

Florida DCF 65D-30 personnel files

Personnel file checklist

Reviewed 2026-10-13. Every line cites the rule it comes from. This checklist is general information, not legal advice.

IDENTITY AND ROLE

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| ☐ Current job description stating the minimum qualifications for the position
All staff At hire; update whenever the role, title or duties change | Fla. Admin. Code R.
65D-30.004(4)(a)1.
All DCF-licensed providers |
| ☐ Documentation that this person meets the minimum qualifications in that job description
All staff At hire | Fla. Admin. Code R.
65D-30.004(4)(a)1.
All DCF-licensed providers |
| ☐ Employment application or resume (either satisfies the rule)
All staff At hire | Fla. Admin. Code R.
65D-30.004(4)(a)2.
All DCF-licensed providers |

PERFORMANCE

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| ☐ Annual performance appraisal
All staff Annually | Fla. Admin. Code R.
65D-30.004(4)(a)3.
All DCF-licensed providers |
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ORIENTATION

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| ☐ Document signed and dated by the employee showing they received new staff orientation and understand both the personnel policies and the program's operating policies and procedures
All staff At hire | Fla. Admin. Code R.
65D-30.004(4)(a)4.
All DCF-licensed providers |
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CREDENTIALS

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| ☐ Verified or certified copy of degrees, licenses or certificates (the rule does not define "verified or certified")
Each employee who holds one At hire; refresh at each license or certification renewal | Fla. Admin. Code R.
65D-30.004(4)(a)5.
All DCF-licensed providers; "verified or certified" is undefined in the rule, so primary-source verification is recommended practice |
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BACKGROUND SCREENING

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| ☐ Documentation of the employee screening required by paragraph (4)(b)
Staff subject to screening Before hire or appointment, and again at each rescreen | Fla. Admin. Code R.
65D-30.004(4)(a)6.
All DCF-licensed providers |
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TRAINING

☐	Documentation of required staff training All staff On completion of each required training	Fla. Admin. Code R. 65D-30.004(4)(a)7. All DCF-licensed providers; DOC/DMS inmate substance abuse programs and DJJ commitment programs and detention facilities are exempt from this subparagraph only, per 65D-30.004(4)(a)8.
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BACKGROUND SCREENING

☐	Attestation of Good Moral Character, form CF 1649 (June 2025) Individuals subject to level 2 background screening At the initial screening and with every rescreening	Fla. Admin. Code R. 65D-30.004(4)(b)3. All DCF-licensed providers; DOC/DMS inmate substance abuse programs and DJJ commitment programs and detention facilities are exempt from subparagraph 3. per (4)(b)4., unless personnel have direct contact with unmarried inmates under 18 or with intellectually disabled inmates.
☐	Level 2 eligibility determination, role-based route All owners, directors, chief financial officers and clinical supervisors Before the person has contact with any vulnerable person in the screened role (s. 435.06(2)(a), F.S.); hire for training and orientation only is permitted before results arrive (s. 435.06(2)(d), F.S.). The cited subparagraph itself sets no deadline, and s. 397.4073(1)(h) blocks a regular license without proof of submission.	s. 397.4073(1)(a)1., F.S.; s. 435.06(2)(a) and (2)(d), F.S.; s. 397.4073(1)(h), F.S. All DCF-licensed providers; inmate substance abuse programs operated directly or under contract with the Department of Corrections are exempt
☐	Level 2 eligibility determination, direct-contact-population route Personnel with direct contact with children receiving services, or with adults who are developmentally disabled receiving services Before direct contact	s. 397.4073(1)(a)2., F.S. DCF-licensed providers serving those populations
☐	Peer specialist screening conducted under the s. 397.417(4) standard, not the generic level 2 disqualification analysis Peer specialists with direct contact with individuals receiving services Condition of initial and continued employment	s. 397.4073(1)(a)3., F.S.; Fla. Admin. Code R. 65D-30.004(4)(b)2. All DCF-licensed providers using peer specialists
☐	Rescreening result Everyone subject to screening Within five years of the last screening results (65D-30.004(4)(b)3.) or five years from licensure, employment or entry into the contract (s. 408.809(2), F.S.), whichever falls first. The two clocks are measured differently; track the earlier one.	Fla. Admin. Code R. 65D-30.004(4)(b)3.; s. 408.809(2), F.S. All DCF-licensed providers; DOC/DMS inmate substance abuse programs and DJJ commitment programs and detention facilities are exempt from subparagraph 3. per (4)(b)4., unless personnel have direct contact with unmarried inmates under 18 or with intellectually disabled inmates.
☐	Dated break-in-service log for PRN, per-diem and returning staff, with the Clearinghouse record showing whether the person's prints are enrolled in the FBI national retained print arrest notification program Any screened person returning after more than 90 days out of a position that requires screening by a specified agency Check before the return shift; a new national screening is required unless the prints are already enrolled in the FBI national retained print arrest notification program	s. 435.12(2)(b) and (2)(b)1., F.S. All DCF-licensed providers
☐	Level 2 screening for every owner, and a screening record for any change in ownership of less than a majority interest All owners Continuously; a change in ownership of less than a majority interest is its own screening trigger, and an acquisition of a majority of ownership requires a new application for each site affected	Fla. Admin. Code R. 65D-30.0034(2) All DCF-licensed providers

☐	Signed perjury attestation of meeting the chapter 435 qualification requirements, including the agreement to inform the employer immediately if arrested for a disqualifying offense Screened staff At hire; refresh at each rescreen	s. 435.05(2), F.S. All DCF-licensed providers
☐	Dated record of when screening information was received from the employee and when it was submitted Screened staff Submission within 5 working days after receiving the information	s. 435.05(1)(c), F.S. All DCF-licensed providers
☐	Five-year address history captured at screening, supporting the multi-state sexual predator and sexual offender registry searches Screened staff At each level 2 screening	s. 435.04(1)(a), F.S. All DCF-licensed providers; recommended practice, not a stated file requirement. Section 435.04(1)(a) puts the registry search inside the investigation and prescribes no employer residency record or form.
☐	Written notice to the employee stating the specific record that indicates noncompliance Any staff member with disqualifying screening information On reasonable cause to believe grounds exist to deny or terminate	s. 435.06(1), F.S. All DCF-licensed providers
☐	Exemption from disqualification request and the Department's written determination, with evidence of elapsed time and payment of all court-ordered amounts Disqualified staff Request within 30 days after notice of disqualification; DCF grants or denies within 60 days of a complete application	Fla. Admin. Code R. 65D-30.004(4)(c); s. 397.4073(1)(f), F.S.; s. 435.07(1)(b), F.S. All DCF-licensed providers
☐	Dated removal record and a copy of the notification to DCF Any screened staff member arrested for a disqualifying offense Remove immediately; notify DCF within 2 days after the removal, excluding weekends and holidays	s. 435.06(2)(b), F.S.; s. 397.415(1)(d)5., F.S. All DCF-licensed providers
☐	Documented orientation-only status with the start date, the no-direct-contact-with-vulnerable-persons restriction (minors and vulnerable adults as defined in s. 435.02(5), F.S.), and the date the restriction was lifted Anyone hired into a screened position before screening completes During the pre-clearance period	s. 435.06(2)(d), F.S.; s. 435.02(5), F.S. All DCF-licensed providers; the written record is recommended practice
☐	Volunteer hours record and the named supervising staff member, supporting the screening exemption Volunteers assisting intermittently for fewer than 40 hours per month under direct and constant supervision Maintained month to month while the exemption is relied on	s. 397.4073(1)(c), F.S. Recommended practice, not law; the exemption is statutory but no log format is prescribed
☐	Employment history verification and reference checks, with evidence the chief executive officer or designee assessed them Employees with direct contact with children receiving services, or with adults who are intellectually or developmentally disabled receiving services At hire	Fla. Admin. Code R. 65D-30.004(4)(d); s. 397.4073(2), F.S. DCF-licensed providers serving those populations. The rule says "intellectually disabled" and the statute says "developmentally disabled"; treat either as triggering the duty and do not rely on the difference.
☐	Clearinghouse roster reconciled against the actual staff list, with a dated log of status changes reported All screened staff Initial status and any change in status reported within 5 business days	s. 435.12(2)(c), F.S. All DCF-licensed providers

TRAINING

☐	Two-hour educational course on HIV/AIDS All employees Within 6 months of the hiring date; the course itself is one-time under s. 381.0035(1), F.S.	Fla. Admin. Code R. 65D-30.0046(1)(c)1.; s. 381.0035(1)-(2), F.S. All DCF-licensed providers; s. 381.0035(4) does not apply the section to an employee subject to s. 456.033, F.S.
☐	Overdose prevention training covering risk factors, overdose recognition and response, and naloxone All employees Within 6 months of hire; renewed biennially	Fla. Admin. Code R. 65D-30.0046(1)(c)2. All DCF-licensed providers
☐	Written overdose prevention plan with evidence that all staff have a working knowledge of it, plus, if you keep an emergency overdose prevention kit, a plan to train staff in the prescribed use and the availability of the kit for use during all program hours of operation All staff Plan maintained continuously; working knowledge evidenced at orientation and on any change to the plan	Fla. Admin. Code R. 65D-30.004(22)(a) and (22)(b) The plan and working-knowledge duty attach to licensed providers of clinical treatment services; the kit training plan at (22)(b) is not limited that way. Treating (22)(b) as requiring a trained person on every shift is a conservative reading, not rule text.
☐	Training in incident reporting procedures, the affirmative duty requirements and protections of Chapter 415, F.S., and Title V of the Americans with Disabilities Act All employees Within 6 months of hire	Fla. Admin. Code R. 65D-30.0046(1)(c)3. All DCF-licensed providers
☐	Education of staff in the importance of the grievance system and individual rights Staff Not stated in the rule; set your own interval in policy and meet it	Fla. Admin. Code R. 65D-30.0045(1)(a)5. All DCF-licensed providers; distinct from the annual "rights of individuals served" topic at 65D-30.0046(1)(d)4.
☐	Two hours of verbal de-escalation training in the specific technique named in the provider's written policy, with proof of completion producible to DCF Direct care staff Within 6 months of hire, then two hours annually	Fla. Admin. Code R. 65D-30.0046(1)(c)4.; 65D-30.004(12) All components except universal direct prevention services
☐	Training in nursing support functions, dated before the first shift performing the function Staff performing nursing support functions Prior to performing the function; no grace period	Fla. Admin. Code R. 65D-30.0046(1)(c)5. Any DCF-licensed provider using such staff
☐	Copy of the valid CPR certificate and first aid certificate, filed in the personnel record All direct care staff Within 6 months of hire; certification maintained continuously, on the certifying body's own expiry cycle	Fla. Admin. Code R. 65D-30.0046(1)(c)6. All DCF-licensed providers
☐	Minimum of 10 hours of documented training per year related to duties and responsibilities All staff and volunteers who provide direct care or prevention services Annually	Fla. Admin. Code R. 65D-30.0046(1)(d) All DCF-licensed providers
☐	The five named annual topics: infection prevention and control in inpatient and residential settings; fire prevention, life safety and disaster preparedness; safety awareness; rights of individuals served; and 42 CFR Part 2 with ss. 397.334(10), 397.501(7) and 397.752, F.S. Staff and volunteers providing direct care or prevention services Annually	Fla. Admin. Code R. 65D-30.0046(1)(d)1.-5. All DCF-licensed providers
☐	Twelve hours of competency-based training related to substance use disorder treatment and recovery New clinical staff who work at least 20 hours per week Within the first year of employment	Fla. Admin. Code R. 65D-30.0046(1)(f) All DCF-licensed providers

☐	Twelve hours of basic training in science-based prevention New staff providing prevention services Within the first year of employment, in addition to the orientation and annual training	Fla. Admin. Code R. 65D-30.0046(1)(g) Providers delivering prevention services
☐	At least 2.5 hours of medication training, conducted only by an LPN, RN or APRN, covering the ten subjects with step-by-step procedures Personnel who will supervise the self-administration of medication Before the staff member first supervises self-administration	Fla. Admin. Code R. 65D-30.0046(1)(h) and (1)(i)1.-10. Any DCF-licensed provider whose staff supervise self-administration
☐	Signed competency certification from the nurse trainer, with proof of training documented in the personnel file Unlicensed staff who supervise self-administration of medication Prior to implementing the supervision of self-administration	Fla. Admin. Code R. 65D-30.0046(1)(h) Any DCF-licensed provider whose staff supervise self-administration
☐	Prior-employer training certificates plus evidence that the trainer or organization was qualified New hires relying on training received before employment At hire; the training must have been completed during the year prior to employment	Fla. Admin. Code R. 65D-30.0046(1)(e) All DCF-licensed providers; credits the (1)(c) and (1)(d) requirements only
☐	Training documentation showing date, duration, topic, names of participants, and name of the trainer or training organization All staff Every required training event	Fla. Admin. Code R. 65D-30.0046(1)(b) All DCF-licensed providers; the five elements must appear in the documentation as a whole, so a vendor certificate missing duration or trainer name has to be backed by a log entry that supplies them

SUPERVISION

☐	Clinical supervision log recording the date, duration and content of each supervisory session, for staff in each licensed component All licensed and unlicensed staff Each supervisory session. The rule sets no minimum interval, so set one in your personnel policies and meet it; DCF will hold you to the standard you wrote.	Fla. Admin. Code R. 65D-30.0046(2) All DCF-licensed providers
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CREDENTIALS

☐	Evidence of the qualified professional route relied on: a physician or physician assistant licensed under ch. 458 or 459; a professional licensed under ch. 490 or 491; an APRN licensed under part I of ch. 464; or certification through a department-recognized process plus at least a bachelor's degree Qualified professionals At hire and continuously while the person functions as a qualified professional	s. 397.311(36), F.S. All DCF-licensed providers; confirm the certifying organization appears on the current DCF recognized list under 65D-30.0031(2)(a)
☐	Out-of-state certification copy with the one-year Florida certification due date tracked Persons certified in another state at the time of employment who perform qualified professional functions Florida certification requirements met no later than 1 year after the date of employment	s. 397.311(36), F.S. All DCF-licensed providers
☐	Degree from an accredited university or college with a major in counseling, social work, psychology, nursing, rehabilitation, special education, health education, or a related human services field Bachelor's or master's degree level clinical staff At hire	Fla. Admin. Code R. 65D-30.0046(4)(b) All DCF-licensed providers; "related human services field" is undefined, so document your reasoning at hire if you rely on it

☐ Peer specialist certification from a Department-recognized credentialing organization, or dated evidence of working toward certification with the one-year deadline and the named supervisor Peer specialists At hire; certification within one year if hired uncertified	Fla. Admin. Code R. 65D-30.0046(5)(a); s. 397.417(3)(d), F.S. The rule's certification mandate is written for Department-funded peer support services; s. 397.417 is broader. Confirm the credentialing organization appears on the current DCF recognized list under 65D-30.0031(2)(c).
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RENEWAL APPLICATION

☐ Competency-and-ability packet for the applicant, chief executive officer, chief financial officers and clinical supervisors: education, previous employment history, and list of references Applicant, CEO, CFO(s), clinical supervisors With a new application, and with the licensure application whenever there is a change in chief executive officer, chief financial officer or clinical supervisor; kept available for review at the facility	Fla. Admin. Code R. 65D-30.0036(1)(c) and (2)(a) All DCF-licensed providers
☐ Confirmation of completion of basic HIV/AIDS education requirements pursuant to Section 381.0035, F.S. The provider, aggregated across employees With every renewal application	Fla. Admin. Code R. 65D-30.0036(1)(f); 65D-30.004(10) All DCF-licensed providers; 65D-30.004(10) separately requires that all infection prevention and control educational activities be documented
☐ Current Drug Enforcement Administration registration for every physician All physicians With every licensure application; renewed by the provider prior to the expiration date if it lapses during the license period	Fla. Admin. Code R. 65D-30.0036(1)(h) and (2)(a) All DCF-licensed providers using physicians
☐ Telehealth policies and procedures, plus the detailed equipment and implementation-plan procedures and the technical written policies meeting the HIPAA privacy regulations and, where applicable, the 45 CFR 164.312 safeguards The provider, if any service is delivered by telehealth With the licensure application; policies maintained continuously	Fla. Admin. Code R. 65D-30.0036(1)(g); 65D-30.004(20)(a) Any DCF-licensed provider delivering services by telehealth
☐ Review of every document attached to the application for expiry during the licensure period The provider Renewed before the expiration date, not at the next renewal	Fla. Admin. Code R. 65D-30.0036(2)(a) All DCF-licensed providers
☐ Medical director caseload apportionment calculation, applying the percentage of the director's time dedicated to each service component to the Department's methodology, with supporting documentation producible on request Medical director Submitted with the licensure application and updated at every renewal	Fla. Admin. Code R. 65D-30.004(6)(d) and (6)(e) Providers licensed for the components identified in 65D-30.004(6), and any provider licensed for multiple components

AGENCY-LEVEL RECORD

☐ Staff development plan, signed and dated, reviewed at least annually through the quality assurance program, with at least one staff member assigned responsibility for implementation Agency-level, cross-referenced from each file Reviewed at least annually	Fla. Admin. Code R. 65D-30.0046(1) and (1)(a) All DCF-licensed providers
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☐ Written personnel policies addressing recruitment and selection, promotion and termination, code of ethical conduct, sexual harassment, confidentiality of individual records, attendance and leave, employee grievance, non-discrimination, abuse reporting procedures, and orientation to universal infection control procedures Agency-level Maintained continuously	Fla. Admin. Code R. 65D-30.004(4) All DCF-licensed providers
☐ Code of ethical conduct containing the express prohibition on sexual activity with individuals receiving services for a minimum of two years after the last professional contact Employees and volunteers Maintained continuously; acknowledged at onboarding as a matter of practice	Fla. Admin. Code R. 65D-30.004(4) All DCF-licensed providers; the per-person signature is recommended practice, not rule text
☐ Drug-free workplace policy for employees and prospective employees Agency-level Maintained continuously	Fla. Admin. Code R. 65D-30.004(4) All DCF-licensed providers; the rule requires the policy, not a testing program
☐ Operating procedures that define the qualifications and experience required for the position of chief executive officer; governing board documentation that the chief executive officer's background screening is complete with no disqualifying offense; and a copy of the written notice to the regional office within 24 hours of a new CEO appointment Chief executive officer Operating procedures maintained continuously; the rest on appointment	Fla. Admin. Code R. 65D-30.004(3)(c) All DCF-licensed providers; DOC/DMS inmate programs and DJJ programs are exempt from subsection (3) per (3)(d)
☐ Medical director designation with responsibilities clearly described in writing, covering the four items at (6)(a); written notice to the regional office within 24 hours of any change, with proof of a current Florida license free of administrative action Medical director On designation and on every change	Fla. Admin. Code R. 65D-30.004(6), (6)(a) and (6)(f) Addictions receiving facilities, detoxification, intensive inpatient treatment, residential treatment, and methadone or medication-assisted treatment for opioid use disorder
☐ Signed written medical consultant agreement with a physician, physician assistant or APRN, plus current Florida license verification Medical consultant Maintained continuously; verify on any change of consultant	Fla. Admin. Code R. 65D-30.004(6)(g); 65D-30.002(38) Providers operating treatment components not listed in 65D-30.004(6), for example outpatient, intensive outpatient, day or night treatment and aftercare
☐ Written medical protocol from each physician working with the provider, carrying the chief executive officer's and medical director's written approval before implementation, and addressing delegation of medical functions to licensed practitioners used as clinical staff, issuing orders, signing and countersigning results of physical health assessments, and documented procedures for medication administration within scope of practice Each physician working with the provider, plus the CEO and medical director Before the protocol is implemented	Fla. Admin. Code R. 65D-30.004(7)(a) and (7)(b)1.-4. Components identified in 65D-30.004(6); DOC/DMS and DJJ programs exempt per (7)(f)
☐ Medical protocols reviewed and approved annually by the medical director and the chief executive officer Medical director and chief executive officer Annually	Fla. Admin. Code R. 65D-30.004(7)(d) Components identified in 65D-30.004(6); DOC/DMS and DJJ programs exempt from subsection (7) per (7)(f). A dated review-and-approval signature page is the recommended evidence; the rule requires review and approval, not a signature.

☐ Written exposure control plan applying to all staff, volunteers and individuals receiving services, signed and dated by the medical director or consulting physician All staff and volunteers Initially approved, then reviewed annually	Fla. Admin. Code R. 65D-30.004(9)(a)1. The nine components named in 65D-30.004(9), including plain outpatient treatment; DOC/DMS and DJJ programs exempt per (9)(c)
☐ Prescription medication policies reviewed, signed and dated annually by a state-licensed consultant pharmacist; medical director approval is required on implementation, with no interval stated in the rule Consultant pharmacist and medical director Annually (pharmacist review and signature); on implementation and on material change (medical director approval)	Fla. Admin. Code R. 65D-30.004(8) Providers using prescription medication; DOC/DMS and DJJ programs exempt per (8)(b)
☐ Written policies and procedures for submitting critical incidents into the Department's statewide designated electronic system specific to critical incident reporting Agency-level Maintained continuously	Fla. Admin. Code R. 65D-30.004(17)(a) All DCF-licensed providers
☐ Active referral log of each individual referred to a recovery residence, carrying the individual's name, the name and address of the certified recovery residence, the signature of the employee making the referral, and the date of the referral Employees making recovery residence referrals Maintained continuously and made available for Department review	Fla. Admin. Code R. 65D-30.004(19)(a) All DCF-licensed providers; service providers under contract with the managing entities are exempt from this requirement
☐ Written disaster preparedness plan reviewed, signed and dated by the chief executive officer at least annually Chief executive officer At least annually	Fla. Admin. Code R. 65D-30.0047(7) All DCF-licensed providers subject to the facility standards
☐ Signed annual attestation to the agency, under penalty of perjury, of compliance with chapter 435 The provider as employer Annually or at the time of license renewal	s. 435.05(3), F.S. All DCF-licensed providers; distinct from the per-individual CF 1649
☐ Printed copy of the most recent version of the license, displayed in the facility in a conspicuous, publicly accessible place The provider Whenever DCF issues a new or amended electronic license	Fla. Admin. Code R. 65D-30.003(1)(b); 65D-30.0032(1) All DCF-licensed providers

COMPONENT-SPECIFIC

☐ Documentation that any screening not completed by a qualified professional was countersigned and dated by one, and that any psychosocial assessment not initially completed by a qualified professional was reviewed, countersigned and dated by one within 10 calendar days Qualified professionals and clinical staff Each screening; within 10 calendar days of completion of the psychosocial assessment (30 calendar days for DOC/DMS inmate substance abuse programs)	Fla. Admin. Code R. 65D-30.0042(1) and (2)(b)3. Screening countersignature (65D-30.0042(1)): the ten components named there, including intervention and medication-assisted treatment generally. Psychosocial countersignature (65D-30.0042(2)(b)3.): nine components, excluding intervention and narrowed to methadone medication-assisted treatment. DJJ commitment programs and detention facilities are exempt from subsection (2).
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☐ Treatment plan countersigned and dated by a qualified professional where the plan was not completed by one; treatment plan reviews countersigned and dated by a qualified professional where the review was not completed by one; documentation of appropriateness of level of care countersigned by the qualified professional or clinical supervisor; and single-event progress notes carrying the credentials of the person who signed them Qualified professionals, clinical supervisors and clinical staff Within 10 calendar days of completion of the treatment plan (30 calendar days for DOC/DMS inmate programs); within five calendar days of each treatment plan review; at each level-of-care determination; at each single-event progress note	Fla. Admin. Code R. 65D-30.0044(1)(a), (1)(b) and (1)(c); 65D-30.0042(2)(b)o. All DCF-licensed providers delivering the components those rules reach
☐ License documentation for each staff category performing or countersigning the in-person nursing physical screen (LPN, RN, APRN, physician assistant or physician; an LPN's screen must be countersigned) Nursing staff, physician assistants and physicians Each person considered for placement	Fla. Admin. Code R. 65D-30.0042(2)(a)1. Addictions receiving facilities, detoxification and intensive inpatient treatment. DOC/DMS inmate substance abuse programs are exempt from 65D-30.0042(2)(a); DJJ commitment programs and detention facilities are exempt from subsection (2).
☐ Medication observation record signed and dated by the personnel who witnessed the self-administration, recording date, time and dosage in accordance with the prescription Staff who supervise self-administration of medication At each instance of supervised self-administration	Fla. Admin. Code R. 65D-30.004(7)(c)4. Components identified in 65D-30.004(6); DOC/DMS and DJJ programs exempt from subsection (7) per (7)(f)
☐ Consultant pharmacist records: quarterly face-to-face meeting minutes signed and dated by both the consultant pharmacist and the medical director; at least semi-annual written compliance report signed and dated by the consultant pharmacist and submitted to the medical director; and a visit log signed and dated at each visit, with visits at least every two weeks unless the state Board of Pharmacy stipulates otherwise Consultant pharmacist and medical director Quarterly, semi-annually, and at least every two weeks; plus notice to the Board of Pharmacy within 10 days of any change of consultant pharmacist, copied to the Substance Abuse and Mental Health Program Office and the State Opioid Treatment Authority (SOTA)	Fla. Admin. Code R. 65D-30.0142(1)(c)1.d.-f. and (1)(c)2. Methadone medication-assisted treatment for opioid use disorders
☐ Documentation of federal and state approval for any staff member on a maintenance protocol, plus a duty restriction removing access to and responsibility for handling methadone or other opioid treatment medication Full-time, part-time and volunteer staff Before employing or retaining such a staff member	Fla. Admin. Code R. 65D-30.0142(2)(m) Methadone medication-assisted treatment for opioid use disorders

OVERLAY: ALL US EMPLOYERS

☐ Form I-9, section 1 signed by the employee at the time of hire and section 2 completed and signed by the employer within three business days of hire Employees (not unpaid volunteers or bona fide independent contractors) Section 1 at hire; section 2 within 3 business days, or both at hire if employment will last under 3 business days	8 CFR 274a.2(b)(1)(i)(A), (b)(1)(ii)(A)-(B), (b)(1)(iii) All US employers; storing I-9s in a separate binder rather than inside the personnel file is recommended practice, not law
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OVERLAY: ALL FLORIDA EMPLOYERS

☐ Employment eligibility verification record, retained at least 3 years. A private employer with 25 or more employees must run the verification through E-Verify, not the Form I-9 alone; if E-Verify is unavailable for the full 3 business days, use the Form I-9 and document the outage Employees filling permanent positions (the statute excludes independent contractors) Verification within 3 business days after the first day the employee begins working for pay	s. 448.095(2)(a), (2)(b)2., (2)(c) and (2)(d), F.S. All Florida employers; the E-Verify duty applies to private employers with 25 or more employees. General employment law, not a DCF licensing requirement.
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OVERLAY: ALL US EMPLOYERS

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| ☐ Hepatitis B vaccination offer record and vaccination dates, or the signed OSHA Appendix A declination, held in the confidential employee medical file
Employees with occupational exposure to blood or other potentially infectious materials Within 10 working days of initial assignment, after bloodborne pathogens training; re-offer whenever a declining employee later accepts | 29 CFR 1910.1030(f)(1)(ii)(A), (f)(2)(i)-(iv)
Private-sector employers with exposed employees; Florida has no OSHA State Plan, so state and local government employees are outside OSHA coverage |
| ☐ Bloodborne pathogens training record listing dates, contents, trainer names and qualifications, and attendee names and job titles, kept in the general training file
Employees with occupational exposure At initial assignment, at least annually, and within one year of the previous training; plus on task change | 29 CFR 1910.1030(g)(2)(ii)(A)-(B), (g)(2)(iv)-(v), (h)(2)(i)-(ii)
Private-sector employers with exposed employees; training records retained 3 years, exposure medical records for duration of employment plus 30 years through 29 CFR 1910.1020 |

OVERLAY: HIPAA AND 42 CFR PART 2

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| ☐ Documentation that privacy training was provided, and a record of any sanction actually applied
Workforce members At each training event; at each sanction | 45 CFR 164.530(b)(2)(ii), (e)(1)-(2), (j)(2)
HIPAA covered entities; reaches part 2 programs that are not covered entities for breach-notification purposes via 42 CFR 2.16(b) and 45 CFR 164.414(a) |
| ☐ Signed Qualified Service Organization Agreement for each vendor that receives patient records (billing, IT, outside counsel, contract laboratory, medical staffing), held in the vendor file rather than a personnel file
Contractors who are not workforce Before the contractor receives any patient record; review on renewal | 42 CFR 2.11 (definition of qualified service organization), 42 CFR 2.12(c)(4)
Part 2 programs; a contracted clinician working under the program's direction is generally personnel, not a qualified service organization |

OVERLAY: FEDERAL PROGRAM INTEGRITY

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| ☐ Dated OIG List of Excluded Individuals/Entities search result, including all names used by the individual, with any potential match resolved through the online searchable database
Employees and contractors Before employing or contracting, then periodically; OIG updates the list monthly | HHS OIG, Updated Special Advisory Bulletin on the Effect of Exclusion (May 8, 2013)
Recommended practice per OIG guidance, not law. OIG states plainly that providers are not required by statute or regulation to check the LEIE; the exposure is civil monetary penalty liability |
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OVERLAY: MANAGING ENTITY CONTRACT

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| ☐ Dated written notice to the managing entity of any staffing change in the named leadership positions, and any credentialing packet the managing entity's own policy requires
Chief executive officer, chief financial officer, medical director, clinical director and other named roles, plus any individuals with similar functions Three calendar days (SEFBHN) or ten calendar days (BBHC), against 24 hours to the DCF regional office for a new CEO | SEFBHN CORE Handbook FY 25-26, Staffing Changes; BBHC FY 25-26 Provider Contract Handbook, Rev. 9.03, Staffing Changes; Fla. Admin. Code R. 65D-30.004(3)(c)
Managing entity contract only, for providers in those networks |
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Stop rebuilding files the week before an inspection

"Corvara HR was built for exactly this problem. It tracks each license, screening, training and signed policy as its own requirement, with a due date and a reminder ladder, so the five-year rescreen and the biennial overdose renewal do not depend on someone