### **Hospital Internal Audit Checklist**

#### **Audit Information**

* **Audit Title**: [e.g., Clinical Safety Audit]
* **Audit Date**: [Enter date]
* **Auditor(s)**: [Enter names]
* **Department/Process**: [e.g., Emergency Department]
* **Audit Objectives**: [e.g., Ensure compliance with health regulations]

#### **Checklist Table**

| **Checklist Item** | **Criteria/Standard** | **Complian-ce (Yes/No)** | **Evidence Observed** | **Comments/Notes** | **Action Required** |
| --- | --- | --- | --- | --- | --- |
| Patient Record Management | Healthcare Compliance Standards |  | Patient file reviews | Incomplete records | Update procedures |
| Medication Storage and Handling | Pharmacy Regulations |  | Storage temperature logs | Expired medicines observed | Discard immediately |
| Infection Control Procedures | Hospital Infection Guidelines |  | Sanitation logs | Non-compliance in some wards | Train staff |
| Equipment Maintenance | Manufacturer's Guidelines |  | Maintenance records | Delayed servicing | Schedule servicing |
| Staff Training and Certification | Healthcare Accreditation Standards |  | Training logs | Some staff lack updates | Conduct sessions |

#### **Audit Findings**

* **Summary of Non-Conformities**: [e.g., Missing incident reports]
* **Opportunities for Improvement**: [e.g., Enhance infection control training]
* **Best Practices Observed**: [e.g., Effective emergency response system]

#### **Corrective Action Plan**

* **Non-Conformity**: [e.g., Improper disposal of bio-waste]
* **Root Cause**: [e.g., Lack of awareness]
* **Action Plan**: [e.g., Implement stricter waste protocols]
* **Responsible Person**: [Name/Title]
* **Deadline**: [Date]

#### **Conclusion**

* **Overall Audit Status**: [Compliant/Non-Compliant]
* **General Comments**: [e.g., High standards of patient care observed]