PURPOSE: To ensure compliance with state licensure, registration and/or certification requirements of health care personnel within the Texas Department of Criminal Justice.

POLICY:

I. All Correctional Managed Health Care employees, contractors, or agents whose positions so require, by virtue of their job description, license and/or credentials, must at all times meet the appropriate requirements.

II. Each applicant submits a copy of his/her license(s), registration and/or certification, or letter of verification from the licensing or certifying agency, to the hiring authority when interviewed prior to hiring.

III. The hiring authority is responsible for developing and maintaining a written plan for verifying credentials prior to employment. The credentialing plan shall include at a minimum:

   A. Clear assignment of responsibility for review and verification of credentials;

   B. Placement of documentation of the verification process in the employee’s file (consisting of a minimum of a checklist documenting the credentials to be verified, the date of verification and the person verifying them);

   C. As applicable, a review and verification of:
      1. Professional licenses and/or credentials
      2. References listed in the application
      3. Graduation status from an appropriate school
      4. Completion of residency program

IV. Each employee whose position requires a license and/or credentials is thereafter responsible for keeping credentials current. Employees whose position requires a license and/or credentials are not eligible for employment without proof of current licensure or credentials. Employees who do not maintain current licensure are ineligible for employment until current licensure is verified.

V. Each hiring authority is responsible for monitoring the credentials of its staff and the staff of its subcontractors to ensure they are current. Statements published by the licensing or certifying authorities (e.g., the Texas Medical Board, the Texas Board of Nursing, or the Department of Aging and Disability Services) should be compared with listings of current employees to ensure notice is received of any licensure restrictions. Any licensure or certification discrepancies or restrictions should be immediately reported to the applicable university Medical Director and TDCJ Division Director of Health Services. Employees operating under restricted licenses shall be closely monitored by management staff to ensure compliance with any restrictions.
VI. Each university will establish procedures for notification of license expiration.

Reference: ACA Standard 4-4382, Personnel Qualifications (Mandatory)