

ADMINISTRATIVE AUDIT

Name of the Division: **Health Centre**

Audit Period: Session 2018 - 19

Sr. No.	Statement	Evaluation		
		Yes	Somewhat	No
1.	Awareness about the responsibilities of the division			
2.	Execution of the work according to duty chart (Check and Report)			
3.	Filing System	Poor	Good	Excellent
	a. Documentation			
	b. Coding			
	c. Indexing			
	d. Storing and retrieving filing			
	e. Security system of filing			
	f. Time schedule followed for disposal of files	More than 5 days	5 days	3 Days
4.	Security and safety measures for original and important documents to avoid theft, fire, rain or any other peril or whatsoever nature	Poor	Good	Excellent
5.	Performance evaluation system	Poor	Good	Excellent
6.	Record of patients (students, faculty and non-teaching)			
7.	Record of medicines	Poor	Appropriate	Excellent
	a. Purchase			
	b. Utilization			
	c. Disposal of expired medicine			
8.	Record of ambulance service			

9.	AMC record of instruments
10.	How do you get complaints of your division and what is the track of closure?
11.	Strength and weakness of the division
12.	Any exemplary practice of your division