

PROCEDURAL AUDIT INTERVIEW CHECKLIST

IA _____

DEPARTMENT: _____ **DATE:** _____

PROCEDURE: _____

Plus + Checked/Satisfactory, Minus – Checked/Deficient

Name	Title	1	2	3	4	5	6	7	8	9	10	11	12

1. What is your understanding of the Mission Statement? (**Element 5.3**)
2. What are your responsibilities and authorities? How are they defined? (**Element 5.5.1**)
3. Do you know the Goals & Objectives established for your department? Can I see the department’s organization chart? (**Element 4.2.1 (a)**)
4. Tell me about the importance of your activity(ies) and how you contribute to the achievement of your department’s goals & objectives. (**Element 6.2.2 (d)**)
5. What education, training, skills and/or experience are required for your position? Who maintains your records of education, training, skills and experience? (**Elements 6.2.1 & 6.2.2**)
6. With regard to the procedure being audited, who are your customers? Tell me about the importance of meeting customer requirements? (**Element 5.1 (a) & 5.5.2 (c)**)
7. How do you know you are meeting customer requirements? What is the measurement for this procedure? (Auditor: ask to see records of measurements.)
8. Please explain this procedure to me. (Auditor: at this time make sure the procedure is being followed as written and ask questions about the steps involved for clarification.)
9. When was the last time this procedure was reviewed? Were changes identified to make the procedure more efficient and effective? If so, who identified them and how were they identified?
10. Do you maintain any records pertaining to this procedure? If so, what: (Auditor: compare to record retention table of procedure.) (**Element 4.2.4**)
11. Are there any associated documents (external or internal) with this procedure?
12. Where is the official procedure located?

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NOTES: