

CHAPTER 9

Credentialing: Licensure, Certification and National Practitioner Data Bank Query

I. POLICY

In order to ensure inmate/patients receive health care services from properly licensed and credentialed staff, each supervisor (clinical and administrative) is responsible for ensuring and documenting that each employee's license is current and the employee has correct and current credentials. Specifically, employees required to be licensed or to have specific credentials in order to qualify for their civil service classifications, and in licensed health care facilities (i.e., General Acute Care Hospitals, Correctional Treatment Centers, and Skilled Nursing Facility) for appointment and reappointment to the Medical Staff, need to maintain the appropriate licensing.

II. PROCEDURE

Hiring and Appointment

1. The Health Care Manager (HCM) or designee shall obtain a completed Credentials Verification Disclosure Form (CVDF) from each applicant at the time of interview. This applies to civil service or contracted physician, psychiatrist, psychologist, or dentists.
2. The HCM shall forward (via facsimile) the completed CVDF to Central Health Care Recruitment and Hiring, HCSD.
3. Central Health Care Recruitment and Hiring, HCSD, shall query the National Practitioner Data Base (NPDB) and appropriate licensing boards. If the reports reflect that the applicant's license is valid and in good standing, Central Health Care Recruitment and Hiring, HCSD, shall notify the interviewer/hiring entity. If the NPDB or licensing agency reports a status code other than valid and in good standing, written approval by the Deputy Director, HCSD, is required prior to making a commitment to hire.
4. At licensed facilities which have a Governing Body and Professional Medical Staff in conformance with the appropriate sections of Title 22, California Code of Regulations (CCR), the HCM, as a member of the Local Governing Body (LGB), shall ensure that the following applies to the hiring and appointment of medical staff members:
 - a) The LGB Bylaws, pursuant to Title 22, CCR contain provisions for delegating the credentialing (i.e., license verification, certifications and NPDB information) of the appropriate staff to the medical staff.
 - b) The Medical Staff bylaws, approved by the LGB, provide for the appropriate credentialing and appointment procedures under Title 22, CCR including competency

- evaluation for clinical privileges and evidence of adequate continuing medical education as required for continued licensure.
- c) Upon completing those procedures, the Medical Staff makes recommendations for the appointment (and reappointment for continued employment) of medical staff members to the LGB for approval in a timely manner.
 - d) Recommendations for granting, renewing or changing clinical privileges of Medical Staff members shall also be forwarded to the Governing Body for approval in conformance with Title 22, CCR.

Reappointment or Continued Employment Determination

1. The HCM or designee shall be responsible for an appropriately timed periodic review procedure for professionally licensed and certified clinical staff who must maintain current licensure, certification, and where appropriate, professional competency, as required by California Law or their civil service classification. The periodic review shall include the following:
 - a) Obtaining the current NPDB information, where appropriate. (Changes in NPDB information shall be considered in reappointment or continued employment decisions.)
 - b) Ensuring the Medical Staff meet Title 22, CCR requirements and follow their bylaws for reappointment, and where appropriate, changes in clinical privileging in a timely manner when the employee is appointed to a Professional Medical Staff.
2. Employees required to be licensed or to have specific certification shall be responsible for the following:
 - a) Providing the original and a copy of the current California license or certificate to the HCM or appropriate designee immediately following each renewal.
 - b) Acquiring and providing the professional licensing or certifying agency the necessary continuing education credits for license or certification maintenance.
 - c) The immediate notification of the HCM or designee in the event of license revocation or restriction.
3. The HCM shall provide appropriate procedures pursuant to CDC policy and California Law to ensure the following:
 - a) No professional clinical employee is performing duties requiring unrestricted licensure or certification during periods of non-licensure, suspension, restriction, or awaiting certification.
 - b) Evidence of professional license status is maintained either in confidential personnel files or is available for review when necessary.
 - c) Written notice is provided to employees who do not provide proof of license renewal by the time it is due, that failure to renew on time will result in not meeting conditions of continued employment.

Procedures if Expiration Occurs:

If employees have not received their new license by the expiration date of their current license, one of the following must be presented to the supervisor:

1. Copy of the Cashier's Check or Certified Check made payable to appropriate licensing authority with a registered return mail receipt from the licensing board.
2. Receipt card from appropriate licensing authority.
3. Canceled personal check payable to appropriate licensing authority. (Must be stamped by the Licensing Board.)
4. Employees who do not have a valid license or verification of renewal by the expiration date shall be served a non-punitive separation in conformance with Government Code, Section 19585.

Enforcement:

It is the responsibility of the employee's supervisor to notify the HCM when it appears that an employee will not be able to produce evidence of a valid license by the first of the next month following the expiration date. The supervisor shall immediately take the employee off clinical patient care duties upon knowledge of license expiration.

The HCM or appointing authority must remove a permanent or probationary employee from a position if he/she fails to meet a requirement for continuing employment. The employee must be given at least five days written notice prior to a non-punitive separation, and shall have the right to appeal to the State Personnel Board within thirty (30) days following receipt of the notice of non-punitive separation.

Employees who have been terminated under provisions of Government Code, Section 19585, do not have a mandatory right of return to their former position even if the requirement for continuing employment is subsequently met. The appointing power may exercise permissive reinstatement authority granted under Government Code, Section 19140.

Where the employee is a member of an organized Medical Staff, the appropriate procedures for suspension of privileges and possible termination of appointment in accordance with due process under Title 22, CCR and California law shall be followed. Reporting of such actions shall be made to the Medical Board of California according to the Business and Professions Code, Section 805.