Compliance Survey and Questionnaire

Department Information

Department

Director   Date Completed:

Part A: Self-Assessment

Instructions:

Please utilize the space below to describe what you believe presents the greatest risk or area of concern for the department.

Part B: Survey Questions

Instructions:

In connection with assessing risks and developing compliance and audit programs for ORGANIZATION, all departments are requested to complete the below Compliance Survey and Questionnaire. The questions posed are designed to assess operational compliance and specific risks. It is important that information provided be accurate and, if audited, responses are supported by adequate documentation.

Section 1: Departmental Management		
Is your organization chart current and accurate?	[ ] Yes	[ ] No
Do you have regular departmental meetings?	[ ] Yes	[ ] No
If so, do you follow a written agenda?	[ ] Yes	[ ] No
If so, are supervisors given opportunity to suggest agenda items?	[ ] Yes	[ ] No
Does department maintain departmental policies?	[ ] Yes	[ ] No
If departmental policies are maintained, are policies written?	[ ] Yes	[ ] No
If policies are written, are policies annually reviewed?	[ ] Yes	[ ] No
Does director receive "Supervisor's Update?"	[ ] Yes	[ ] No
Do supervisors receive "Supervisor's Update?"	[ ] Yes	[ ] No
Does director read "Supervisor's Update?"	[ ] Yes	[ ] No
To the best of your knowledge, do supervisors read "Supervisor's Update?"	[ ] Yes	[ ] No
Section 2: Employee Management		
Does department have a written departmental orientation program for new employees?	[ ] Yes	[ ] No
Does department maintain a record of number of new employees within a calendar year?	[ ] Yes	[ ] No
Does your department rely upon volunteer labor?	[ ] Yes	[ ] No
Does department maintain a record of the number/incidents of grievances filed within a calendar year?	[ ] Yes	[ ] No
Does department have posted for employees in a visible location your Human Resource contact?	[ ] Yes	[ ] No
Does department maintain a record of number of employees terminated or leaving employment within a calendar year?	[ ] Yes	[ ] No
Is director aware of the annual percentage of turn-over in employment for department?	[ ] Yes	[ ] No
If aware, what is the annual percentage of turn-over in employment for department?	Total: [ ]	
What is total number of full-time departmental employees?	Total: [ ]	
What is total number of part-time departmental employees?	Total: [ ]	
Section 3: Ethics and Compliance		
Does director ensure all employees receive mandatory ethics training?	[ ] Yes	[ ] No
Are mandatory federal labor notices provided to employees or posted in the work place, including satellite locations?	[ ] Yes	[ ] No
Does department maintain a copy of Administrative Management Policy accessible to all employees?	[ ] Yes	[ ] No
Does department employee individuals who are required to maintain licensing and/or certifications, ie. commercial driver license, licensed attorney?	[ ] Yes	[ ] No
If so, do you have compliance program to monitor and ensure licensing and/or certifications are current and individuals are in good standing?	[ ] Yes	[ ] No

Section 4: Payroll		
Do your time and attendance records accurately reflect each employee's hours worked or leave taken?	[ ] Yes	[ ] No
Is overtime fairly distributed among employees?	[ ] Yes	[ ] No
Is there a policy for overtime?	[ ] Yes	[ ] No
If so, is the policy written?	[ ] Yes	[ ] No
Is there a policy for overtime for exempt employees?	[ ] Yes	[ ] No
If so, is the policy written?	[ ] Yes	[ ] No
Is there a policy for stand-by and on-call time?	[ ] Yes	[ ] No
If so, is the policy written?	[ ] Yes	[ ] No
How is overtime tracked and approved? (Please use space below)		
How is stand-by and on-call time tracked and approved? (Please use space below)		

Section 5: Cash Management		
Does department receive cash?	[ ] Yes	[ ] No
Does department maintain petty cash or "change drawer"?	[ ] Yes	[ ] No
If so, are there written procedures and processes for accounting and auditing of cash?	[ ] Yes	[ ] No

Section 6: Funding		
What is total budget for department for year 2013? Total [ ]		
Do you monitor budget to actual expenditures?	[ ] Yes	[ ] No
If so, frequency of audit, e.g. quarterly, monthly? [ ]		
Does your department receive federal funds? If yes, percentage of total budget supported by federal dollars [ ]	[ ] Yes	[ ] No
Does your department receive RESTRICTED funds ? If yes, percentage of total budget [ ]	[ ] Yes	[ ] No
Does your department receive funds from general fund? If yes, percentage of total budget supported by general fund [ ]	[ ] Yes	[ ] No
Does your Department administer federal funds?	[ ] Yes	[ ] No
If your department receives or administers federal funds, please describe those policies, practices or procedures which you engage to ensure compliance with terms of funding.	[ ] Yes	[ ] No

Section 7: Contracts and Invoices		
Are services provided to department via contract?	[ ] Yes	[ ] No
Is there a designated individual who monitors contracts?	[ ] Yes	[ ] No
Does department enter into or otherwise oversee cooperative endeavor agreements?	[ ] Yes	[ ] No
Is there a designated individual who monitors cooperative endeavor agreements?	[ ] Yes	[ ] No
Are invoices approved by appropriate supervisory level?	[ ] Yes	[ ] No
Is there a separation between person who requisitions purchase and person who approves invoices?	[ ] Yes	[ ] No
How are contracts/cooperative endeavor agreements monitored? (Please use space below)		

Part C: Risk Assessment				
Instructions:				
Please assess your departmental risk exposure in the following areas by indicating your level of comfort or confidence that there are sufficient policies, procedures and controls in place which adequately lessen a risk of failing to comply with a local, state or federal law or lessen a risk of loss to the parish. "Poor" would indicate weak controls. "Very Good" would indicate strong controls are in place.				
Risk Area	**Poor**	**Adequate**	**Good**	**Very Good**
Departmental management				
Employee management				
Ethics and Compliance				
Payroll				
Cash management				
Funding				
Contracts and Invoices				

Part D: Assessment of Responses				
	Poor	**Adequate**	**Good**	**Very Good**
What is your level of comfort or confidence in the accuracy of answers provided above?				