

# Personnel Records Worksheet



**Instructions:**

Mark each box as:

Adequate – **A**

Inadequate – **I**

Not Applicable – **N/A**

**Record Identifier**

**Related 2015 Standard(s)**

*When licensed, indicate the license type (e.g., MD, RN, RT) as part of the record identifier. >*

<b>2.I.C.14;</b> <b>3.A.3, 10</b>	Evidence of HIPAA training and compliance.													
<b>2.II.B; 3.B</b>	File contains employment-related items as required by the organization's personnel policies (job application, resume, job description, verification of references, results of background check, employee benefit forms).													
<b>2.II.B.4;</b> <b>2.II.B.6</b>	Verification of professional license/certification (if applicable) and evidence of ongoing monitoring of date-sensitive information.													
<b>2.II.D; 3.B.2</b>	Evidence that the person holds qualifications commensurate with job responsibilities and authority including, if applicable, appropriate licensure or certification.													
<b>3.B.4</b>	Documentation of initial orientation within 30 days of hire, and annual/ongoing training.													
<b>3.B.5</b>	Evidence of periodic performance appraisals including current competence.													
<b>3.B.7</b>	Evidence that personnel policies were made known to the employee at the time of employment.													
<b>3.B.8</b>	Evidence of verification of employment eligibility, such as I-9 (Immigration and Naturalization Form) and visa if applicable. <b>(Note:</b> Organization may choose to keep I-9 forms separate from personnel files.)													
<b>3.C.3</b>	Evidence of participation in initial exposure control training, and retraining within one year of last training.													
<b>3.C.4.a</b>	Evidence of signed hepatitis-B immunization acceptance/declination (when applicable).													
<b>3.C.5</b>	Evidence of immunization(s) program and employee acceptance/declination, based on state and/or organization policy (when applicable).													
<b>3.C.6</b>	Evidence of tuberculosis detection plan, when appropriate.													
<b>3.F</b>	Evidence of documentation of significant workplace exposure and injuries is maintained consistent with applicable reporting requirements.													
<b>4.A; 7.II.F;</b> <b>9.I; 9.Q;</b> <b>10.I.M</b>	Evidence of current BLS, ACLS, PALS, ATLS training (if required); PEARS training is not accepted in lieu of PALS training.													
<b>5.II.B,C,D;</b> <b>7.I.E; 7.II.C</b>	Evidence of education in risk management, infection control and safety policies/processes within first 30 days of employment, annually thereafter, and when there is an identified need.													
<b>7.I.G.1</b>	Evidence of education in sharps injury prevention, provided within first 30 days of employment, annually thereafter, and when there is an identified need.													

The guidelines or recommendations suggested here are not rules, do not constitute legal advice, and do not ensure a successful outcome. The ultimate decision regarding the appropriateness of any treatment must be made by each healthcare provider in light of all circumstances prevailing in the individual situation and in accordance with the laws of the jurisdiction in which the care is rendered.