

Healthcare Audit Preparation Checklist: Readiness & Documentation

Policy and Procedure Review

Confirm all relevant policies and procedures are current, accessible, and understood by staff.

Last Policy Review Date		
Enter date		
Policy Version in Use		
Version 1.0		
Version 1.1		
Version 2.0		
Summary of Recent Policy Upo	lates	
Write something		
Copy of Current Policy Docum	ents	
♣ Upload File		

Policy Accessibility
Accessible Online
Accessible in Print
Both Online and Print
Number of Staff Trained on Current Policies
Enter a number
Documentation Review
Verify completeness and accuracy of all required documentation (e.g., patient records, incident reports, training records).
Last Document Review Date
Enter date
Summary of Recent Documentation Changes
Write something
Sample Patient Record (Redacted)
♣ Upload File
Number of Incident Reports Reviewed
Enter a number

Completeness of Standard Forms
Complete
Mostly Complete
Needs Improvement
Date of Last Patient Record Retention Check
Enter date
Description of any identified gaps or inconsistencies
Write something
Access Controls Review and validate access controls for electronic health records (EHR) and other sensitive data.
Authentication Method
Username/Password
Multi-Factor Authentication (MFA)
Biometrics
Number of Users with Admin Access
Enter a number

Data Access Restrictions Applied (Select all that apply) Role-Based Access Control (RBAC) Attribute-Based Access Control (ABAC) Data Masking Encryption
Last Access Control Review Date Enter date
Password Complexity Requirements Met? Yes No No Not Applicable
Description of Access Control Procedures Write something
Training Records Confirm all staff have received required training and documentation is readily available for review.
Last Training Date Enter date

Training Module Completed HIPAA Privacy Cybersecurity Awareness Infection Control Patient Safety Emergency Preparedness
Training Score (%) Enter a number
Training Comments Write something
Training Certificate Upload File
Trainer Name Trainer 1 Trainer 2 Trainer 3

Business Associate Agreements (BAA)

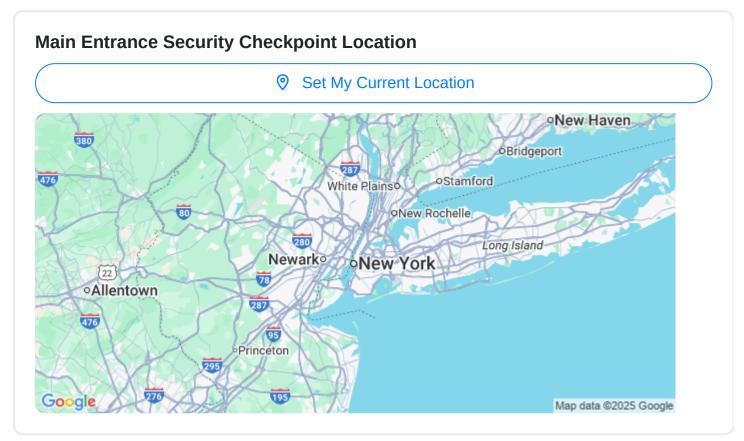
Ensure all BAAs are up-to-date, executed, and compliant with HIPAA regulations.

BAA Execution Date
Enter date
BAA Type
Standard BAA
Customized BAA
Summary of BAA Services
Write something
Copy of Signed BAA
4 Upload File
BAA Status
Active
Expired
Under Review
PAA Expiration Date
BAA Expiration Date
Enter date

Number of Covered Records Enter a number...

Physical Security

Assess physical security measures (e.g., access badges, surveillance systems) and ensure they are functioning correctly.



	y Cameras Functioning	
Enter a number		

Access Badge System Status	
Fully Operational	
Minor Issues	
Significant Issues	

Enter date	
Description of A	ny Identified Physical Security Weaknesses
Write something	
Visitor Managen Operational	nent System Status
Needs Review	
Not Operational	
Security view IT security c	ontrols (e.g., firewalls, intrusion detection systems) and ensure they red and monitored.
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Security Eview IT security of properly configu	ontrols (e.g., firewalls, intrusion detection systems) and ensure they red and monitored. unt

Last Security Patch Installation Date	
Enter date)
Vulnerability Scan Findings (Select All That Apply)	
High Severity	
Medium Severity	
Low Severity	
None	
Notes on Recent Security Events or Concerns	
Write something	
Password Policy Compliance	
Compliant	
Non-Compliant	
Needs Review	
mergency Preparedness	
idate emergency preparedness plans and procedures, including backup and disaste covery processes.	r
Last Emergency Drill Date	
Enter date)
	/

Scheduled Drill Start Time	
Number of Participants in Last Drill	
Enter a number	
Brief Description of Last Drill Scenario	
Write something	
Drill Outcome	
Successful	
Requires Improvement	
☐ Unsatisfactory	
Areas Requiring Improvement (Based on Last Drill)	
Communication	
Evacuation Procedures	
Staff Training	
Resource Availability	
□ N/A	
Emergency Contact List (Uploaded File)	
♣ Upload File	

Corrective Action Plans

Review and update corrective action plans for previously identified deficiencies.	
Description of Identified Deficiency	
Write something	
Date Deficiency Identified	
Enter date	
Severity Level (1-5, 1=Low, 5=High)	
Enter a number	
Responsible Department	
Clinical	
☐ Finance ☐ Compliance	
Detailed Corrective Action Plan	
Write something	
Target Completion Date	
Enter date	

Status	
■ Not Started	
In Progress	
Completed	
On Hold	
Signature of Responsible Party	
audit Trail Review	
kamine audit trails to identify unauthorized access or modifications to	data.
tarming death frame to identify directioning decodes of informations to	GOLLOLI
Start Date of Audit Trail Review	
Start Date of Audit Trail Review Enter date	
Enter date End Date of Audit Trail Review	
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Enter date End Date of Audit Trail Review	
Enter date End Date of Audit Trail Review Enter date	

Types of Access Reviewed (e.g., EHR, Billing, Security) EHR Access Billing System Access Security Logs Pharmacy Records Lab Results
Summary of Findings (e.g., Anomalies, Suspicious Activity) Write something
Were any unauthorized access attempts detected? Yes No
Supporting Documentation (Screenshots, Log Exports) L Upload File