Please dial into the voice portion of this webinar at 1-866-394-2346, code is 1860245595, you may also use your computer speakers



# MENTAL HEALTH BACKGROUND CHECK For Pistol Permit & Employment

## Introduction & Quick Overview



Date: 6/1/2012







## **MENTAL HEALTH BACKGROUND** Office of Mental Health CHECK (MHBC) Agenda

Welcome	5 Minutes
Session A MHBC – Introduction , Pilot Project Scope & Deliverables	10 Minutes
<ul> <li>Session B</li> <li>MHBC - User Registration &amp; Access Management</li> <li>OMH – Security Management System</li> <li>OMH – CNDA Processing</li> <li>User Page &amp; Search Functionalities</li> <li>Adding &amp; Editing of MHBC User Profiles</li> </ul>	20 Minutes
Session C MHBC - Security Enrollment, User Login & Confidentiality Attestation	10 Minutes

## Mental Health MENTAL HEALTH BACKGROUND Office of Mental Health CHECK (MHBC) Agenda (Continued....)

<ul> <li>Session D</li> <li>MHBC - Pistol Permit Background Check</li> <li>Current &amp; New Business Process</li> <li>Inquiry Request Submission &amp; Review</li> <li>Inquiry Request Re-Submission</li> <li>Inquiry Results – Review &amp; Analysis</li> <li>Inquiry Results – Document Generation</li> </ul>	30 Minutes
<ul> <li>Session E</li> <li>MHBC – Employment Background Check</li> <li>Automated Business Process</li> <li>Inquiry Request Submission &amp; Review</li> <li>Inquiry Results – Review &amp; Analysis</li> <li>Processing Steps &amp; Business Rules</li> </ul>	15 Minutes
<u>Session F</u> MHBC – <u>Recap &amp; Next Steps / QA Session</u>	15 Minutes

# MHBC INTRODUCTION, PILOT PROJECT SCOPE & DELIVERABLES



Session A (Duration 10 Minutes)



- The new automated Mental Health Background Check which will allow your organization user to perform searches of public mental health systems automatically.
- Your organization will be able to use this system for mental health background checks for individuals requesting :
  - 1. Pistol Permits,
  - 2. Rifle Permits,
  - 3. Explosives Permits
  - 4. Certain types of Employment.
- Using this new system, you will be given notification of the results within 24 hours of request.
- Access to this system is limited to members of local law enforcement with responsibility for pistol permits, long rifles, explosives and certain types employment.
- HIPAA and Information Security Training are required for any staff authorized to use the system.

## MENTAL HEALTH BACKGROUND CHECK (MHBC) High Level Workflow Diagram



New York State

Office of Mental Health



## MENTAL HEALTH BACKGROUND CHECK (MHBC) MHBC Web Portal

## To open this web portal, MHBC user will enter the following URL <a href="http://www.omh.ny.gov/omhweb/mhbc/">http://www.omh.ny.gov/omhweb/mhbc/</a> in the address field of their web browser.

New York 🛋 State 🛛 I≡ State Agencies	Search all of NY.gov
Office of Mental Health Commissioner Michael F. Hogan, PhD Governor Andrew M. Cuomo	Search OMH Go
Home News Data & Reports Publications Resources Employment A-Z Site Map	中文   <u>РуССКИЙ   Español   Kreyòl Ayisyen</u>
Message From Commissioner Hogan   About OMH   OMH Facilities   Initiatives   Contact OMH   FAQ	Print 🚍
The Automated Mental Health Background Check (I	МНВС)
The new automated Mental Health Background Check will allow your organization to perform searches of public menta organization will be able to use this system for mental health background checks for individuals requesting pistol perm employment. Using this new system, you will be given notification of the results within 24 hours of the request. Access law enforcement with responsibility for pistol permits, long rifles, explosives and certain types of employment.	al health systems automatically. Your nits, long rifle, explosives, and certain types of is to this system is limited to members of local
Log onto the MHBC System	
MHBC User Guide	
Health Insurance Portability and Accountability Act (HIPAA) and Information Security Training are required	for any staff authorized to use the system.
Please use the links below to view the trainings and supplemental materials	
<ul> <li>Health Insurance Portability and Accountability Act (HIPAA) Privacy Training</li> <li>HIPAA Training Slides (1 mb)</li> <li>Office of Mental Health (OMH) Training Video Script (text only)</li> <li>OMH HIPAA Training Video Script (text with graphics)</li> <li>OMH HIPAA Privacy Rule Preemption Analysis and Updates</li> <li>OMH Employee HIPAA Awareness Brochure</li> </ul>	
Information Security Training	
2005 Information Security Training (IST) Program <sup>™</sup> Security Awareness and Computer User Responsibilities <sup>™</sup> (111kb)     From HIPAA to Health Information Cochoolegy for Economic and Clinical Health (HTECH). Drivery and Security	y Bacias 🔿 (288kb)



- Web enabled application will replace the current manual search process of the Department of Mental Hygiene Information System (DMHIS) database.
- The new application will automate the searches requested by police departments, sheriff's office and county courts.
- This will not only automate the search process for pistol permits, it will also improve the OMH response time to external requestors.
- All the MHBC users are assigned a well defined role based access permission depending upon their organizational needs.
- User will be able to save information and view the results for all inquiries submitted by their organization ONLY
- In the phase one of this project, this application will initially be piloted to three NYS counties:
  - 1. Monroe
  - 2. Erie
  - 3. Suffolk



## MHBC – EMPLOYMENT Pilot Project – Scope & Deliverables (Continued....)

- This application will replace the current manual search process of the DMHIS databases.
- MHBC for employment verification will automate the background checks requested by:
  - 1. Municipalities,
  - 2. Police departments & State Troopers,
  - 3. State Parks & Recreation Departments,
  - 4. Department of Corrections,
  - 5. Other users from Counties, Towns & Villages.

# MHBC USER REGISTRATION & ACCESS MANAGEMENT



Session B (Duration 20 Minutes)



The following are the steps required for managing user access to MHBC users through the OMH Security Management System (SMS):

- The Security Management System (SMS) is a web-based application that organizations will use to authorize staff members to access certain NYS Office of Mental Health (OMH) web applications including MHBC pistol permit.
- The NYS Office of Mental Health (OMH) requires all organizations to sign a Confidentiality & Non-Disclosure Agreement (CNDA) prior to using SMS.
- Organization directors will appoint a Security Manager for their organization, and will provide this person with the information necessary to complete the Security Manager self-registration.
- Once a Security Manager account is fully established, the security manager will create MHBC users or update if an account already exists, within their organization and request access to the MHBC Pistol Permit background check application.
- A complete Security Management System Reference Manual can be found at <u>http://www.omh.ny.gov/omhweb/sms/reference\_manual.html</u>



**OMH Letter Sent to Organization's Directors Describes OMH CNDA Requirement:** 



Dear Mr. Director:

You are receiving this letter because, according to information on file at the NYS Office of Mental Health (OMH), you are the Director of your Organization. We are providing you advance notice of an important initiative that will automate the processes involved with granting you and your staff access to OMH Web sites and applications that provide information useful to your operation...



OMH Emails Sent to Organizations Directors Describe How to Access OMH CNDA Online OMH CNDA Emails with Director's User ID and Password



**Dear Mr. Director:** 

This is one of two emails you will be receiving regarding the NYS Office of Mental Health (OMH) CNDA Web site. This email contains a new User ID you can use to access the CNDA Web site to view and "electronically sign" the OMH Confidentiality and Non-Disclosure Agreement (CNDA) which is required before your organization is granted access to the MHBC, Patient Characteristics Survey (PCS), PSYCKES Medicaid, and other OMH applications. For security purposes, your password will be sent in a separate email.

Go to: https://cnda.omh.ny.gov/



### MHBC – USER REGISTRATION & ACCESS MANAGEMENT OMH CNDA Sign-In Screen

OMH CNDA Sign-In Screen at https://cnda.omh.ny.gov/







Accessing OMH Security Management System (SMS) after Signing CNDA OMH SMS Email to Director for Security Manager Assignment



#### **Dear Mr. Director:**

As described in previous correspondence and email, the NYS Office of Mental Health (OMH) is automating and streamlining the process of gaining access to OMH Web applications. The next step in the process is for you, the Director, to assign one or more Security Managers for your agency. You can assign this role to yourself, or delegate it to a trusted individual at your agency. Typically, this assignment will be given to your organization's Information Security Officer, or other individual performing security, and/or information technology functions.

### MHBC – USER REGISTRATION & ACCESS MANAGEMENT MHBC – USER REGISTRATION & ACCESS MANAGEMENT SMS Log-in Procedure

• The Security Management System Homepage (<u>http://www.omh.ny.gov/omhweb/sms/</u>) provides a description of the application, the user manual, answers to Frequently-Asked Questions (FAQs), and links for self-registration and log-in to the application.

• A SecurId token is required to log-in to the Security Management System (SMS). A SecurId token is an authentication device with a computer chip that displays a different, single-use 6-digit number every minute. A Personal Identification Number (PIN) will need to be established, which will be used along with the 6-digit token code to log-in to SMS.

• Most of the Security Managers will be in new PIN mode and will be required to set their PIN before log-in to SMS.

• The Security Manager follows the link to SMS, enters the User ID and Passcode (consisting of the PIN and 6-digit token code).





- After signing-on to SMS, the SMS "Users" page will be displayed. This page contains a scrollable list of all the User IDs assigned to your agency.
- Initially, the list may be empty (indicated by [Count: 0]), or if your organization has users of OMH applications such as CAIRS, NIMRS, NYESS, MHPD, PCS, PSYCKES and Medicaid, their User IDs will be displayed.
- Any User IDs that you add should also appear in this list.



# MHBC – USER REGISTRATION & ACCESS MANAGEMENT

SMS - User Page (Continued..)

Vew York State	Wednesday, August 05, 2009
Security Management System	[SMS]
Office of Mental Health A-Home	Vinod R. Ravikumar
Go To Help About	Logout
Users	
User List:	User Count = 65

Select a userID from the list below to grant the user access to an application. (Currently, PSYCKES Medicaid and PCS are the only applications available.) If an individual is not listed, you can create a userID for him/her by clicking on the "New User" button and completing the "New User" screen.

Note: The list below may not include all OMH userIDs at your agency. In rare circumstances, UserIDs will not be displayed. If you need to grant access to a user missing from the list and you know the individual already has an OMH userID, please click on the "New User" button and then enter the individual's OMH userID on the "New User" screen.

Edit	User ID	Name	Token Assigned	
	HJA12410	Adshs, Herald J.	requested: 07/29/2009	^
P.	GA12410	Ahome, Garfieldmoore	no	
.0	AA812410	Bhaumik, Amith A.	sent: 11/12/2008	
	L8633EZ8	Brew, Erin Z.	no	
o	JLC12410	Cary, James L.	no	
.0	L8633ESD	Daslkjd, Erin S.	no	
.0	GD12410	Derbyshire, George	requested: 07/01/2009	
P	D	Dfdafadfd, Sdaff	no	
A.	12410DD	Dobre, Djien	no	
0	ZJD12410	Donald, Zobre J.	no	~
			Nerve Un	or

#### Search Criteria:

Agency:	A-Home		
Application:	PCS		15
User ID:			
	Last Name:	First Name:	
Name:	1		
Show deactivated user			
			Search



- The "User List" contains one row for each User ID defined for your agency.
- Edit (this icon is a picture of a small pencil). You click this icon to edit the user record. The edit user screen is where you grant access to OMH applications.
- User ID. This is the OMH identifier for the user. This identifier is used to sign-on to MHBC Pistol Permit applications
- Name. This field displays the user's last name, followed by the user's first name and middle initial.

## MHBC – USER REGISTRATION & ACCESS MANAGEMENT Office of Mental Health MHBC – USER REGISTRATION & SMS- Search Criteria Section

- The "Search Criteria" section is located at the bottom of the "Users" page following the User List and New User button.
- The "Search Criteria" section is the mechanism Security Managers use to limit the User IDs displayed in the User list.
- It contains the following searchable fields: Application, User ID, Last Name, and First Name. In your search query you may select an OMH Application from the drop down list, enter a specific User ID, last name or first name, or you may enter just the first part of any of these fields.
- When searching by Application, it will only show you applications that are granted through SMS i.e. you will not be able to search on NIMRS or CAIRS users, since they are not granted through SMS.
- Then, when you click the "Search" button, these fields will be used to filter the search results and display only User IDs that match the criteria you selected.
- If you enter values in more than one of the fields, the search results displayed in the User list will include only User IDs that match all of the criteria selected.



- If the User does not have an existing ID, leave the User ID box blank. The Security Manager proceeds to complete the User information and select the "Create User" button.
- Fields denoted with an asterisk (\*) are required. A new User ID will be generated for the User. If a User by that name already exists for the agency, the system will show a message that a User with that name is among the "active" or "inactive" users. To check the inactive users, see the <u>Search Criteria</u> section of the User's Page.

	If the user has an existi does not have an OMH I generate a new User ID	ng OMH User ID, plea Iser ID, please leave	ese enter it in the User II the User ID box blank.	D box. If the us SMS will auto
User ID: 🧲		$\rightarrow$		
	* First Name:	M.I.:	* Last Name:	
Name:				
* Date of Birth:		* Gender:	~	
* Title:				
* Email:				
* Agency:	A-Home			
SecurID <sup>®</sup> Token:	Not assigned			



## MHBC – USER REGISTRATION & ACCESS MANAGEMENT

SMS-Adding a New User

- If a User already has an OMH User ID for access to another application, please enter it in the User ID field.
- Upon entering a current User ID in the field and exiting the field (by selecting the next field), the screen will respond with a message that the User ID is valid and will display the retrieved User information.
- You may close the window. A similar message will display if the User information was not found in the security database.
- You can edit the User's email address and your edits will be stored in the SMS application. Fields denoted with an asterisk (\*) are required.



Click "Reset Password" to reset the user's password. This system responds with the following message once the password is reset.

New York State		Tuesday, J	uly 14, 2009
0111	Security Management System [SMS]		
Office of Mental Health	A-Home	Vinod R	Ravikumar
Go To		Help	Logout
Edit User			
The user's pass	vord has been reset.	Cio	se



- To edit the information for an individual at your agency, you will need to sign-on to SMS.
- From the SMS "Users" page, you should access the "Edit User" page by clicking on the "pencil icon" in the "Edit" column on the row for the user in the "Users List" section.
- The "Edit User" page will be displayed with the user's name, email address, date of birth, gender, and current application access.



# MHBC – USER REGISTRATION & ACCESS MANAGEMENT

**SMS-Editing User Information** 

ew York State		Tuesday, July 14, 200
	Security Management System [SMS]	
ffice of Mental Health	A-Home	Vinod R. Ravikuma
о То		Help Logou
Edit User		
Iser Information:		
User ID:	L8633VRR	
	* First Name: M.I.: * Last Name:	
Name:	Vinod R Ravikumar	
* Date of Birth:	01/01/1975 * Gender: Male 💌	
* Title:	Title	
* Email:	coevvrr@omh.state.ny.us	
* Agency:	A-Home	
SecurID <sup>®</sup> Token:	Not assigned	
Г	New User Update Deactivate Reset Pass	word Users

# MHBC SECURITY ENROLLMENT, USER LOGIN, & CONFIDENTIALITY ATTESTATION



Session C (Duration 10 Minutes)



- All MHBC users are required to identify themselves by completing the security enrolment process.
- Steps are described in the next slide.

	Office of Mental Health
	Statement of Access and Confidentiality
WARNING: This comput expectation of privacy i subject to having all of consent to such monitori	er system is solely for the use of authorized users for official purposes. Users of this system have no n its use. To ensure that the system is functioning properly, individuals using this computer system and their activities monitored and recorded by system personnel. Use of this system evidences an expres ng.
Unauthorized or imprope continuing to use this sy agree to the conditions s	er use of this system may result in administrative disciplinary action and civil and criminal penalties. By stem you indicate your awareness of, and consent to, these terms and conditions of use. If you do no tated in this warning, LOG OFF IMMEDIATELY.
Pleas	e identify yourself by answering the security question below.
Questi	on: What was the last name of your favorite teacher in final year of high school?
Answe	r:
Questi	on: What was your favorite subject in high school?
Answe	r:
Questi	on: What is your favorite European city?
Answe	r:
	Hide my answers
Regis	er This Computer
	○ This is a personal computer. Remember it.
	• This is a public computer. Do not remember.
Con	tinue
	© Copyright, 2006 New York State Office of Mental Health. All Rights Reserved.



# MHBC – SECURITY ENROLLMENT

Security Enrollment Steps

#### Please select your security enrolment question/answers and register your PC.

**Register This Computer** 

○ This is a personal computer. Remember it.

This is a public computer. Do not remember.

• If you select radio button for "<u>This is a personal computer. Remember it</u>", system will remember your enrolment information, and you will not be required to setup this again for your current PC.

• If you select radio button for "<u>This is a public computer. Do not remember</u>" please remember your enrolment questions / answers; you may need these in case if you are using a different PC to access MHBC application in future.

• You can also choose to hide your answers by checking the check box "<u>Hide my answers</u>".

• Click the "Continue" button.



- Enter your User Id and Password,
- •Click the "Continue" button

NEW YORK STATE       Image: Second Seco
Statement of Access and Confidentiality WARNING: This computer system is solely for the use of authorized users for official purposes. Users of this system have n expectation of privacy in its use. To ensure that the system is functioning properly, individuals using this computer system ar subject to having all of their activities monitored and recorded by system personnel. Use of this system evidences an expres consent to such monitoring. Unauthorized or improper use of this system may result in administrative disciplinary action and civil and criminal penalties. B continuing to use this system you indicate your awareness of, and consent to, these terms and conditions of use. If you do no agree to the conditions stated in this warning, LOG OFF IMMEDIATELY.
WARNING: This computer system is solely for the use of authorized users for official purposes. Users of this system have n expectation of privacy in its use. To ensure that the system is functioning properly, individuals using this computer system ar subject to having all of their activities monitored and recorded by system personnel. Use of this system evidences an express consent to such monitoring. Unauthorized or improper use of this system may result in administrative disciplinary action and civil and criminal penalties. B continuing to use this system you indicate your awareness of, and consent to, these terms and conditions of use. If you do no agree to the conditions stated in this warning, LOG OFF IMMEDIATELY.
Unauthorized or improper use of this system may result in administrative disciplinary action and civil and criminal penalties. B continuing to use this system you indicate your awareness of, and consent to, these terms and conditions of use. If you do not agree to the conditions stated in this warning, LOG OFF IMMEDIATELY.
Please identify by entering your user ID and password or passcode
rease identify by citering your user to and password of passedic.
User ID: istcxxx
Password or Passcode:
Continue
© Copyright. 2006 New York State Office of Mental Health. All Rights Reserved.



• System will display the Security and Confidentiality Attestation Page, and user can see their name is associated with this attestation certification.

• To complete the attestation process, check the "Affirm All of the above" check box.

I certify that:	Contact Us
My name is MHBC User and that,	
I will use the MHBC system for access to information w to my respective clients,	hich supports the administering of employment services
That I understand all data obtained from the system is c the purpose of operating an integrated authorized empl	onfidential and privileged and may only be disclosed fo oyment activities system,
I have successfully completed: HIPAA / HITECH training	g within the previous twelve-month period, and
That the information in the MHBC system is being discl federal and state law. Federal and state law prohibits a written consent of the person for whom it pertains, or as disclosure in violation of the law may result in a fine or is	osed to me from confidential records and is protected b ny further disclosure of this information without specific otherwise permitted by law. Any unauthorized further ail sentence or both.



- System will display the attestation day, date & time stamped on this screen and "Continue" button will be enabled now.
- Click the "Continue" button.
- •MHBC Home Page will be open.





- You are in the MHBC Home Page.
- You have four different options available to choose for background checks:
  - 1. Pistol Permit,
  - 2. Rifle Permit,
  - 3. Explosive,
  - 4. Employment.
- Depending on role, you will have up to four background check reason options.





• If at any time user need any technical support or assistance, clicking on the "<u>Contact Us</u>" link will open a pop-up window.

• User can contact the OMH CIT Help Desk at (518) 474-5554 OR 1-800-435-7697

I you need assistance, please email using this link <u>OMH Helpdesk</u> or call (518) 474-5554 or 1-800-HELP-NYS (1-800-435-7697). Be sure to specify that you are having trouble with the Mental Health Background Check system.	
Be sure to specify that you are having trouble with the Mental Health Background Check system.	
it is concerning a specific background search request id, please communicate that as well.	
ou should receive an OMH ticket number to aid in follow up communication.	


## **MHBC – HELP DESK SUPPORT**

CIT Help Desk Support By Phone





## **MHBC – HELP DESK SUPPORT**

#### CIT Help Desk Support By Mail Message

# •User can also send "<u>Mail Message</u>" by clicking on the "<u>OMH Helpdesk</u>" link; complete the message form as shown below and clicking on the "<u>Send Mail</u>" button.

Please enter your name, e-mail address and message below, then press 'Send Mail'.

Your E-Mail:				
Message:	although the message box d	loes not change size	the limit to the amount of conte	nt vou can
1000 characters.	. If the content is larger than t	the message box a so	croll bar will appear (to the right	of the box)
can review all of	your text before submitting.		<u>^</u>	

Clear Form

Send Mail



• If a MHBC user remains inactive for thirty minutes, system will display a session expiry message and prompt the user to press the "<u>Continue</u>" button.

• User may need to re-enter their user-id / password.

Mental Health Background Check [MHBC] - Session Expired
Your session has expired due to inactivity
Continue



- To end the current session and logout user will click on the "Logout" tab,
- System will end the current session and "Logged-Out Message" windows will pop-up.
- User can close the window and exit the application.

NYS Office of Mental Health		
	You have successfully logged out Please close the bowser either manually or with the link below. This security measure ensures that password information is cleared from the system. Close Window	
	Windows Internet Explorer           Image: Second S	

# MHBC PISTOL PERMIT BACKGROUND CHECK



Session D (Duration 30 Minutes)



Current Background Check Process

- Sheriff's offices, Police departments, and County court clerks receive paper applications for pistol or explosive permits.
- A search is required to determine if the applicant is currently an OMH patient or who has any time in the past been treated in any of OMH facilities.
- The applicant's information is submitted to OMH via a letter or fax to conduct an inquiry on the applicant.
- The applicant's information is currently matched against the DMHIS, using mainframe-based access, by a staff member at OMH central office.
- Based on the search results OMH returns a response back to the office staff in the form of a letter i.e. possible match letter or a no match letter.



- Will create an robust search function to conduct inquiries on the pistol permit applicants and return results in more timely manner.
- The new web enabled application will allow local authorities to enter applicant information for processing via a probabilistic matching algorithm, which will inquire to the OMH database and identify a Strong Match / Possible Match/ No Match to the data entered on the Inquiry screen.
- The user shall be able to view and print auto generated letters with individual applicants inquiry results, identifying a Strong Match, Possible Matches or No Match.
- The automated search application will expedite the process of returning these PDF letters within a 24 hour period.



- User shall be able to submit an inquiry request for a mental health background check on applicants who have completed an application for a pistol permit.
- User shall be able to build an inquiry request and enter all the required data elements i.e. First Name, Last Name, Date of Birth, Gender and Social Security Number of a person to be searched.
- User shall be able to add Additional Aliases, Street Address, City, State and Zip code of a person to be searched.
- For every invalid input from the user, the system shall display a meaningful error message explaining the format input is expected.
- User can save, submit or clear the entered information.
- Please refer MHBC User Manual for step by step details.



Select Reason for Background Check

To start your Inquiry Request Submission process, follow these steps:

• Select radio button for "Pistol Permit" on the MHBC home page.

Available Background Check Reasons Background check reasons are processed differently, please choose the appropriate one:	
Pistol Permit     Rifle Permit	
○ Explosives	
C Employment Eligibility	
Currently set to Pistol Permit	
Click on the "Inquiry Request" control tab	Home Inquiry Request Inquiry Results

• System will open the Inquiry Request Submission Screen, (Slide 43)



- All <u>*Required fields*</u> are identified with an \* after the field name.
- Enter Inquiry Request Data,
- System will validate all the entered data,
- Click the "Submit" button.

	Submit	
Inquiry Details Reason for Inquiry * Pistol Permit Person to Search Details First Name *	V @	Last Name *
Chapter of Birth *     MMDDDYYYY     US Military Service - Allow Age 18	Beff for Jeffery, Tom for Thomas, Peggy for Margaret. Only enter significant Gender = Male	name changes here: aliases, maiden names, etc.
Address City fields with asterisk are required	State New York	ZipCode
Confirm your submi	Ssion.	tal Health ? Cancel





• After submitting inquiry requests, user clicks on the "Inquiry Results" tab, system will display a new screen "Inquiry Request Review & Analysis Screen"

Middle Name	ast Name	Date of Birth	Date Submitted	Kratur	Reason For Check	Requesting Organization	
K	Smith	01/01/1960	04/20/2012	(Submitted)	Pistol Permit	OMH Central Office	
ĸ		1 A.	04/06/2012	Completed	Pistol Permit	ONH Central Office	
			04/04/2012	Completed	Pistol Permit	OMH Central Office	
c			04/04/2012	Completed	Pistol Permit	OMH Central Office	
			04/04/2012	Completed	Pistol Permit	OMH Central Office	
			04/04/2012	Completed	Pistol Permit	OMH Central Office	
			04/04/2012	Completed	Pistol Permit	OMH Central Office	
			03/30/2012	Completed	Pistol Permit	OMH Central Office	
			03/30/2012	Completed	Pistol Permit	OMH Central Office	
			03/27/2012	Completed	Pistol Permit	OMH Central Office	
0 of 25				- 12			н
Date Submitted	MM/DD/YYYY	To	MMDD/YYYY				
Last Name	Choose Las	t Name					
Search Request ID	- Select a Re	quest					
Reason For Background Cher	tk Select a Re	ason 💌					
Status	Select a Sta	itus		Apply Filters	Clear Filters		
	K K C C Date Submitted Last Name Search Request ID Reason For Background Cher Status	Middle Name K Smith K C C C Date Submitted Last Name Search Request ID Reason For Background Check Status Select a Re	Middle Mame Last Mame Date of Blidth K Smith 01/01/1960 K C C C Date Submitted MM/DD/YYYY To Last Name - Choose Last Name Search Request ID Select a Request • Reason For Background Check Select a Reason • Status Select a Status	Middle Name         Last Mame         Date 40 Bith         Date Submitted           K         Smith         01/01/1960         04/20/2012           K         04/06/2012         04/06/2012           C         04/04/2012         04/04/2012           04/04/2012         04/04/2012         04/04/2012           04/04/2012         04/04/2012         04/04/2012           04/04/2012         04/04/2012         04/04/2012           04/04/2012         03/30/2012         03/30/2012           0 of 25         03/27/2012         03/27/2012           Date Submitted         MM/DD/YYYY         To         MM/DD/YYYY           Last Name         - Choose Last Name -         •           Search Request ID         - Select a Reason         •           Status         - Select a Reason         •	Middle Name       Last Xianne       Date of Blidh       Paste Schmitted       Ktabut         K       Smith       01/01/1960       04/20/2012       Submitted         K       Image: Schemitted       04/06/2012       Completed         C       04/04/2012       Completed         04/04/2012       Completed       03/30/2012       Completed         03/30/2012       Completed       03/27/2012       Completed         0 of 25       Image: Scarch Reguest ID       - Select a Reguest       Image: Scarch Reguest ID       - Select a Reason         Status       - Select a Reason       Image: Scarch Reguest ID       - Select a Reason       Image: Scarch Reguest ID       Apply Filters	Middle Mitmue       Last Name       Date of Picts of Picts       Schonitted       Status       School Permit         K       Smith       01/01/1960       04/20/2012       Submitted       Pistol Permit         K       04/06/2012       Completed       Pistol Permit         C       04/04/2012       Completed       Pistol Permit         C       04/04/2012       Completed       Pistol Permit         04/04/2012       Completed       Pistol Permit       04/04/2012       Completed       Pistol Permit         04/04/2012       Completed       Pistol Permit       04/04/2012       Completed       Pistol Permit         04/04/2012       Completed       Pistol Permit       03/30/2012       Completed       Pistol Permit         03/30/2012       Completed       Pistol Permit       03/30/2012       Completed       Pistol Permit         01/07/2012       Completed       Pistol Permit       03/27/2012       Completed       Pistol Permit         01/07/2012       Completed       Pistol Permit       03/27/2012       Completed       Pistol Permit         01/07/2012       Completed       Pistol Permit       03/27/2012       Completed       Pistol Permit         01/07/2012       -       MMDD/YYYY	Middle Norma       Laste of Birth       Dute Submitted       Status       Date Submitted       Pistol Permit       OtHel Central Office         K       Smith       01/01/3960       04/20/2012       Completed       Pistol Permit       OtHel Central Office         K       Status       Status       Pistol Permit       OtHel Central Office       OtHel Central Office         C       04/06/2012       Completed       Pistol Permit       OtHel Central Office         C       04/04/2012       Completed       Pistol Permit       OtHel Central Office         C       04/04/2012       Completed       Pistol Permit       OtHel Central Office         03/30/2012       Completed       Pistol Permit       OtHel Central Office         03/27/2012       Completed       Pistol Permit       OtHel Central Office         0 of 25       Status       - Choose Last Name -          Reason For Background Check </td



- The user shall be able to review and see the status of all the inquiry requests submitted before; i.e., "Submitted" or "Completed"
- User can navigate through all the listed inquiry requests, can perform sorts on each column, to rearrange the rows in ascending or descending order
- User can apply filters to display selective rows in this screen.
- Once this inquiry request is successfully processed overnight by an <u>Automated Batch</u> <u>Run</u>, the status will be changed from "<u>Submitted</u>" to "<u>Completed</u>".





• To see the details, user clicks on an inquiry request which has status as "Submitted"



- System will pop up a new screen "Additional Details View" allowing users to review the complete details of a selected inquiry request. (Slide 47)
- If user need any changes to be made, will click the "Edit Request" button, system will open Edit & Resubmission Screen. (Slide 48)



Additional Details View Screen (For Edit)

Additional Deta	ails View (OMH F	PHI)
OMH Search Request ID:	81	
Status:	(Editable) Background Check	Processing Not Yet Occurred
Date/Time Submitted:	04/20/2012 10:37 AM	
Submitted by organization:	OMH Central Office	
Inquiry Details		
Reason for Inquiry	Pistol Permit	
Person to Search Details		
Primary Name:	John K Smith	
Additional Aliases		
Alias First Name	Alias Middle Name Or Initial	Alias Last Name
Jone		Smith
Jon	N	Smmeth
Records: 1 to 2 of 2		
Date of Birth	January 01, 1960	
Gender	Male	
Social Security Number	111-22-3333	
Street Address	1663 Central Avenue	
City, State Zip	Albany, New York 12110	
Edit Request 81		
		Close





Inquiry Request Edit & Resubmission Screen

- User can edit and resubmit the inquiry request by clicking on the "Resubmit" button.
- User can simply cancel any changes by clicking on the "Cancel Resubmit" button .

tails			
Inquiry = Pistol Permit	-		
Search Details			
John	Hiddle Name/Initial K	Last Name * Smith	
ollapse Additional Aliases Section ground check will automatically find variation	ns on names: Jeff for Jafflery, Tom for Thomas, Peggy for M	angaret. Only enter significant name changes here: aliases, maiden nam	es. etc.
ame 1	Alas Middle Name Or Initial	Alias Last Name *	Action
			Insert Canor
		Smith	Delete
1 10 2 10 2	4	smmeth	Delete
v = 010011960 ry Service - Allen Age 18	Gender * Male 💌	SSN * 111-22-3333	
1663 Central Avenue			
Albany	State New York	ZipCode 12110	1
arterick are remained			Concert Description 1



• To view the Inquiry Results, user clicks on an inquiry request which has status as "Completed"

Offic	York State	Mental He	alth Bac	kground C	heck [N	/HBC]		
Н	ome Inquiry Rec	uest Inquiry Results	s Submitter Hist	ory				Contact Us
ID 82	First Name Mike	Middle Name	Last Name Siths	Date of Birth 01/01/1976	Date Submitted 04/20/2012	Status Completed	Reason For Check Pistol Permit	Requesting Organization OMH Central Office
81	John	Ν	Smithh	01/01/1960	04/20/2012	Completed	Pistol Permit	OMH Central Office

• System will pop up a new screen "Additional Details View" allowing users to view the details of this Inquiry Request.

81 Completed 04/20/2012 11:18 AM OMH Central Office Pistol Permit John N Smithh	
Completed 04/20/2012 11:18 AM OMH Central Office Pistol Permit John N Smithh	
04/20/2012 11:18 AM OMH Central Office Pistol Permit John N Smithh	
OMH Central Office Pistol Permit John N Smithh	
Pistol Permit John N Smithh	
Pistol Permit John N Smithh	_
John N Smithh	
John N Smithh	
large Or Initial Alian Last Name	
Maine Or Inicial Milas Lascinaine	
Smmeth	
Smith	
January 01, 1960	
Male	
111-22-3333	
1663 Central Avenue	
Albany, New York 12110	
[C]	lose
	January 01, 1960 Male 111-22-3333 1663 Central Avenue Albany, New York 12110



- User will click the "View Results" button.
- Based on a Probabilistic Matching & Search Process (Slide 51), system will generate the "Search Results" i.e.



- Results are color coded for better identification & readability.
- User have option to generate & print PDF letters for each type of search results.



#### **Probabilistic Search & Matching Process**

Scenario 1	If SSN & DOB are exactly Matched	OR	Name & SSN are exactly Matched	Strong Identification established	Strong Match Result. (Slide 52)
Scenario 2	Based on the given search criteria few probabilistic matches are found			Possible Identification is established	Possible Match Result. (Slide 53)
Scenario 3	Too many of Probabilistic Matches are Found			Will not be able to establish a possible Identification	No Results will be available and MHBC user will be requested to resubmit their Inquiry Request with additional search criteria. Excessive Matches Found (Slide 57)
Scenario 4	No Strong Match and No Possible Matches are Found			No Records are Available	No Match Detected Result. (Slide 56)



Sample Inquiry Result - "Strong Match Letter"

							1
A strong match was found for re	equest id	10 🔁	Export to PDF		Return To Inc	uiry Results	
<b>  </b> 4 4 <b>1</b> of 1 ▷ ▷							
State of New York Andrew M. Cuomo Governor			C	om	Office of Ma 44 Holland A Albany, New www.omh.ny	ental Health wenue York 12229 y.gov	
	* * * C	ONFIDENT	I A L * * *				
Strong Match Result *							
Reason for Inquiry: Pistol F	Permit		Status As	of:	Mar 28, 20	112	
OMH Search Request ID:	10						
Submitted By:	- OMH (	Central Office					
Details on Individual Searc	:hed						
Name	DOB	<u>Gender</u>	Last 4 SSN	Address			
	Nov 1						
	Nov 1						
					-		
A search of NYS Office of Ment	tal Health o	computerized file	s using information	on above r	eturned followir	ıg.	
<u>Treatment</u> <u>Name</u>		DOB I	acility Ca	ase No	Adm. Dt.	Disch. Dt.	
Inpatient	1	NOV 2					
		-					
Facility Contact Information	1						
Facility	St	reet	<u>City</u>	State	Zip	Phone	
Pilgrim Psychiatric Center	99 Ro	8 Crooked Hill bad	West Brentwood	NY	11717	(631) 761-3500	



Sample Inquiry Result - "Possible Match Letter"

possible match was found	for request id 8	1	🔁 Export to F	PDF Return To Inquiry Results
14 4 1 of 1 ▷ ▷	i -			
State of New Yo Andrew M. Cuom Governor	<b>vrk</b> 10			Office of Mental Health 44 Holland Avenue Abany, New York 12229 www.omh.ny.gov
	***CON	FIDENT	IAL	
Possible Match Resul	t *			
Reason for Inquiry: Pis	tol Permit		Status A	s Of: Apr 20, 2012
OMH Search Request I	<b>):</b> 81			
Submitted By:	- OMH Centr	ral Office		
Details on Individual Se	arched			
Name	DOB	<u>Gender</u>	Last 4 SSN	Address
John N Smithh	Jan 01, 1960	Male	3333	1663 Central Avenue, Albany, NY 12110
Jone Smith	Jan 01, 1960	Male	3333	1663 Central Avenue, Albany, NY 12110
Jon N Smmeth	Jan 01, 1960	Male	3333	1663 Central Avenue, Albany, NY 12110
A search of NYS Office of M	Mental Health comp	uterized file	s using informat	ion above returned following.
Treatment Name	DOB	<b>i</b> 1	Facility C	ase No Adm. Dt. Disch. Dt.
Inpatient JOHN N SMI	TH DEC	1. N	Manhattan Psychiatric	

Center



Export to PDF - "Possible Match Letter"

A possible match was four	nd for request id 8 ▶I	1 🗸	🛓 Expo	rt to PDF Return To Inquiry Results
State of New Andrew M. Cus Governor	York			File Download
Possible Match Res	*** C O N	FIDENT	IAL	Name: MH9C81_PistolPermit_20120420.pdf Type: Adobe Acrobat Document From: mhbc.ga.omh.ny.gov
Reason for Inquiry: P OMH Search Request	istol Permit ID: 81		St	Open Save Cancel
Submitted By: Sapan Details on Individual	Mukherji - OMH Cent <b>Searched</b>	ral Office		While files from the Internet can be useful, some files can potentially harm your computer. If you do not trust the source, do not open or save this file. <u>What's the risk?</u>
<u>Name</u> John N Smithh	DOB Jan 01, 1960	<u>Gender</u> Male	<u>Last 4</u> 3333	SSN Address 1663 Central Avenue, Albany,

- Select the "Export to PDF" and click on the "Open" button.
- System will generate a PDF document.
- You can print or save this letter.



ľ

## **MHBC - PISTOL PERMIT**

Open & Print - "Possible Match Letter"

î	State of New Ye Andrew M. Cuor Governor	ork NO			O		e of Mental Health biland Avenue y, New York 12229 omh.ny.gov	
12 CRICLARM		***(	CONFIDE	ENTIAL**	*			
Possibl	e Match Result *							
Reason fo	r Inquiry: Pistol	Permit		Status	As Of:	Apr 20, 201	12	
OMH Sear	ch Request ID:	81						
Submitted	By: :	- OMH	Central Office	в				
Details on	Individual Sear	ched						
Name		DOB	Gender	Last 4 SSN	Address			
John N Sn	nithh	Jan 01, 196	D Male	3333	1663 Cer NY 12110	ntral Avenue, A	Albany,	
Jone Smit	h	Jan 01, 196	D Male	3333	1663 Cer NY 12110	ntral Avenue, A	Albany,	
Jon N Smr	meth	Jan 01, 196	D Male	3333	1663 Central Avenue, Albany, NY 12110			
A search of	f NYS Office of M	ental Health	computerize	d files using inf	formation ab	ove returned f	ollowing.	
Treatment	Name	D	OB	Facility	Case No	Adm. Dt.	Disch. Dt.	
Inpatient	JOHN N SMITH	D	EC ·	Manhattan Psychiatric Center			12	
Facility Co	ontact Informatio	on.						
Facility		Stre	et	City	State	Zip	Phone	
Manhattan	Psychiatric Cent	er 600 Stre	East 125th et. 4th Floor	New York	NY	10035-6098	(646) 672-6000	

\* The individual(s) listed above may or may not be the same individual found whom you have inquired. It is recommended that you contact the facility listed to verify that this is the same individual.

**Note:** Confidentiality of patients' records is mandated by Section 33.13 of the Mental Hygiene Law. Any information disclosed by this agency upon receipt of a legitimate request shall be kept confidential by the party receiving the information and may not be re-disclosed without the direct consent of the patient.

Notwithstanding any other provision of law, no person shall be deprived of any civil right, if in all other respects qualified and eligible, solely by reason of receipt of services for a mental disability, nor shall the receipt of such services modify or vary any civil right of any such person, including but not limited to civil service ranking and appointment, the right to register for and to vote at elections, or rights related to the granting, forfeiture, or denial of a license, permit, privilege, or benefit pursuant to any law, (Section 33.01, Mental Hygiene Law)



Sample Inquiry Result - "No Match Detected"

match was found for request id 82	🔁 Export to PDF	Return To Inquiry Results
State of New York Andrew M. Cuorno Governor	C	Office of Mental Health 44 Holland Avenue Alburry, New York 12229 www.omh.ny.gov
c	ONFIDENTIAL***	
No Match Detected Bason for Inquiry: Pistol Permit	State	us As Of: Apr 20, 2012
MH Search Request ID: 82		
ibmitted By: :	- OMH Central Office	
etails on Individual Searched		
ame DOB G	ender Last 4 SSN Addr	ess

A search of NYS Office of Mental Health computerized files, in accordance with Mental Hygiene Law 33.13, has disclosed NO RECORD of a person by the name(s) above. We maintain files on all individuals served by the NYS OMH operated Psychiatric Centers. The files cover the period from April 1, 1965 to the present.

Our records **DO NOT** include services provided by Alcohol or Substance Abuse Treatment Centers, or facilities operated by the NYS Office for Persons with Developmental Disabilities (OPWDD). **Note:** Confidentiality of patients' records is mandated by Section 33.13 of the Mental Hygiene Law. Any information disclosed by this agency upon receipt of a legitimate request shall be kept confidential by the



"Excessive Matches Found" Result Screen

cessive matches for request id 99	)1 Return To Inquiry Results
Excessive Matches Found	]
Even though we do a best attemp sometimes multiple patients mat	ot to apply the provided information to match to public institution records, ch.
In this case there were excessive	matching records.
Would you like to submit a new re	equest adding in additional data?
Your data in this request will be p	re-populated.
	Submit New Request Adding More Specifics

# MHBC EMPLOYMENT BACKGROUND CHECK



Session E (Duration 15 Minutes)



• Organizational Users i.e. Requestors can submit inquiry request for background check about applicants seeking employment in their organization.

• All requestors must insure that they already have obtained a signed consent document form the applicant and the same is available in the file.

• The blank PDF consent forms will be made available for downloading.

• This automated web application will allow users to enter applicant information for processing via a probabilistic matching algorithm, which will inquire to the OMH databases and identify an exact match, or no match to the data entered on the Inquiry screen.

• The application will return a result from the matching process with additional pertinent data to determine if the applicant is eligible for employment.

• The high level business process diagram (Slide 60) describes each component of this business process

# Mental Health Background Check 6/1/2012

Office of Mental Health Exact Match No Match Found Found Letter Letter Signed Consent Forms are MHBC User for **Consent Form** Required before submitting a Employment Inquiry Request **Background Check** User Logs In Inquiry Results Web Application Layer Search Results are saved Security Attestation Access Manager User Enters Inquiry back in the application Request Data authenticates the use Consent database (based on role based Weekdays ,Normal Application (Between 12:00 AM- 8:00 AM Acknowledgement **Business Hours** access permission) Database Service Layer Business Web Service - Extracts inquiry request Web Service – If there is match found, gets the latest patient admission , discharge parameters from application database and date & legal status, applies exclusion filters MHARS Portal submit query to Next gate (Between 12:00 AM - 8:00 AM Database based on the business requirements. Patient's Admission & Discharge Data NextGate (Middle Ware) Layer NexGate(Matching Algorithm) Process Users Informatics ETL Process to standardize Requests data (Between 12:00AM -(Bulk & Daily Incremental Loading) MDM Database Staging Database 8:00AM) DMHIS MHARS COBS UBS Database Database Database Database **Department of Mental Mental Health** Comprehensive Uniform **Hygiene Information System** Automated Record System **Billing System** Billing System

New York State

# **MHBC - EMPLOYMENT**

Automated Workflow Process Diagram



### **MHBC - EMPLOYMENT** Inquiry Request Submission Screen

#### To start your Inquiry Request Submission for Employment background Check:

Select radio button for "Employment" on the MHBC home page.

Available Background Check Reasons							
Background check reasons are processed differently, please choose the appropriate one:							
O Pistol Permit							
O Rifle Permit							
○ Explosives							
Employment Eligibility							
Currently set to Employment Eligibility							



**Inquiry Request Submission Steps** 

Home Inquiry Request Inquiry Results

- 1. Click on the "Inquiry Request" control tab.
- 2. System will open the Inquiry Request Submission Screen. (Slide 63)
- **3.** Check the "Affirm the Following" Check Box.
- 4. Select the appropriate date from drop down calendar.

Employment Check Requires Attestation											
Affirm The Following, Fri May 11 2012 13:58:15											
1, have in my possession the applicant's signed consent form giving permission to perform a											
mental health backg	mental health background check.										
The date on the fo	orm	05/1	1/20	12							
I WILL ARCHIVE THE	4		Ma	y, 20	)12		•	7 YEARS.			
	Su	Мо	Tu	We	Тh	Fr	Sa				
	29	30	1	2	3	4	5				
	6	7	8	9	10	11	<del>12</del>	ame *			
	<del>13</del>	<del>14</del>	<del>15</del>	<del>16</del>	17	<del>18</del>	<del>19</del>				
	<del>20</del>	<del>21</del>	<del>22</del>	<del>23</del>	<del>24</del>	<del>25</del>	<del>26</del>	·			
	27	<del>28</del>	<del>29</del>	<del>30</del>	<del>31</del>	+	2				
•	3	4	5	6	7	8	9				
	Today: May 11, 2012										
	X0012X0	012700	1.1 7.00	10 X 101	17222	100.27	001470				



**Inquiry Request Submission Steps** 

- **1.** All <u>*Required fields*</u> are identified with an \* after the field name.
- 2. Enter Inquiry Request Data.
- **3.** System will validate all the entered data.
- 4. Click the "Submit" button.

Inquiry Details		
		Employment Check Requires Attestation
Reason for Inquiry * Employment Eligibility 🕡		Affirm The Following Fri May 11 2012 13:58:15
Position Applying For * Java Developer		I, : , have in my possession the applicant's signed consent form giving permission to perform mental health background check. The date on the form 05/11/2012 I WILL ARCHIVE THE CONSENT FORM FOR THE AUDITABLE 7 YEARS.
Person to Search Details	Middle News (Telkiel	Last Name * Smith
	Middle Name/Initial	
Expand/Collapse Additional Aliases Section Enter significant name changes here: aliases, maiden names, etc.		
	n i n Mala M	anu * [111 00 2222
Date of Birth * 04/04/1902	Gender *	SSN * 111-22-3333
Address		
City	State New York	✓ ZipCode

66

\* fields with asterisk are required



Inquiry Request Submission Status

#### Confirm your submission.

#### Submit To Office of Mental Health for a background check?



Search Request ID	) <u>First Name</u>	<u>Middle Name</u>	<u>Last Name</u>	Date of Birth	Date Submitted	<u>Status</u>	<u>Reason For Check</u>	Requesting Organization
3271	John		Smith	04/04/1962	05/11/2012	Submitted	Employment Eligibility	OMH Central Office
3251	Aaron	Frank	Evans	02/20/1955	04/20/2012	Completed	Employment Eligibility	OMH Central Office
3232	Test		Validation	02/02/1955	04/16/2012	Completed	Employment Eligibility	OMH Central Office
3231	Test		Validation	02/02/1955	04/16/2012	Completed	Employment Eligibility	OMH Central Office
Records: 1 to 4 o	of 4							
Filter By:	Date Submitted	MM/DD/YYY	Y	To MM/DD/YYYY				
	Last Name							
	Search Request ID							
	Reason For Background (	Check Employment	Eligibility 📘	•				
	Status	Select a St	atus	•	App	oly Filters	Clear Filters	



- The user shall be able to review and see the status of all the inquiry requests submitted before; i.e., "Submitted" or "Completed"
- User can navigate through all the listed inquiry requests, can perform sorts on each column, to rearrange the rows in ascending or descending order
- User can apply filters to display selective rows in this screen.
- Once this inquiry request is successfully processed overnight by an <u>Automated Batch</u> <u>Run</u>, the status will be changed from "<u>Submitted</u>" to "<u>Completed</u>".





Processing Steps & Business Rules

• Processing steps for <u>Inquiry Request Edit & Resubmission</u> are exactly the same as in "Pistol Permit" (Slide 46)

- Processing steps for <u>Inquiry Results View</u>, are exactly the same as in "Pistol Permit" i.e.
  - **1.** System pops up "Additional Details Screen" displaying the selected inquiry requests details.
  - 2. User clicks on the "View Results" button, system will navigate to another screen i.e. "View Results & Document Generation"
  - **3.** Formats for Results Documents i.e. Letters are almost same as specified for "Pistol Permit"
  - 4. Strong identification & possible match letter shall show the details of individual found Patient Type, Name, DOB, Facility, Case No, Admission Date, and Discharge Date.
  - **5.** Only Inpatient data shall be considered for Employment Inquiry Results
  - 6. Child Facilities will not be searched for Employment Inquiry

MHBC RECAP & NEXT STEPS



Session F (Duration 5 Minutes)



- A request has been made to automate the current manual process of MHBC and lookup with an objective to expedite the response back to end users.
- Application functionalities are based on the current business requirement, in subsequent releases more value added features will be incorporated.
- Initially the Pistol Permit background check application will be implemented as pilot project in three counties; Monroe, Erie, and Suffolk.
- Depending upon the valuable feedback and performance evaluation by the end users, system will be enhanced and deployed in the remaining New York state.

# **Any Question Or Concern ??**


Chank You