



IOWA Single Contact Repository

February 2020

The Single Contact Repository (SING) provides authorized agencies internet access to Iowa Criminal History and Sex Offender Registry information held by the Department of Public Safety/Division of Criminal Investigation (DCI), Department of Human Services' (DHS) Central Abuse Registry for Child Abuse (CA) and Dependent Adult Abuse (DAA), as well as Professional License information. The information you receive from SING is to be used for official purposes only and is not to be shared for any other purpose.

An approved agency (SING User) will enter the required search criteria and select which databases are being requested. Once the request is submitted, the selected databases will be checked. An immediate response for each database selected is provided, indicating if there is nothing found in the database or if further research is required. If nothing is found, your search is complete for that particular database. If further research is required, the User will receive a message with further steps to be taken, depending on which database is needing further research. The fee per request is either deducted from an already established pre-paid Billing Account or the User will provide a credit card number as payment for each SING request.

Iowa Child Abuse (CA) and Dependent Adult Abuse (DAA) Registries

The Iowa Department of Human Services (DHS) maintains the Child Abuse (CA) and Dependent Adult Abuse (DAA) Registries and determines which SING Users are authorized to access this information. DHS Central Abuse Registry information is confidential and may only be re-disseminated as provided by law. If you are requesting access to the CA and DAA Registries, you must have independent access to the confidential information as authorized by Iowa Code. Approval of your application may take longer if you are requesting access to the DHS Abuse Registries.

SING Users authorized to access the CA and DAA Registries must:

1. Submit a signed copy of the *Access to Confidential Abuse Information and Non-Redissemination Agreement (DHS Form 470-3767)* along with the SING application, AND
2. Require every employee, who will have access to the CA and DAA Registries, to sign a copy of this same agreement and keep it on file for viewing upon request by the DHS, AND
3. Prior to any SING request for CA and DAA information, obtain authorization from the individual being checked, by using the [Authorization for Release of Child and Dependent Adult Abuse Information \(DHS Form 470-3301\)](#), AND
4. Verify in SING that authorization has been obtained in order to continue with the SING request (NOTE: Authorization forms do not need to be submitted to the DHS, however they must be kept on file for viewing upon request by the DHS)

In signing the Agreement and obtaining authorization, each employee is agreeing to abide by the laws of access and re-dissemination of child and dependent adult abuse information, established in Iowa Code, Sections 135C.33, 235A.15, 235B.6, 235A.17 and 235B.8; and will be subject to criminal penalties as set forth in Iowa Code, Sections 235A.21 and 235B.12.

Agencies NOT requesting access to the CA and DAA Registries are not required to use either form and will not have access to the CA or DAA Registries.

When performing a SING request, the Abuse Registries box must be checked on the Search Screen in order to receive CA or DAA results. If nothing is found in either the CA or DAA Registries, the request is complete and results may be printed or downloaded. If further action is required, a message will provide further instruction based on the type of request submitted. You may be required to initiate the DHS Record Check Evaluation process or submit a Request for Child and Adult Abuse Information to DHS. Final results will then be provided by DHS via email or fax.

Iowa Sex Offender Registry (SOR)

The SOR database is maintained by the Iowa Division of Criminal Investigation. It is available to all SING Users if the "Abuse Registries" box is marked when performing a SING request. When performing a SING request, if nothing is found in the SOR database based on the search criteria provided, the search is complete. If further research is required, the request goes into a queue to DCI, where a more in-depth search is performed. If the Final Result indicates that there is a RECORD FOUND, a Form S indicating those results will be mailed or faxed, depending on account set up. If the Final Result indicates there is NO RECORD FOUND, the SING User will need to View History on SING to retrieve those results. To document the initial and/or final result, the SING User should print or download the results as needed.

Iowa Criminal History Records (CRM)

Iowa Criminal History is maintained by the Iowa Division of Criminal Investigation and is available to all SING Users.

For each SING request where the "Criminal History Check" box is selected, the SING User will be asked to verify whether or not a release authorization signature from the subject has been obtained. **The only acceptable Release Authorization is the [Iowa Criminal History Record Check Request Form \(DCI-77 rev. 6/26/18\)](#).** By signing this Form, the subject is authorizing your agency to request an

Iowa criminal history check and allows DCI to release, as allowed by law, all information maintained. Iowa law does not require a release authorization from the subject in order to process a criminal history record check. However, **without a signed release authorization from the subject, your agency will not receive the following:**

- (1) Deferred judgments where probation has been successfully completed, and/or
- (2) Arrest information older than 18 months where DCI has not received a disposition from the court

The SING User must maintain the Iowa Criminal History Record Check Request Form for release authorization and be able to provide it to DCI if requested.

When performing a SING request, if nothing is found in the CRM database, also referred to as CCH, based on the search criteria provided, the search is complete. The SING User may print or download results as needed.

If further research is required, the request goes into a queue to DCI, where a more in-depth search is performed. **FURTHER RESEARCH does not mean the individual has an Iowa criminal history. It simply means further research is necessary to make that determination.** If the Final Result indicates that there is a CCH RECORD FOUND, you will receive a Form S indicating those results, along with the "rap sheet". Results are returned to the agency via mail or fax, whichever is chosen on this application.

If, after further research, there is ultimately NO RECORD FOUND, results are indicated on SING only. **Users will not receive a hard copy of final results if there is NO RECORD FOUND. The SING User will need to access SING to VIEW HISTORY to see the Status and Final Result of the SING request. Those results will need to be printed or downloaded as necessary.**

Iowa criminal history results are released based upon whether a Release Authorization was obtained or not. A "No Record Found" response could mean that the information on file is not releasable per Iowa law without a signed release authorization. Therefore, it is important for your agency to have a signed release authorization (DCI-77 rev. 6/26/18) on file whenever possible in order to receive all possible Iowa criminal history record information.

Professional Licenses

Professional License information is available to SING Users if required. When performing a SING request, the SING User will choose the License they are looking for and the subject's License Number. Results will be provided immediately via SING. Further action may be necessary which will be noted immediately.

Billing Account

A Billing Account is required to access SING. A pre-paid account in which the fee will be deducted each time a SING request is submitted may be established, or the SING User may provide a credit card number for each SING request made. The pre-paid account requires a \$200 minimum payment to establish the account. This may be paid by sending a check to DCI or by providing a credit card number via SING. The SING fee will be deducted from the balance and the SING User will need to replenish the account as necessary. No credit card information is maintained by the DCI or within SING and therefore will not be released by any agency affiliated with SING.

SING Fees

The fee per SING request submitted are as follows:

Criminal History Check + Abuse Registries (SOR and/or CA/DAA) and/or Professional License check	\$15
Criminal History Check ONLY	\$15
Abuse Registries (SOR and/or CA/DAA) and/or Professional License ONLY	\$2

You will have the option of entering a second last name for the same individual within one SING request, at no additional charge. This is strongly encouraged in order to receive a complete and accurate check.

How to apply for access to SING

Complete the SING Request for Access/Billing Account application on the following pages. This will establish your SING ID and your Billing Account. Once approved, you will receive your SING ID and Billing Account Number, along with an Instruction Guide to SING, from DCI via email. You must contact the OCIO Service Desk for your Password. Generally, these are established within one week of receipt of the SING Request for Access, but could be longer if you are requesting access to Child Abuse/Dependent Adult Abuse information. Access to the Central Abuse Registry (CA/DAA) is determined by DHS and may take longer for approval.



SING Request for Access/Billing Account

I am requesting access to the Single Contact Repository (SING) in order to receive Iowa Criminal History, Iowa Sex Offender Registry, Central Abuse Registry, and/or Professional License information on potential employees, clients and volunteers. Use of SING is in compliance with all regulations regarding access to information contained in these databases and I have legal authorization to perform each of the background checks on the individuals I submit. I understand I may not be authorized to access all databases. I further understand that there is a fee for each SING request submitted, which will be paid via an established pre-paid account or by providing a credit card each time a SING request is made.

Agency Contact Information:

Type of Agency (licensed childcare center, licensed healthcare facility, staffing agency, healthcare staffing agency, employment screening, public school, private school, residential treatment facility, etc.):			
Agency Name:			
NPI/Provider # (if applicable):			
Address:		Street City, State Zip	
Contact Person:		Secondary Contact:	
Email Address:			
Phone Number: (Area code first)		Fax Number: (Area code first)	

Database Access:

As stated above, use of SING must be in compliance of all regulations regarding access to information contained in each database. Please answer the following questions completely to determine your eligibility. This information is required to allow access to SING. If this section is incomplete and you are requesting access to the Central Abuse Registry, access will be denied.
Which SING databases are you requesting to check before you hire an employee or volunteer or continue licensure? Criminal history <input type="checkbox"/> Sex Offender Registry <input type="checkbox"/> Child Abuse Registry <input type="checkbox"/> Dependent Adult Abuse Registry <input type="checkbox"/>
If access to the Central Abuse Registry is being requested, state the Code of Iowa reference that REQUIRES YOU to access this information (refer to www.legis.iowa.gov)
Is your agency required by Iowa Code to perform an evaluation through DHS if there is criminal history or abuse founded on potential employees/licensees?
Is your agency regulated by the state OR does your agency receive any state or federal funding?
Does your agency directly employ those you plan to complete checks on?
Do your employees work in Iowa?
In what types of settings do your employees work (clinic, hospital, nursing facility, private homes, school, etc.)?
What types of positions are you screening for?
What services and to whom does your agency provide?
What is the number of requests you anticipate performing annually?

Continue to Billing Account Request on next page



SING Request for Access/Billing Account (cont'd)

Billing Account Options (Choose one)

Option 1: Pre-paid Account	
<ul style="list-style-type: none"> Requires \$200 minimum payment to DCI to establish account <ul style="list-style-type: none"> May send check to DCI or May make \$200 minimum credit card payment via SING SING fees per request are deducted from account balance Must replenish account as necessary Must include Account Number if sending check to replenish SING Users must track account balance Requests cannot be made if there are nonsufficient funds 	<p>Make Checks payable to and mail to the following:</p> <p><i>Iowa Division of Criminal Investigation Attn: Dissemination Section 215 E. 7th Street Des Moines IA 50319</i></p>
<p>Important: SING users that also send in fingerprints for authorized FBI criminal history record checks or submit Iowa criminal history record checks in paper form using their pre-paid account must note that the balance shown on SING may not always reflect the actual account balance. Fees for fingerprint or manual criminal history submissions are not automatically deducted from the balance shown on SING. SING balances are updated manually as time allows. DCI accounts for ALL activity in a separate accounting system. Agencies must also track account activity to ensure sufficient funds are available.</p>	
<input type="checkbox"/> I would like to establish a PRE-PAID ACCOUNT:	<input type="checkbox"/> \$200 minimum check enclosed <input type="checkbox"/> \$200 minimum credit card via SING

Option 2: Enter Credit Card Number <u>EACH</u> time a SING request is made
<ul style="list-style-type: none"> Must enter credit card information for EACH SING request made \$2 or \$15 SING fee is collected EACH time a SING request is made Payment processor emails receipt for each successful SING payment Credit card number is not kept on file
<input type="checkbox"/> I would like to provide a credit card number EACH time a SING request is made

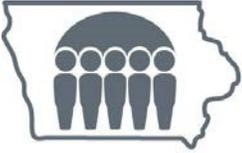
Return Results for Iowa Criminal History and Sex Offender Registry:

<ul style="list-style-type: none"> SING requests needing further research with a Final Result of CCH Record Found (CRM) or Record Found (SOR) Form S and rap sheet with criminal history OR Form S for SOR If fax does not go through, results will automatically be mailed to address on file \$5 fee for any result needing to be re-sent
<p>I would like the Form S with final results for criminal history or sex offender registry returned to me via:</p> <p style="text-align: center;"> <input type="checkbox"/> FAX <input type="checkbox"/> MAIL </p>

Please complete and return all forms by email:

SINGaccounts@iowaDPS.us

To be completed by DCI only		
SING ID	Access Group	DHS Reviewed
Billing Account Number	Payment	Results



Access to Confidential Abuse Information and Non-Redissemination Agreement

As a condition of electronically accessing child and dependent adult abuse information from the Single Contact Repository (SING), our agency agrees to abide by the laws of access and redissemination of child and dependent adult abuse information before conducting a child or dependent adult abuse registry check. We have access to this information under Iowa Code section 135C.33 or 235A.15, for child abuse, and Iowa Code section 135C.33 or 235B.6, for dependent adult abuse.

Our signature on this agreement indicates that our agency understands and agrees to the legal provisions for handling child and dependent adult abuse information established in Iowa Code sections 235A.17 and 235B.8, and is subject to the criminal penalties as set forth in Iowa Code sections 235A.21 and 235B.12.

Redissemination of Child and Dependent Adult Abuse Information

(Iowa Code sections 235A.17 and 235B.8)

A person, agency, or other recipient of child or dependent adult abuse information shall not redisseminate (release) information, except that redissemination is permitted when **ALL** of the following conditions apply:

- ◆ The redissemination is for official purposes in connection with prescribed duties, or in the case of a health practitioner, pursuant to professional responsibilities.
- ◆ The person to whom such information would be redisseminated would have independent access to the same information under Iowa Code sections 235A.15 and 235B.6.
- ◆ A written record is made of the redissemination, including the name of the recipient and the date and purpose of the redissemination.
- ◆ The written record is forwarded to the Central Abuse Registry within 30 days of the redissemination.

A person is guilty of a criminal offense when the person:

- ◆ Willfully requests, obtains, or seeks to obtain child or dependent adult abuse information under false pretense, or
- ◆ Willfully communicates or seeks to communicate child or dependent adult abuse information to any agency or person, except in accordance with Iowa Code sections 235A.15, 235A.17, 235B.6, and 235B.8, or
- ◆ Is connected with any research authorized pursuant to Iowa Code sections 235A.15 and 235B.6 and willfully falsifies child or dependent adult abuse information or any records relating to child or dependent adult abuse.

Upon conviction for each offense, the person is guilty of a serious misdemeanor punishable by a fine or imprisonment.

Any person who knowingly, but without criminal purposes, communicates or seeks to communicate child or dependent adult abuse information (except in accordance with Iowa Code sections 235A.15, 235A.17, 235B.6, and 235B.8) is guilty of a simple misdemeanor punishable, upon conviction for each offense, by a fine or imprisonment.

Any reasonable grounds for belief that a person has violated any provision of Iowa Code Chapters 235A or 235B shall be grounds for the immediate withdrawal of any authorized access that person or agency might otherwise have to child or dependent adult abuse information.

Conditions of Agreement

The administrator of the agency or facility must sign a copy of this *Access to Confidential Abuse Information and Non-Redissemination Agreement* (form 470-3767). This form (signed by the administrator) must include the billing account number and be emailed to DHSAbuseRegistry@dhs.state.ia.us, or faxed to (515) 564-4112, or mailed to the Iowa Department of Human Services, Central Abuse Registry, PO Box 4826, Des Moines, IA 50305. The signed copy must also be posted within sight of the work area in which SING is accessed.

We agree to have every employee who will have access to child and dependent adult abuse information via SING, sign a copy of this *Access to Confidential Abuse Information and NonRedissemination Agreement* (form 470-3767) and keep it on file at this facility or agency to allow the licensure agency personnel to view this agreement upon request.

We further agree to obtain signed authorization (form 470-3301) from each employee or applicant before completing any abuse registry checks through SING. Signed authorization forms do not need to be submitted to the Central Abuse Registry, but must be kept on file at this facility or agency to allow the licensure agency personnel to view upon request.

We understand that this agreement will allow our agency or facility to receive any child or dependent adult abuse information maintained by the DHS as allowed under Chapters 135C.33, 235A, and 235B of the Iowa Code. We understand that without a signed agreement and signed authorizations on file, our agency or facility will not have access to child and dependent adult abuse information.

Name of Facility or Agency
Billing Account Number (as provided by DCI upon approval of the SING account)
Administrator (type or print name)
Signature of Administrator



Authorization for Release of Child and Dependent Adult Abuse Information

This form must be used to authorize release of child or dependent adult abuse information when the person requesting the information does not have independent access to it under Iowa law. Complete a separate form for each person for whom information is requested and email to dhsabuseregistry@dhs.state.ia.us, or fax to (515) 564-4112, or mail to the Iowa Department of Human Services, Central Abuse Registry, P.O. Box 4826, Des Moines, IA 50305.

Please specify which abuse registry you are requesting by checking the appropriate box below:

- Child Abuse Registry Dependent Adult Abuse Registry Both

Please specify your preferred **method of response** by checking a box and completing the information in Section 1.

- Address Fax Email

Section 1: To be completed by the person or agency requesting the information.

Requestor: Last	First	Agency Name		Telephone Number ()
Address				Fax Number ()
City	State	Zip Code	Email	
List the name and address of the person whose information is being requested:				
Name (last, first, middle)			Birth Date	Social Security Number
Address	City	County	State	Zip Code
List maiden name, previous married names, and any alias:				
What is the purpose of your request for child or dependent adult abuse information?				
I have read and understand the legal provisions for handling child and dependent adult abuse information which is printed on the second page of this form.				
Signature of Requestor				Date

Section 2: To be completed by the person authorizing the Department of Human Services to release their child or dependent adult abuse information.

I understand that my signature authorizes the requester to receive information to verify whether I am named on the Child Abuse or Dependent Adult Abuse Registry as having abused a child (Iowa Code section 235A.15) or dependent adult (Iowa Code section 235B.6). To the best of my knowledge, the information contained in Section 1 of this form is correct.

Signature of Person Authorizing	Date
---------------------------------	------

Section 3: To be completed by the Central Abuse Registry or designee.

- The person whose information is being requested is listed on the Child Abuse Registry as having abused a child.
- The person whose information is being requested is not listed on the Child Abuse Registry as having abused a child.
- The person whose information is being requested is listed on the Dependent Adult Abuse Registry as having abused a dependent adult.
- The person whose information is being requested is not listed on the Dependent Adult Abuse Registry as having abused a dependent adult.
- This request for information is denied because the form is incomplete.

Signature of Registry Staff or Designee	Date
Comments	

LEGAL PROVISIONS FOR HANDLING CHILD AND DEPENDENT ADULT ABUSE INFORMATION

Redissemination of Child and Dependent Adult Abuse Information (Iowa Code sections 235A.17 and 235B.8)

A person, agency, or other recipient of child or dependent adult abuse information shall not redisseminate (release) this information, except that redissemination is permitted when **ALL** of the following conditions apply:

- ◆ The redissemination is for official purposes in connection with prescribed duties or, in the case of a health practitioner, pursuant to professional responsibilities.
- ◆ The person to whom such information would be redisseminated would have independent access to the same information under Iowa Code sections 235A.15 or 235B.6.
- ◆ A written record is made of the redissemination, including the name of the recipient and the date and purpose of the redissemination.
- ◆ The written record is forwarded to the Central Abuse Registry within 30 days of the redissemination.

Criminal Penalties (Iowa Code sections 235A.21 and 235B.12)

A person is guilty of a criminal offense when the person:

- ◆ Willfully requests, obtains, or seeks to obtain child or dependent adult abuse information under false pretenses, or
- ◆ Willfully communicates or seeks to communicate child or dependent adult abuse information to any agency or person except in accordance with Iowa Code sections 235A.15, 235A.17, 235B.6, and 235B.8, or
- ◆ Is connected with any research authorized pursuant to Iowa Code sections 235A.15 and 235B.6 and willfully falsifies child or dependent adult abuse information or any records relating to child or dependent adult abuse.

Upon conviction for each offense, the person is guilty of a serious misdemeanor punishable by a fine or imprisonment.

Any person who knowingly, but without criminal purposes, communicates or seeks to communicate child or dependent adult abuse information except in accordance with Iowa Code sections 235A.15, 235A.17, 235B.6, and 235B.8 is guilty of a simple misdemeanor punishable, upon conviction for each offense, by a fine or imprisonment.

Any reasonable grounds for belief that a person has violated any provision of Iowa Code Chapters 235A or 235B shall be grounds for the immediate withdrawal of any authorized access that person might otherwise have to child or dependent adult abuse information.