# PUBLIC HEALTH DIVISION CENTER FOR HEALTH PROTECTION Oregon Psilocybin Services

http://oregon.gov/psilocybin



## **Oregon Psilocybin Services Conviction Reporting Guide**

### Criminal Background Checks Required Under Oregon Psilocybin Regulation

Oregon Revised Statutes chapter 475A (<u>ORS 475A</u>) contains the Oregon Health Authority (OHA) statutes that apply to psilocybin regulation. ORS 475A.255 states that OHA may require the fingerprints of any individual listed on a submitted application.

In addition to applicants seeking licensure, individuals applying for a worker permit through <u>Oregon Psilocybin Services</u> (OPS), are also required to pass a criminal background check. The purpose of this document is to help prepare applicants for the process of reporting new convictions at renewal.

#### Oregon Background Check Unit (BCU)

The <u>Background Check Unit</u> (BCU), a Shared Service of the Oregon Department of Human Services (ODHS) and OHA conducts the required criminal background check for OPS. See details in the <u>Overview of the Background Check Process</u>. This document provides details for any required background check: during the application process, at rechecks, and if a licensee or work permit holder reports new criminal convictions.

#### **Reporting a New Conviction to OPS**

When an approved licensee or person holding a work permit has a new conviction on their record since their license or work permit was approved, they must report this conviction to Oregon Psilocybin Services within ten business days. See OAR 333-333-4200 (1)(e) Notification of Changes.

Within ten business days of a new conviction on an applicant's record, the information below must be submitted to Oregon Psilocybin Services. When reporting a new conviction, please send a message to the OPS Licensing Program in TLC with the subject line, "Conviction Reporting."

The following information is all that is required to report to OPS regarding the new conviction. Please do not elaborate any details regarding the conviction on this form.

- 1. Report the following information regarding the new conviction to OPS:
  - a. Legal name on application
  - b. Prior names and aliases
  - c. Date of birth
  - d. Social Security Number

We ask for **voluntary** consent to use your social security number, if you have once, to confirm your identity during the criminal records check. We will not deny you any rights, benefits, or privileges otherwise provided by law if you do not consent to use of your SSN for these administrative purposes.

- e. Physical Address
- f. Mailing Address (if different)
- g. Phone number
- h. Email
- Residential history outside of Oregon in the past five years
- j. Date of new conviction on record since last license or permit approval
- 2. When this information is submitted to OPS, an Oregon Psilocybin Services team member can initiate your new background check through the Oregon Criminal History and Abuse Records Data System (ORCHARDS).
- 3. Once BCU completes the new background check, it will notify the outcome to OPS. OPS will determine if there will be any changes to your license or work permit.

#### For more information contact:

<u>Licensing.Psilocybin@oha.oregon.gov</u>
Or
971-341-1509