



DR. PABLO O. TORRE
MEMORIAL HOSPITAL

RIVERSIDE MEDICAL CENTER, INC.



METRO PACIFIC HEALTH
THE HEART OF FILIPINO HEALTHCARE

DEPARTMENT: Total Quality Division		POLICY NUMBER: DPOTMH-APP-TQD-P045-(01)	
TITLE/DESCRIPTION: INTERNAL QUALITY AUDIT POLICY			
EFFECTIVE DATE: April 30, 2024	REVISION DUE: April 29, 2027	REPLACES NUMBER: QA-QP-P01	NO. OF PAGES: 1 of 9
APPLIES TO: All RMCI Employees		POLICY TYPE: Administrative	

PURPOSE:

1. The Master Audit Plan designed for a specific clinical study consists of a combination of several Quality Assurance activities designed to ensure quality and regulatory compliance, to define timelines, and to identify personnel. These activities may include the review of the regulatory documents such as Safety and Quality Policies, 5's of Good Housekeeping, Turn-Around-Time (TAT), Standard Operating Procedures (SOPs), and Clinical Practices.

DEFINITIONS:

Master Audit Plan – an action plan that documents what procedure an auditor will follow to validate that an organization is in conformance with regulations.

Standardized Audit Program – is a document developed to serve as a checklist of questions to be asked during an audit.

Tailored Audit Program – is an incorporate procedures designed to match the needs of the auditing entity.

Compliance Audit Program – Is an action plan that documents what procedures an auditor will follow to validate that an organization is in conformance with compliance regulations.

RESPONSIBILITY:

Quality Improvement Manager, Quality Assurance Patient and Non-Patient Care Auditor

POLICY:

ANNOUNCED AUDIT

1. The Quality Improvement Manager shall create a yearly Master Audit Plan.
2. The Master Audit Plan shall include standardized audit programs, tailored audit programs, and compliance audit programs, schedule of audits shall distributed prior to the visit. Standardized audit programs, which are available for many different areas, can be used proactively to help an organization create its own internal compliance framework and internal audit program.
3. The Master Audit Plan shall be disseminated or its copy be given to respective units/sections/departments/divisions.
4. The Internal Quality Auditor shall use the Master Audit Plan as the basis of the date of audit on the different areas in the hospital.
5. Confidential data such as personnel records (e.g. 201 files and salaries) shall be excluded in the coverage. Payroll-related documents are covered by external auditors.





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UNANNOUNCED AUDIT

1. The Total Quality Division – Quality Assurance shall conduct or perform spot or unannounced audit once a month or more depending on the necessity or need as the situation may warrant.
2. The unannounced audit follow the same format or process as followed or observed in the scheduled or announced Internal Quality Audit.
3. Confidential data such as personnel records (e.g. 201 files and salaries) shall be excluded in the coverage. Payroll-related documents are covered by external auditors.





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PROCEDURE (SOP):

ANNOUNCED AUDIT

1. The Auditor shall make the necessary preparations before the audit commences.
2. The Manager shall inform the areas to be audited not less than 5 days before the day of the audit.
3. The Auditor shall select an internal audit for every member of the audit team.
4. The Auditor shall inform the Manager/Supervisor or Office-In-Charge (OIC) of the purpose of the audit.
5. The Auditor conducts the audit on the company's policies and standard operating procedures, required organizational practices, and other statutory requirements or standards.
6. After the audit has been completed, the auditor briefly discusses the audit results, agrees on when to address non-conformity/non-compliance findings, and submits a formal report within 72 hours post-audit to the auditee.
7. The Auditor shall inform the auditee that a follow-up audit to monitor compliance with corrected practices will be done.
8. The Auditor concludes the audit process after the auditee affixed his/her signature on the audit form. By affixing his/her signature, he/she signifies that the audit results were discussed in his/her presence and that he/she fully understands and agrees to the findings.

UNANNOUNCED AUDIT

1. The Auditor shall make necessary preparations before the audit commences.
2. The Auditor shall follow the same process as followed or observed in the scheduled or announced Internal Quality Audit.





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WORK INSTRUCTION:

ANNOUNCED AUDIT

KEY TASKS	PERSON RESPONSIBLE
1. Sends out the approved internal quality audit master plan to the different areas.	QUALITY IMPROVEMENT MANAGER INTERNAL QUALITY AUDITOR – PATIENT AND NON-PATIENT CARE
2. Communicates with the unit to be audited.	
3. Conducts an audit of the unit.	
4. Discusses the audit findings with the unit head and affixes his/her signature on the audit form.	
5. Submits a formal report within 72 hours post audit to the auditee.	
6. Follows up to monitor the compliance of the auditee with the corrected practices.	





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UNANNOUNCED AUDIT	
KEY TASKS	PERSON RESPONSIBLE
1. Visits the area to be audited.	INTERNAL QUALITY AUDITOR – PATIENT AND NON-PATIENT CARE
2. Conducts an audit of the unit.	
3. Discusses the audit findings with the unit head and affixes his/her signature on the audit form.	
4. Submits a formal report within 72 hours post audit to the auditee.	
5. Follows up to monitor the compliance of the auditee on the corrected practices.	



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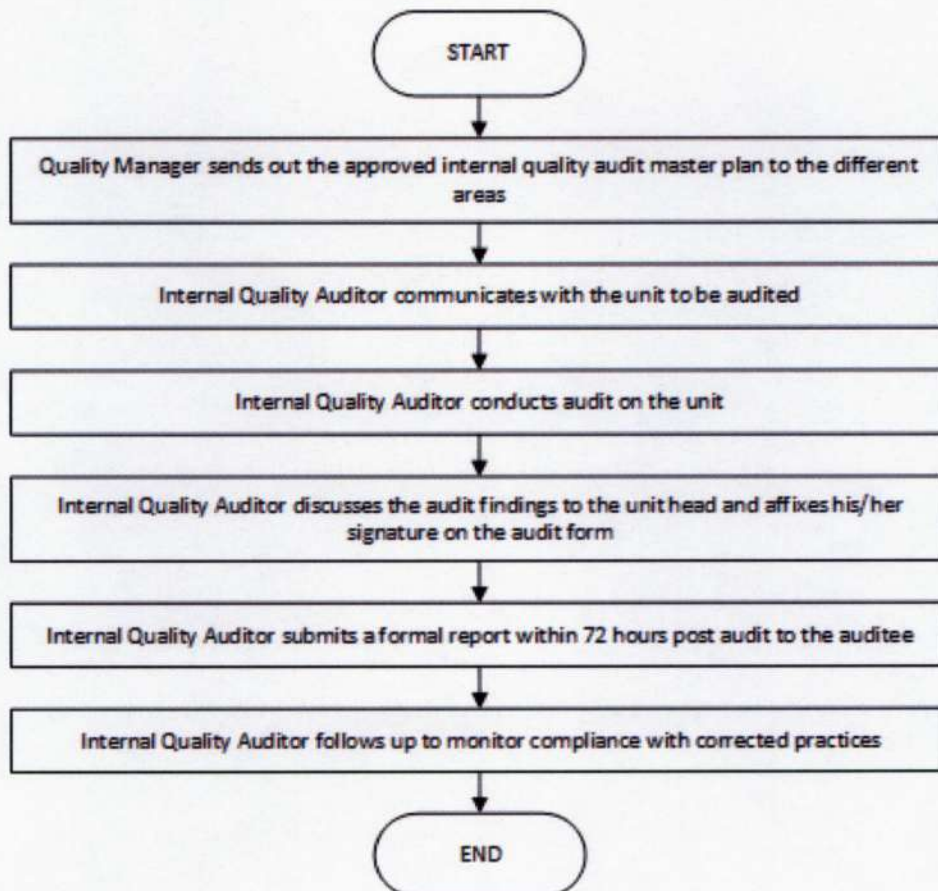


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WORK FLOW:

ANNOUNCED AUDIT





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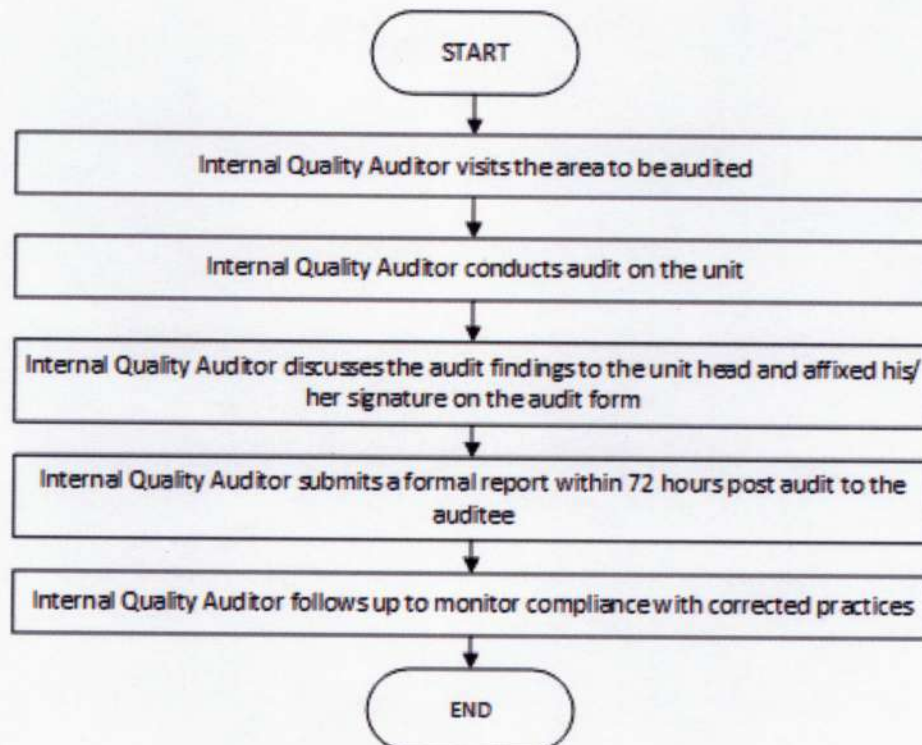
REPLACES NUMBER:

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FORMS: DPOTMH-QA-F003 (01), DPOTMH-QA-F004 (01), DPOTMH-QA-F005 (01), DPOTMH-QA-F006 (01)
EQUIPMENT: N/A
REFERENCES: <ol style="list-style-type: none">1. American Quality Assurance (2020). https://asq.org/quality-resources/quality-management-system. Retrieved: January 23, 20202. Trucks, Holley M.; These and Dissertations: Public Health (M.P.H. & Dr.P.H.) College of Public Health 2017 An Assessment of the Effectiveness of Unannounced Safety Inspections Versus Announced Inspections in Academic Research Laboratories That Utilize Biological Hazards, University of Kentucky, holly.trucks@uky.edu





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APPROVAL:				
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	JOSE PEPITO B. MALAPITAN, MD Medical Director		06-04-2024	
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