

SERENITY BEHAVIORAL HEALTH SYSTEMS

SUBJECT:	CREDENTIALING
POLICY NUMBER:	HR-21
EFFECTIVE DATE:	June 1997
SUPERSEDES:	N/A
LAST REVISION DATE:	August 2008

POLICY:

It is the policy of Serenity Behavioral Health Systems (SBHS) to obtain, verify and assess the qualifications of direct care staff providing client care services. Credentials will be periodically re-evaluated by the Credentialing and Privileging Committee (C&P).

PROCEDURE:

I. GENERAL GUIDELINES:

- A. The Human Resources Department is responsible for obtaining primary verification of all direct care providers' licensure, certification, training and/or experience authorized by using Request for Credentialing Information (SBHS Form 349).
 - 1. Upon acceptance of the offered position and during the initial employment processing, the employee will sign a Request for Transcript SBHS Form 864 to allow SBHS to request the transcript from the school, college or university from which they graduated and was granted a degree or diploma.
 - 2. The Human Resources Department must directly receive the above-required transcript. Any cost incurred for the official transcript is the responsibility of the employee, either through direct billing to the employee or through payroll deduction.
 - 3. If the employee is licensed or credentialed, they are to present their current license or certificate to the Human Resources Department, who will make copies. Copies are to be maintained in the Credentialing File, Field File and the Licensure Notebook. The Human Resources Department is responsible for direct verification of all licensed staff.
 - 4. Licensed/certified staff must complete all managed care contracts as deemed necessary by SBHS.
 - 5. Any current employee who has not met the above criteria must comply immediately. Failure to comply with the policies and procedures of credentialing will result in disciplinary action up to and including dismissal.

- B. A minimum of two references is required that have been obtained by the interviewing supervisor or their designee and attached to the Personnel Action Request.

SUBJECT: Credentialing

Policy #HR-21

Page 2 of 3

- C. Credentials will include verification of licensure or certifications prior to employment and background checks by fingerprinting staff through the Georgia Crime Information Center.
- D. The Credentialing and Privileging Committee will review, for approval, applicable employees annually for appropriate training and clinical supervision.
- E. Licensed Independent Practitioners must reapply for clinical privileges every two (2) years. Applications will be reviewed by the C&P Committee for approval.
- F. The Credentialing and Privileging Committee reserves the right to review the continued credentialed status of staff at any time.

ATTACHMENT:

- I. [Request for Credentialing Information SBHS Form 349](#)
- II. [Transcript Request SBHS Form 864](#)

APPROVAL SECTION:

Chief Executive Officer

Date

Committee Chairperson

Date

RESCISSION SECTION:

Chief Executive Officer

Date

**SUBJECT: Credentialing
Policy #HR-21
Page 3 of 3**

REVIEW SECTION:

Committee Chairperson

Date

Committee Chairperson

Date

Committee Chairperson

Date