Complete Healthcare Compliance Manual 2024
Resource: Compliance Program Evaluation OIG Tool

By Jennifer McAleer and Ryan Stanberry

Element 1

#	Area	What to Measure	How to Measure	2019 Ong Stat
1.1	Access	Accessibility	– Review link to employee accessible website/intranet that includes the Code of Conduct –Survey - Can you readily access or reference policies and procedures? (Yes/No/Don't know) – Survey - How and where do employees actually access policies and procedures? – Test key word search (searchable) –Audit and interview staff to show policies	
1.2	Access	Actual Access	Audit how many actual "hits" on policies and procedures	
1.3	Access	Accessible language for code, standards & policies	Flesch Kincaid measuring standard – no more than 10th grade reading level	
1.4	Access	Compliance program awareness and communication	–Survey employees to determine the extent to which the code of conduct and other compliance communications are available to employees –Review to ensure the standards, policies, and awareness material is updated and distributed within organization's guidelines	
1.5	Access	Impaired or disabled accessibility	Review accessibility options. Look at methods and speak to individuals.	
1.6	Access	Policy communication	Communication strategy of policies	

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1.7	Access	Availability of policy content	Conduct surveys and observation	
1.8	Accountability	Accountability	Policy Coordinator designated	
1.9	Accountability	Ownership and accountability of policies	Audit process of how policies get enforced by chain of command when compliance is not the final approver. Is management taking responsibility for implementing and following policies?	
1.10	Accountability	Routine policies and procedures	Confirm that listed owner of each policy and procedure is the actual owner.	
1.11	Review/Approval Process	Annual review and Board approval of Compliance	Audit: Review of Board minutes Plan	
1.12	Review/Approval Process	Compliance documentation operations manual	Compliance or other oversight committee to review annually to ensure it is up to date.	
1.13	Review/Approval Process	Maintenance of policies	Check last review or revision	
1.14	Review/Approval Process	Number of policies reviewed and is the review timely	Process review/audit. Use checklist to ensure all basic policy elements are in place, updated consistently and reviewed/approved by appropriate parties.	
1.15	Review/Approval Process	Policy approvals	Checklist audit. Create list of policies, review committee and board minutes to ensure all approvals have been obtained	

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1.16	Review/Approval Process	Policy review process	Audit process by which policies and procedures are prepared, approved, disseminated, etc.	
1.17	Review/Approval Process	Process for ensuring full organizational participation in policy and procedure development	Review documentation/minutes to verify input considered and solicited for policy and procedure development and review	
1.18	Review/Approval Process	Process for review and approving	Check for written process	
1.19	Quality	Are policies (and procedures) as good as industry practice	Peer reviews	
1.20	Quality	Integrity of Process for developing and implementing policies and procedures	Audit policy and procedure on policy and procedures	
1.21	Quality	Language and reading level of policies	Are policies written in plain language, appropriate grade reading level and written in applicable languages for organization? Policy review, Word grade level review and interviews of staff to make sure they understand.	
1.22	Quality	Language translation	Audit or process review. Are policies and the code of conduct translated into appropriate languages for organization?	

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1.23	Quality	Usefulness	SURVEY -Do department policies and procedures assist you in doing your job effectively? (Yes/No/Don't know)	
1.24	Quality	Need for policies that don't exist	Interview staff to determine if they need the certain policies to strengthen internal controls.	
1.25	Quality	Policies and procedures	Request review from external experts	
1.26	Assessment	Assessment of all company policies	Check list of policies; which are compliance and which are business	
1.27	Assessment	Essential compliance policies and procedures exist	Can staff actually articulate policies and procedures; test staff	
1.28	Assessment	Existence of procedure to support policy	Audit for procedure to support policy	
1.29	Assessment	Fundamental policies and procedures in place	Have focus groups of work units/departments to determine whether they understand the policies and procedures necessary to do their jobs.	
1.30	Assessment	Identifiability	–Index of policies available and current –Numbered policies, not just titles	
1.31	Assessment	List of policies are applicable to employees	Supervisors to assess direct staff	

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1.32	Assessment	Are those affected by policy given the opportunity to weigh in on policy when developed?	Focus groups and interviews of those affected by policy.	
1.33	Assessment	List of required policies	Create checklist to make sure minimum policies are in place and then audit against the list.	
1.34	Assessment	Effectiveness of policies	Effectiveness of policies based on the submission hotline calls	
1.35	Assessment	Policies and procedures that have been identified as part of corrective action	Process review. Conduct annual meeting with compliance and legal to look at databases and control and prioritize review to ensure implementation and ongoing compliance with policies and procedures.	
1.36	Assessment	Policies for high risk and operational areas	Audit	
1.37	Assessment	Policies, standards and procedures are based on assessed risks	Risk assessment, policy exists for each risk identified in the risk assessment (coverage of a specific risk topic)	
1.38	Assessment	Policy inventory to ensure no overlap and contradiction of policies	Create inventory and analyze inventory. Analyze and review past efforts. Look at various departments that might have overlapping policies.	

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1.39	Assessment	Policy review following investigation/issue	Top policies implicated in an investigation are reviewed to determine if policy ambiguous, complex, fails to adequately safeguard issues. Validate through audit.	
1.40	Assessment	Routine policies and procedures are addressed and filter down	Review department and committee agendas to ensure policies are addressed	
1.41	Code of Conduct	Code of Conduct	Audit: Review dates, board approvals, distribution processes, attestations, survey employees for understanding, conduct focus groups.	
1.42	Code of Conduct	Compliance program awareness and communication	Survey employees to determine the extent to which they know the content of the Standards of Conduct (SOC) and how to access it.	
1.43	Code of Conduct	Integrate mission, vision, values, and ethical principles with code of conduct	Compare code with mission and vision statements to see if it includes elements/statements. Check to see if code is accessible to employees	
1.44	Code of Conduct	Maintenance of code of conduct	Is code written, posted for employees, documented frequency of reviews, and survey/test employees on ability to locate it	
1.45	Code of Conduct	Distribution	Documentation of Code of Conduct distribution tracking and results over past two years for all employees, employed physicians, allied health professionals, independent (contracted) physicians, volunteers and vendors/contractor/consultants in the organization	

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1.46	Code of Conduct	Orientation	Audit to ensure all employees receive orientation to the COC and compliance policies within 30 days of hire.	
1.47	Code of Conduct	Staff understanding of code of conduct and policies and procedures	–Review test scores after training. –Conduct interviews.	
1.48	Updates	Compliance program communication of rule changes	Review periodically and at rule changes – Audit to ensure there is adequate communication to employees, including changes in policy/procedure.	
1.49	Updates	New and updated policy distribution and education of appropriate staff	Process review -Does organization have formal process to make workforce aware of new policies or changes in policies?	
1.50	Updates	Practices implemented after new policy	Audit practices and review committee minutes and other documentation to determine how new policies are implemented.	
1.51	Understanding	Understanding of Policies/Procedures	–Conduct surveys and/or focus groups on specific policies –Audit adherence to policy/procedure	
1.52	Understanding	Orientation	Ensure employees are provided instruction by knowledgeable personnel for questions/clarity	
1.53	Understanding	Policies reflect practice	Use policies as audit tool and then interview, observe and conduct document review to ensure policies are being followed.	

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1.54	Understanding	Questions asked by employees	System in place to track employee questions and concerns to ensure consistent guidance. Track departments where questions come from to deploy additional education where necessary.	
1.55	Understanding	Understandable to board and c-suite	Test board and c-suite on location and understanding	
1.56	Understanding	Understandable to employees	–Reading comprehension test –Situational tests –Test of location	
1.57	Compliance Plan	Maintain compliance plan and program	Review written plan or written schedule of compliance activities	
1.58	Compliance Plan	Maintain compliance department operations manual	–Audit existence of written manual, handbook, or reference guide –Test whether the manual is current	
1.59	Confidentiality Statements	Verify maintenance of appropriate confidentiality policies	–Audit procedure for obtaining confidentiality statements from employees –Audit employee files for signed confidentiality statements from employees	
1.60	Enforcement	Compliance with policies	Conduct interviews, observation.	
1.61		Policy violations	Audit policy and procedures to make sure practice consistent with policy.	

#	Area	What to Measure	How to Measure	2019 Ongoing Status
1.62		Adherence to policies and procedures for cases involving patient harm and reporting to regulatory agency	Review policies and procedures and cases involving patient harm and validate proper reporting to regulatory agency	
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Element 2

#	Area	What to Measure	How to Measure	2019 Ongoing Status	Total Possible	Total Actual	Next Steps/Action Plan (if appropriate)
2.1	Board of Directors	Active Board of Directors	–Review minutes of meetings where Compliance Officer reports in-person to the Audit and Compliance Committee of the Board of Directors on a quarterly basis –Conduct inventory of reports given to board and applicable committees.		2	FALSE	

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2.2	Board of Directors	Board understanding and oversight of their responsibilities	–Review of training and responsibilities as reflected in meeting minutes and other documents (training materials, newsletters, etc.). Do minutes reflect board's understanding? –Review/audit board education – how often is it conducted? Conduct interviews to assess board understanding.		2	FALSE	
2.3	Board of Directors	Appropriate escalation to oversight body	Review minutes/checklist in compliance officer files		2	FALSE	
2.4	Board of Directors	Commitment from top	–Review compliance program resources (budget, staff). – Review documentation to ensure staff, board and management are actively involved in the program. – Conduct interviews of board, management and staff.		2	FALSE	
2.5	Board of Directors	Process for escalation and accountability	Process review (document review, interviews, etc.). Is there timely reporting and resolution of matters?		2	FALSE	
2.6	Compliance Budget	Appropriate oversight of budget	Review charter of governing body (Board) to verify it includes approval of compliance budget		2	FALSE	

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2.7	Compliance Budget	Budget is based on an assessment of risk and program improvement/effectiveness	Is the Board's approval of the budget based on identified risks and effectiveness evaluation/program improvement?		2	FALSE	
2.8	Compliance Budget	Sufficient compliance program resources (budget, staffing)	Review budget and staffing to ensure significant risks are managed appropriately		2	FALSE	
2.9	Compliance Committees	Active involvement of compliance committee members	Track percentage of attendance of each compliance committee member over the last year		2	FALSE	
2.10	Compliance Committees	Assure that the compliance oversight committee goals and functions are outlined	Review charter of committee		2	FALSE	
2.11	Compliance Committees	Committee structure	Review documentation of structure of committees as well as charters. Ensure no conflicting charters.		2	FALSE	
2.12	Compliance Committees	Compliance committee composition and attendance	Review charter and minutes to assure attendance.		2	FALSE	
2.13	Compliance Committees	Cascade administration of compliance program throughout the organization	Different operational areas give some certification/disclosure to the compliance office		2	FALSE	

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2.14	Compliance Committees	Composition of Compliance Committee	Review organizational chart to validate correct composition		2	FALSE	
2.15	Compliance Committees	Effectiveness of compliance committee meetings	Keep executive report card by member qualitative/quantitative with indicators of contribution on topics		2	FALSE	
2.16	Compliance Committees	Engagement	In the last two years, have the compliance committee meetings been held in accordance with the charter?		2	FALSE	
2.17	Compliance Committees	Engagement of Directors/Managers	Review committee structure to evaluate how directors/managers are participating in Compliance Operational Committee(s) meeting includes agenda, minutes, attendance and reports from subcommittees		2	FALSE	
2.18	Compliance Committees	Executive Leadership engaged in Compliance Program	Review frequency of meetings, membership, attendance, agenda and minutes over the past year of the Compliance Executive Committee to include all members of the Senior Executive team receiving information directly from the Compliance Officer		2	FALSE	

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2.19	Accountability	Leadership accountability	Audit documentation and conduct interviews. Some examples might include: –Employee education completion rates –Demonstration of promotion of compliance (e.g., town hall meeting presentations, newsletters, etc.) –Completion of audit or review action items within established time frame		2	FALSE	
2.20	Accountability	Management accountability for compliance	Process and document review and interviews. –Is there a mapping of operational or management responsible for championing compliance? –Is there a mapping of management responsible for key areas of compliance to ensure accountability? –Does top management support the compliance team?		2	FALSE	
2.21	Compliance Officer	Competency	–Certification (CHC, CHPC, CHRC) –Annual evaluation, coaching, corrective action, professional development		2	FALSE	
2.22	Compliance Officer	Is the compliance officer a key stakeholder in the strategic initiatives of the organization	–Review participation of compliance officer in strategic planning process and due diligence processes.		2	FALSE	

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2.23	Compliance Officer	Compliance department involvement in enterprise-wide initiatives/entities/strategies (e.g., involvement or penetration in joint venture initiatives and other organizational inventory)	–Process review, including review of organizational chart to ensure compliance captures enterprise-wide entities. –Interviews with compliance and other committees.		2	FALSE	
2.24	Compliance Officer	Compliance independence/compliance structure	–Does the reporting structure reflect the "express" authority required? –Audit program charters (compliance program or Audit committee)		2	FALSE	
2.25	Compliance Officer	Compliance integration	Audit to determine the extent to which compliance officer is involved in training, policy development, marketing and other operational aspects of the business		2	FALSE	
2.26	Compliance Officer	Compliance Officer reporting structure and oversight to ensure direct access to C suite and board	–Document review - Look at organizational chart and conduct interviews. –Review board minutes and documentation that there are regular meetings with CEO and or appropriate parties. –Ensure compliance officer has authority and is comfortable to go to board.		2	FALSE	

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2.27	Compliance Officer	Compliance officer's independence/objectivity	–Review compliance officer's job description. Does s/he report directly to CEO, board (not CFO or Legal)? Conduct interviews, focused groups, audit. –Seating location of compliance with the business, senior teams are together, and dotted line on org chart –Interview compliance officer to see if they feel they have independence, do they document disagreements, is there executive session for audit committee. –Interview the board, review minutes, and interview the CCO –Review of written organizational structure –Verify the Compliance Officer has the independent authority to retain outside legal counsel –Review if there is screening of compliance officer material to the Board of Directors –Regular executive session of the Compliance Officer with the Audit and Compliance Committee of the Board		2	FALSE	
2.28	Compliance Officer	Credibility of compliance officer	Job Description review, ongoing training of compliance officer, basic competencies, certifications, reporting structure		2	FALSE	

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2.29	Compliance Officer	How much authority does the compliance officer have to start a working group to look at changes?	–Have needed changes been made, and if not, why not? – What authority does the compliance officer have and how does he or she exercise it? –Where is the compliance team with regards to identifying working groups to help attack a new compliance risk?		2	FALSE	
2.30	Compliance Officer	How supported the compliance officer feels	–Interview compliance officer; –Documentation review.		2	FALSE	
2.31	Compliance Officer	Organizational perception of compliance officer and corporate compliance program	Survey employees regarding: – Their perception of the compliance officer role. – Whether they know who the compliance team is, how to get to them and what to tell them. –Is the compliance staff approachable? –Are the compliance staff solution facilitators or looked at as the organizational police force?		2	FALSE	
2.32	Compliance Officer	Compliance problem solving and adequacy of process	Process review		2	FALSE	

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2.33	Staffing	Adequacy of staffing and resources	–FTEs assigned to compliance function –Review compliance matters and if they have been addressed timely. –Review and ensure policies and procedures are implemented and being followed. –Review documentation of reports to committee(s) and board. –Assess status of work plan and any delays. –Ensure documentation of risk assessment. –Review documentation regarding discussions at board level regarding budget. –Review benchmarking data from similar entities.		2	FALSE	
2.34	Staffing	Assurance of staffing	Review qualifications of staff; ratio of compliance staff to business, compensation to the business		2	FALSE	
2.35	Staffing	Adequacy of compliance staff based on risk assessment	Risk assessment considers the number and competency of staff required to address risk		2	FALSE	

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2.36	Compliance Plan	Compliance plan assessments	–Document review, including compliance plan and policies. –Is there an external review conducted periodically? –What is the role of internal audit with regarding to compliance? –How does internal audit interact with compliance? –Benchmark program with similar sizes within the same industry		2	FALSE	
2.37	Compliance Plan	Compliance plan process	Audit process for development of the annual compliance plan.		2	FALSE	
2.38	Compliance Plan	Compliance organization	Assess the positioning and effectiveness of the compliance organization staff, titles, organizational chart, pay, promotion records compared to other areas within the organization		2	FALSE	
2.39	Compliance Plan	Document that establishes the authority of the program	Document review, meeting minutes for approval.		2	FALSE	
2.40	Compliance Plan	Perception of compliance program	Survey employees		2	FALSE	
2.41	Culture	Accountability	SURVEY -Does the compliance department have an impact on how you do your job? (Yes/No/Don't know)		2	FALSE	

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2.42	Culture	Accuracy and Trust in Monitoring	SURVEY: Do you believe the information from your department is reported with a high degree of integrity and accuracy? (Yes/ No/Don't know)		2	FALSE	
2.43	Culture	Culture	Conduct cultural survey (interviews, confidential surveys, focus groups, etc.) and report findings to compliance committee and board. Review minutes to ensure report out and action plan established.		2	FALSE	
2.44	Culture	Effectiveness of compliance program in the field	Survey of field compliance people		2	FALSE	
2.45	Culture	What is company doing to drive compliance culture?	Surveys. –What does company incentivize? –What does the company promote and look down on? –Is compliance program tied to mission, vision, values?		2	FALSE	
2.46	Culture	Employee comments from "Rounding"	Audit the tracking of what employees report when proactively asked by compliance department (or leadership, etc.) and how this information is managed and reported.		2	FALSE	

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2.47	Culture	Measuring effectiveness of executive communication on compliance	Track on-line engagement (clicks) and survey audience		2	FALSE	
2.48	Incentives	Aligning performance management system (promotion system) with ethics and compliance objectives	Audit criteria of promotion, bonuses and assignments		2	FALSE	
2.49	Incentives	Compliance and Ethics Role/participation for developing the incentive system	Have an outside independent expert audit the incentive system and compliance officer's participation		2	FALSE	
2.50	Incentives	Is incentive system consistent with compliance program	Employee Survey		2	FALSE	
2.51	Performance Evaluations	Proper alignment of compliance objectives with organizational performance incentives (promotions/performance appraisals/bonuses)	–Audit disciplinary records and performance evaluations for consistency with compliance – Audit/Review of process for performance incentives (promotions/performance appraisals/bonuses) criteria to include compliance components		2	FALSE	

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2.52	Performance Evaluations	"Compliance" as a performance appraisal element	–Audit performance appraisals. Some options include: o Acknowledgment of no disciplinary action o Education completion o Documentation of promotion of compliance –Are merit increases tied to performance? –Does completion of compliance education, promotion of compliance through words, actions or no documented disciplinary action and/or, completion of corrective action plans within the due dates play a role in the calculation of merit increase? –Compliance is part of the annual performance evaluation and HR knows how to evaluate issues for compliance		2	FALSE	
2.53	Performance Evaluations	Manager performance evaluations	Managers have open door policy, communicate compliance directives/initiatives, address compliance matters and effectiveness is noted in performance evaluation.		2	FALSE	
2.54	Performance Evaluations	Is compliance taken into account in promotion decisions?	Review promotion lists and documentation to support promotion. Did the individual actively promote compliance?		2	FALSE	

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2.55	Performance Evaluations	Organizational Retaliation	Track whistleblower promotion, bonuses, sick days, disciplinary, corrective action measures and exit interview over long term		2	FALSE	
2.56	Risk Assessments	Compliance Resource knowledge and competence	Survey, focus groups and interviews		2	FALSE	
2.57	Risk Assessments	Compliance staff knowledge of current regulatory changes and laws	Document review and interviews. Review certificates of attendance at conferences/other educational events, "tools" used to keep compliance staff current, compliance budget (to support access to current regulatory changes and laws).		2	FALSE	
2.58	Risk Assessments	Monitoring of regulations that impact the organization	Document and process review, interviews. –Is there a policy and procedure? –Is there evidence that regulations, etc. are disseminated and implemented? –Are there designated individual(s) that monitor laws, regulations, policies that impact organization? –How do they get the information and what do they do with it to make sure it gets to the right people?		2	FALSE	

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2.59	Risk Assessments	Risk Assessment Cycle	–Audit adherence to risk assessment cycle –Annual documented risk assessment has been communicated to oversight committee		2	FALSE	
2.60	Risk Assessments	Risk based work plan that covers compliance plan elements with board approval and regular reporting on those projects to board	Compliance Committee and board minutes review.		2	FALSE	
2.61	Risk Assessments	Work plan development based on risk assessment	Process and document review.		2	FALSE	
2.62	Risk Assessments	Prioritization of risk and consultation with applicable risk partners (i.e., legal, HR, IT, risk management, etc.)	Documentation and process review. Is there a risk based plan? How was it developed?		2	FALSE	
2.63	Risk Assessments	Exit interview	Compliance concerns that come up in exit interviews are addressed		2	FALSE	
2.64	Compliance Work Plan	Compliance work plan	Audit to ensure the work plan is developed and implemented and it is followed-through and outcomes are reported to compliance committee or to governing body		2	FALSE	

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2.65	Compliance Work Plan	Effectiveness of compliance program	Written annual work plan that includes minutes		2	FALSE	
2.66	Legal Counsel's Role	Role of counsel in compliance process	Interview counsel regarding their involvement. –When are they brought into matters? –Where is counsel situated in relation to compliance officer on organizational chart?		2	FALSE	
2.67	Legal Counsel's Role	Existence and adherence to policy on involvement of legal in handling matters under privilege	Review policy and sample areas that were referred to legal followed the policy		2	FALSE	
2.68	Other	Job descriptions of management	Review of management job descriptions. Do managers have concrete compliance deliverables other than training and abiding by Code of Conduct?		2	FALSE	
				Totals	136	0	

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