

Healthcare Compliance Forms and Tools

Sample Compliance Risk Assessment Questionnaire

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Interviewee: _____

Title: _____

Interviewer: _____

Date of Interview: _____

Compliance Risk Assessment Questionnaire

1. What are your key areas of concern for the next fiscal year?

2. What are your key processes, functions, and/or controls that are subject to frequent breakdowns or at the greatest risk of breaking down?

3. What are the most important things you are working on and how could they fail?

4. What is your process for monitoring issues? How is that information reported?

5. What is your method for distributing new regulations or policy changes?

6. What is the process for training the department on internal/external requirements?

7. What is the process for developing and updating the department policies and procedures and verifying they are being accurately implemented?

8. Is there anything you foresee coming down the road (e.g., mergers, acquisitions, joint ventures, etc.)?

9. Other areas of comment or concern?

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