

BACKGROUND CHECKS/OIG EXCLUSION LIST

Policy & Procedure

Policy:

It is the policy of this facility to perform background checks on all prospective employees including but not limited to querying the Office of the Inspector General (OIG) Exclusion List. No applicant will be considered for employment if their background check does not come back clear (no relevant criminal record) or if their name is identified on the OIG exclusion List.

Procedure:

1. Applicants who meet the basic requirements for the specified job being applied for shall be granted a formal interview with the Director of Human Resources or the appropriate department manager.
2. Candidates who have been interviewed and considered able to meet the expectations outlined in the formal job description will be asked to sign a consent for background checks.
3. It is the responsibility of the interviewer to disclose each background check that will be performed as outlined on the consent form.
4. If a candidate for employment refuses to sign the consent for background checks the individual will not be considered for employment and the interview process will be terminated.
5. Documentation of refusal will be attached to the individual's application and will be maintained in a closed file in the Human Resource Department.
6. Candidates who agree to have background checks performed and have signed the appropriate consent form remain eligible to be considered for potential employment pending the results of the background checks.
7. It is the responsibility of the candidate to obtain fingerprints if required by state and/or federal regulations.
8. Candidates who meet all facility requirements, including background checks, may be contacted to begin the orientation process.
9. Candidates who meet all facility requirements but whose background check(s) are not clear may be contacted and allowed the opportunity to address any errors that may have occurred. If verification in writing from the appropriate entity expunging the applicants name from the list is not obtained within two (2) weeks the candidate will no longer be considered for employment.

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This policy and procedure is not intended to replace the informed judgment of individual physicians, nurses or other clinicians nor is it intended as a statement of prevailing community standards or minimum standards of practice. It is a suggested method and technique for achieving optimal health care, not a minimum standard below which residents necessarily would be placed at risk.

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10. Documentation of each background check will be placed in the employee personnel file and maintained according to state specific law.
11. Employees will have background checks performed on an annual calendar year basis throughout their employment.
12. In the event an employee's background check result is inconsistent with facility policy requiring clear background checks, the employee will be suspended until appropriate documentation is provided by the employee clearing the employee's background or for a maximum of two (2) weeks. If said documentation is not provided within two (2) weeks the employee will be terminated.
13. A summary report of all background checks performed will be submitted to the quarterly Quality Assurance Committee for review and recommendations.

I have read, understand and agree to adhere to the requirements outlined in this policy and procedure.

Administrator Signature: _____ Date: _____

Medical Director Signature: _____ Date: _____

Review Dates: _____

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