

## EMPLOYEE FILES QUARTERLY AUDIT

**Purpose** To outline the policy of employee files quarterly auditing in the Laboratory Department.

**Policy** Quarterly audits of employee files will be conducted to ensure that all required documents to fully meet compliance with any regulating, accrediting agencies, and other required KP LAMC documents, are contained in each employee file. Laboratory Operations Director or Assistant Laboratory Operations Director is responsible for completing the audits.

Any non-compliance will be addressed to the respective Laboratory Manager for immediate remediation. Thereafter, any further non-compliance will be reported to the Laboratory Operations Director.

**Scope of Employee File Audit** Employee File Audit will be assessed with the following documents as listed on the table below.

Document Name	Who	Frequency
Application Form/ Resume	All	Initial
Job Description	All	Initial
New/Transfer Employee Medical Center Orientation Checklist	All	Initial
New/Transfer Employee Department Orientation Checklist	All	Initial
Job Description	All	Initial
Confidentiality	All	Initial
Child Abuse	All	Initial
Elder Abuse	All	Initial
Laboratory Compliance Training	All	Initial
Annual Compliance Training	All	Yearly for the last 3 years
Yearly Employee Safety training	All	Yearly for the last 3 yrs.
Yearly Chemical Hygiene training	All	Yearly for the last 3 years
System Training Form	All	Initial
Department Specific Training Checklist	All	Initial

*Continued on next page*

## EMPLOYEE FILES QUARTERLY AUDIT, Continued

### Scope of Employee File Audit (continued)

Document Name	Who	Frequency
Yearly Training Summary	All	Yearly for the last 3 years
6 – Month Competency Evaluation	CLS	At 6 month during the first year of patient testing
Yearly Competency Summary	All	Yearly for the last 3 years
Performance Evaluation	All	Yearly for the last 3 years
License/Certification Verification	CLS/Lab Asst.	<ul style="list-style-type: none"> <li>• Initial-prior to start date</li> <li>• Immediately prior to expiration</li> <li>• Must be current</li> </ul>

### Controlled Document(s)

The table below lists the controlled document(s) for this policy.

Document Number	Document Name
LGM 6006F	Employee Files Quarterly Audit Form

*End of page*

## EMPLOYEE FILES QUARTERLY AUDIT, Continued

### HISTORY PAGE

Change type: New, major, minor	Changes made to SOP - describe	Signature responsible person/date	Laboratory Director review/date	Laboratory Manager review/date	Date change implemented
New			3/30/05	JAN 3/20/05	03/23/05
Minor	added annual compliance lab compliance, license cert. verification, chemical hygiene, 6 month competency.	} 6/7/11	} 6/8/11	} 6/8/11	} 6/27/11
	Corrected the contracted document # for the form				
Minor	Added personnel responsible for completing audits.	8/22/15	5/22/15	5/22/15	

# EMPLOYEE FILES QUARTERLY AUDIT

Supervisor: \_\_\_\_\_

*The following is a list of your employees with missing required document(s) in their employee file.  
Please state your plan of action to ensure compliance.*

Date: \_\_\_\_\_

Quarter: \_\_\_\_\_

Employee Name	Application/Resume	Job Description	Employee Orientation Checklist (Med.Ctr.& Dept.)	Confidentiality	Child Abuse	Elder Abuse	Annual Compliance	Laboratory Compliance	Yearly Chemical Hygiene	Yearly Safety	System Training	Dept Initial Training Checklist	Yearly Competency/Training Summary	6 - Month Competency Evaluation If Applicable	Yearly Competency	Performance Eval	License/Cert. Verification

**Action Plan:**