assisted Living Facilities, Interested Parties
FROM: Martina Smith, JD, Director, Division of Provider Services and Quality Assurance
DATE: August 18, 2021
RE: Background Checks for Employees of Long-Term Care Facilities During the COVID-19 Pandemic and Rule Suspension

In April of 2020, you were notified that the Department of Human Services (DHS) suspended parts of Section 304 of the Rules for Conducting Criminal Background Checks for Employees of Long-Term Care Facilities. The suspension of the rule authorized facilities to temporarily use name-based checks in lieu of submitting fingerprints to DPSQA for certain background checks. This rule suspension was due to the Coronavirus pandemic and the declaration of a public health emergency. This process has been commonly known as "Purpose Code X."

As you recall, “Purpose Code X” did not eliminate the requirement for submission of fingerprints; it only allowed for the delay in submitting fingerprints based on the suspension of the rules. It is now necessary for you to submit fingerprints for any fingerprint-based background checks your facility requested using “Purpose Code X.” In some cases, the “Purpose Code X” waiver form and/or payment still needs to be submitted for processing. DPSQA will provide you with spreadsheets that reflect background checks your facility submitted using “Purpose Code X.” The spreadsheets will indicate which items need to be provided to DPSQA (fingerprint card with FBI-1 DHS Verification form, waiver form, and/or payment).

Please review the spreadsheet and submit the needed items, along with a copy of the spreadsheet and a notation that they are related to “Purpose Code X,” to the Office of Long Term Care, P.O. BOX 8059, MAIL SLOT S405, LITTLE ROCK, AR 72203-8059 by August 31, 2021. If the individual(s) listed on the spreadsheet is no longer employed at your facility or is otherwise unavailable, please indicate so on the spreadsheet under the “Applicant still employed (YES or NO)” column. If you have contact information for those individuals that are no longer employed by your facility, please provide that information so that we can contact them personally.

Questions regarding submission of fingerprints, payments, and waivers can be directed to the following individual in the Division of Provider Services & Quality Assurance Criminal Records Unit: Brigham Gibson-Oliver at Brigham.Gibson-Oliver@dhs.arkansas.gov.