Instructions for completing the Facility Personnel Form (FPF):

- The Facility Personnel Form (FPF) can be accessed on the Clinical Laboratory Evaluation Program (CLEP) web page.

1. Go to https://www.wadsworth.org
2. Click on “regulatory programs” in the menu bar at the top
3. Click on “Clinical Laboratory Evaluation Program”
4. Click on the button labeled “On-site survey process (FPF)”
5. Click on Facility Personnel Form (FPF) including instructions
6. Save to your computer (Do not copy and paste into Excel)

**NOTE:**
- The laboratory must complete and submit only one FPF.
- The personnel section of the FPF allows for all personnel to be entered on the one sheet labeled FPF (continuous scroll). When printed, each page will include 25 entries.
- The laboratory may organize by department using individual worksheet page(s) within the same workbook by following the below instructions.
  1. Click on the “FPF” tab
  2. Right click and select “Move or Copy”
  3. Click the “Create a copy” check box and select the new sheet location using the “Before sheet” box.
- Laboratories using older Excel software versions (.xls) may not have the drop-down menu choices available to use. Please make your entries in these columns using the Keys at the end of this document.

**WARNING:** FPF documents created by copying the FPF from the webpage, and pasting into a blank Excel page will be rejected and returned.

- Each form includes columns (tan-color) that have drop down lists. Provide information for all columns for each individual. The gray shaded area of the form does not require any laboratory input.

  1. Degree - If an individual has more than one degree, select the degree that will allow qualification as supervisor. Degree selection for foreign education should be based on the determination rendered by accredited education equivalency evaluators
  2. F/D - education location- Foreign or Domestic
  3. Years of experience - This should only include experience that meets the requirements of Title 10 NYCRR Subpart 58.1 (Experience gained while holding a NYS Limited License does not apply)
  4. Job title - Job titles should be selected based on the available choices, however, if the job description within your facility differs, choose the most appropriate
  5. Supervisory functions
  6. Employment hours - Full time (FT), Part time (PT), Per Diem (PD)
  7. Type of NYS license

**Alterations to the form should maintain cohesive association of the individual’s information (the entire employee row including CLEP Review section) for existing staff. Staff leaving employment should be deleted as the entire row, including CLEP Review section.**

**WARNING:** Do NOT change the format of the FPF or it will be rejected.
• Record the Laboratory Director first, followed by the assistant director(s) and then the remaining technical laboratory staff. The Laboratory Director is the individual noted on the New York State Clinical Laboratory Permit with this title designation. Assistant Director(s) are designated by the Laboratory Director as a Certificate of Qualification Holder with defined ‘responsibilities’ at the laboratory. Sole Directors should be listed as Assistant Director on the FPF.

• Individuals holding a New York State Certificate of Qualification (CQ) should enter their CQ code in the column labeled “ID Number or CQ Code”. For medical doctors/dentists who do not hold a CQ, leave this column blank.

• An Administrative Manager/Director, including those not performing technical or supervisory functions, should be included on this form. Quality System Manager and Consultants, assisting the laboratory, should also be included.

• Enter all laboratory technical personnel performing clinical testing activities within the laboratory facility. The Department requires the form to be updated as necessary to maintain accuracy. The complete form will be required during the survey process, but may also be requested at any time.

• Maintain the form and submit electronically to the New York State Department of Health, Clinical Laboratory Evaluation Program upon request. Do not alter the form (e.g., format, font, etc.). Forms will be rejected and returned, if not filled out correctly, or the format is altered.

**WARNING:** Failure to provide a complete/acceptable FPF, when requested, will result in the survey finding, Director Sustaining Standard of Practice 3 (DIR S3) to be included in the current Laboratory Evaluation Report (LER) document or the generation of an Audit Survey.

**Helpful hints for the supervisor and shift columns:**

• Supervisor guidelines
  1. A title qualified by “lead,” typically designating an employee with some supervisory responsibilities and function(s), requires the ‘Supervisory Functions’ column to be selected as YES.

  2. Staff whose technical competency, Human Resources Sustaining Standard of Practice (HRS8), includes delegated supervisory functions also requires the “Supervisory Function” column to be selected as YES.

  3. Directors and Assistant Directors, who act as supervisors, also require the ‘Supervisory Functions’ column to be selected as YES.

• Shift guidelines
  1. Indicate each employee’s routine (hired) shift assignment with an X in the appropriate shift column (day, evening, or night). Staff hired and assigned to rotate/float their work period within a 24-hour period, to maintain laboratory coverage, should be indicated with an X in all applicable shift columns.

**WARNING:** Do NOT change the format of the FPF or it will be rejected.
Helpful hints for revisions (reposition, delete, edit):

- Employee names, from an old FPF, can be copied and pasted into the new form, but the remaining information must be manually updated in the employee row within the new form. Attempts to copy whole rows from an old FPF will lock-up the new form.

- Employee modifications within the new form may be made:
  1. To **reposition** an employee within the new FPF, copy the employee’s row of information within the boundaries of the form. To paste, highlight the first cell, last name, or highlight the entire row within the boundaries of the form. Then select paste.
  2. To **delete** an employee entry (left employment or already pasted into a new location on the form), highlight the full row within the boundaries of the form, then use the delete button on your keyboard.

- The “Find” function, in “Editing” (on the far right) using the “Home” tool bar, can assist in locating an employee entry within the file document when modification is required. The “Sort” function, also in “Editing,” can be used to organize an individual worksheet page.

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Older versions of Excel software (.xls) may not display drop-down menus. Laboratories using older versions of Excel must fill in the drop-down fields (tan-color) using the below key codes.

**WARNING:** Do NOT change the format of the FPF or it will be rejected.
For additional information on qualifications and responsibilities, please refer to:

* Title 10 NYCRR Subpart 58.1
∞ Title 10 NYCRR Part 19
** NYS Education Department

**Key to Job Education Degree codes**

MD = Medicine Doctor
MD, Ph.D. = Medicine Doctor, Doctor of Philosophy
DO = Doctor of Osteopathic Medicine
DO, Ph.D. = Doctor of Osteopathic Medicine, Doctor of Philosophy
DDS = Doctor of Dental Surgery
DMD = Doctor of Medicine in Dentistry
Ph.D. = Doctor of Philosophy
MS = Master
Bach = Bachelor of Science/Bachelor of Arts
Assoc = Associate of Art/Associate of Applied Science
Cert = Certification
H.S. = High School
GED = General Education Diploma

**Key to Education F/D codes:**

F = Foreign- requires documentation of accredited equivalency review
D = Domestic

**Key to Years Experience codes:**

<1 = Less than one year of qualifying experience
1  
2  
3  
4  
5  
>6 = Greater than six years of qualifying experience (as defined in Title 10 NYCRR Subpart 58.1 and, for NYS laboratories only, the NYS Dept. of Education licensing requirements)

**Key to Job Title codes:**

DI = Director*;  
DI/S = Director* ∞/Supervisor;  
AD = Assistant Director∞;  
AD/S = Assistant Director∞/Supervisor;  
MT = Medical Technologist*;  
MT/S = Medical Technologist/Supervisor*;  
MLT = Medical Laboratory Technician;  
CT = Cytotechnologist*;  
CT/S = Cytotechnologist/Supervisor*;  
HT = Histotechnician;  
RT = Respiratory Therapist;  
RT/S = Respiratory Therapist/Supervisor;  
RTT = Respiratory Therapy Technician;  
PF = Perfusionist;  
S = Supervisor*;  
PATH = Pathologist**;  
PATH/S = Pathologist/Supervisor  
MD-DO = Medicinae Doctor-Doctor of Osteopathic Medicine
MD-DO/S = Medicinae Doctor-Doctor of Osteopathic Medicine/Supervisor
PhD = Technical Specialist
PhD/S = Technical Specialist/Supervisor
Key to Job Title codes:
PathA = Pathology Assistant**;
PA = Physician Assistant**
RN = Registered Nurse** (who perform non-waived testing, not including Point of Care Testing);
LPN = Licensed Practical Nurse
DDS-DMD = Doctor of Dental Surgery-Doctor of Medicine in Dentistry
DDS-DMD/S = Doctor of Dental Surgery-Doctor of Medicine in Dentistry/Supervisor
CONS = Consultant;
QSM = Quality Systems Manager;
QA-SR = Quality Assurance personnel (only those who perform Supervisory Review of QC data)
AM = Administrative Manager/Director;

Key to Supervisory functions codes:
Y = Individual performs any supervisory functions regardless of position title
N = performs no supervisory functions

Key to Employment Hrs. codes:
FT = Full Time
PT = Part Time
PD = Per Diem

Key to NYS License or CQ Type codes:
Full licenses**/CQ-
CQ= Certificate of Qualification
MD = Doctor of Medicine;
DO = Doctor of Osteopathic Medicine
DDS= Doctor of Dental Surgery
DMD = Doctor of Medicine in Dentistry
PA= Physician Assistant;
PathA = Pathology Assistant
CLT = Clinical Laboratory Technologist;
CCLT = Certified Clinical Laboratory Technician;
CT = Cytotechnologist;
CHT = Certified Histological Technician;
RT = Respiratory Therapist;
RTT = Respiratory Therapy Technician;
PF = Perfusionist;
RN = Registered Nurse;
LPN = Licensed Practical Nurse

Limited licenses**-
Functions as full (CLT-L; CCLT-L; CT-L; CHT-L), but the license will expire and be invalid at the date designated by NYS Education Department (extension granted to gain full licensure).

Restricted licenses**-
CLT-HICO = Histocompatibility;
CLT-MDMD = Molecular diagnosis restricted to molecular diagnosis;
CLT-MDNR = Molecular diagnosis not restricted to molecular diagnosis;
CLT-CYTO = Cytogenetics;
CLT-CEIM = Flow Cytometry/Cellular Immunology;
CLT-SCPR = STEM Cell Process