OpsAuditHub opsaudithub.com	DOC ID: **SAF-0153**	REVISION: **Rev 2.4 (2026)**
	STANDARD: **HIPAA Privacy Rule 45 CFR Part 160 and Part 164, Subparts A and E**	AUDIT FREQUENCY: **Monthly Audit**

Hipaa Privacy Compliance Audit Inspection Checklist

Operational Scope: This inspection checklist establishes a systematic protocol for evaluating administrative, physical, and technical safeguards within healthcare facilities to ensure strict adherence to HIPAA privacy mandates. The primary objective is to mitigate unauthorized Protected Health Information (PHI) disclosures and enforce mandatory compliance across all clinical workflows.

MANDATORY PPE:	Visitor Identification Badge, Staff Security Clearance Lanyard, Anti-Static Wrist Strap, Privacy Screen Protector, Biometric Access Token
PREREQUISITES:	Obtain authorization from the Chief Privacy Officer or designated Compliance Officer prior to conducting audits. | Review previous month's audit corrective action logs to verify closure of any prior non-compliance findings.

PHYSICAL SAFEGUARDS & FACILITY ACCESS CONTROL

#	COMPONENT / ITEM	VERIFICATION CRITERIA & ACCEPTANCE STANDARD	SEVERITY	STATUS
1	**Reception and Check-In Areas**	Physical barriers, acoustic privacy measures, and sign-in sheets are positioned to prevent unauthorized viewing or overhearing of patient PHI by waiting visitors.	**Critical (Immediate Out of Service)**	[ ] PASS [ ] FAIL [ ] N/A
2	**Workstation Placement and Screen Angles**	All clinical and administrative computer monitors displaying PHI are positioned away from public lines of sight or fitted with verified privacy filters.	**Warning**	[ ] PASS [ ] FAIL [ ] N/A
3	**Paper Records and Chart Storage**	Physical charts, intake forms, and printed schedules are stored in locked file cabinets or restricted-access rooms when unattended.	**Critical (Immediate Out of Service)**	[ ] PASS [ ] FAIL [ ] N/A
4	**Secure Disposal and Shredding Bins**	Consolidated shredding receptacles are locked, clearly labeled, uncompromised, and free of overflowing documents containing patient identifiers.	**Warning**	[ ] PASS [ ] FAIL [ ] N/A

ADMINISTRATIVE POLICIES & WORKFORCE COMPLIANCE

#	COMPONENT / ITEM	VERIFICATION CRITERIA & ACCEPTANCE STANDARD	SEVERITY	STATUS
5	**Notice of Privacy Practices (NPP)**	Current NPP is visibly posted in public reception areas and readily accessible for distribution to new and returning patients.	**Standard**	[ ] PASS [ ] FAIL [ ] N/A
6	**Workforce HIPAA Training Records**	All active clinical and administrative personnel possess documented, up-to-date completion certificates for annual HIPAA privacy awareness training.	**Critical (Immediate Out of Service)**	[ ] PASS [ ] FAIL [ ] N/A
7	**Business Associate Agreements (BAAs)**	Current, signed BAAs are on file and readily retrievable for all third-party vendors handling or accessing clinic PHI.	**Warning**	[ ] PASS [ ] FAIL [ ] N/A

TECHNICAL SAFEGUARDS & COMMUNICATIONS

#	COMPONENT / ITEM	VERIFICATION CRITERIA & ACCEPTANCE STANDARD	SEVERITY	STATUS
8	**Automatic Workstation Logoff**	All electronic devices accessing EHR systems are configured to activate automatic screen lock or session termination after a maximum of 5 minutes of inactivity.	**Critical (Immediate Out of Service)**	[ ] PASS [ ] FAIL [ ] N/A
9	**Secure Messaging and Fax Handling**	Electronic communications containing PHI utilize encrypted transmission channels, and standalone fax machines are located in secure, restricted zones.	**Warning**	[ ] PASS [ ] FAIL [ ] N/A
10	**Patient Access and Amendment Requests**	Standard Operating Procedures (SOPs) and tracking logs demonstrate that patient requests for record access or amendments are fulfilled within the statutory 30-day window.	**Standard**	[ ] PASS [ ] FAIL [ ] N/A

Certified Inspector / Lead Operations Auditor Signature: _____	**Date / Time:** _____	**Badge / Cert #:** _____
Chief Privacy Officer / Site Compliance Manager Sign-off: _____	**Review Date:** _____	**Audit Status:** [ ] Approved [ ] Rectify

COMPLIANCE NOTICE: This document must be archived for a minimum of 6 years in accordance with HIPAA administrative simplification recordkeeping guidelines.

DIGITAL INSPECTION UPGRADE: Run this audit on mobile/tablet, attach photos & automate compliance records. **Start Free Mobile Audit →**