



Peace Corps Office of

INSPECTOR GENERAL

Evaluation Report

Evaluation of the Office of
Health Services' Technical
Guidelines' Revision and
Implementation Process

IG-24-02-E
September 2024

EXECUTIVE SUMMARY

OVERVIEW

The Peace Corps Office of Inspector General (OIG) evaluated the Peace Corps Office of Health Services' (OHS) policies and procedures for updating its Technical Guidelines (TG). The purpose of our evaluation was to determine whether OHS efficiently and adequately updates the TGs and assesses any challenges to their implementation. This evaluation also sought to determine to what extent the Peace Corps Medical Officers (PCMO) use TGs in their administrative and clinical practices.

WHAT WE FOUND

We found that while our survey results indicated that the TGs are a valuable tool for PCMOs, OHS's process for updating TGs could be improved. Interviewed staff reported that a significant number of TGs were consistently out of date and found it difficult to ensure that the TGs were, at a minimum, updated every 3 years, as required. We concluded that PCMOs rarely report problems to OHS staff regarding the TG's informational content and accessibility, and that the PCMOs do not have a clear process for reporting TGs that needed to be reviewed.

RECOMMENDATIONS IN BRIEF

This report includes two recommendations. We recommend that the Peace Corps develops a plan to implement automation of the Quality Improvement (QI) Unit's update process and management of TGs, and that the Peace Corps develops a process or mechanism for PCMOs and other users to flag TGs that need to be reviewed.

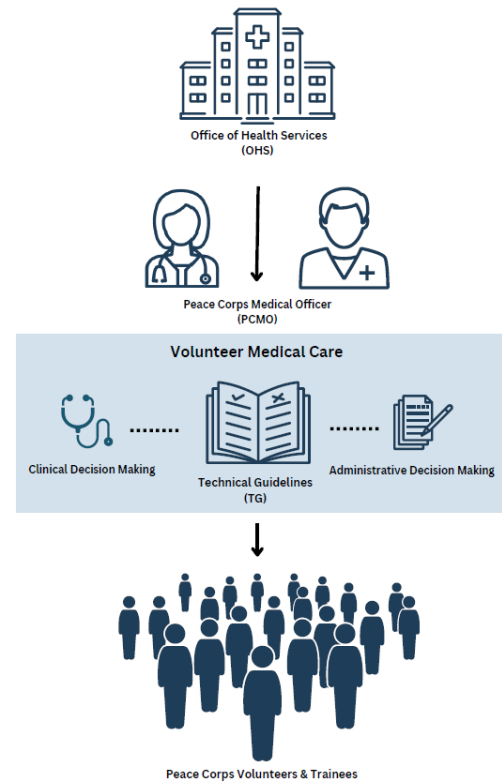


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BACKGROUND

OHS operates overseas Trainee and Volunteer healthcare, determines whether applicants are medically qualified for service, and is responsible for providing clinical supervision, support, technical advice, training and education, and administrative support services. Each Peace Corps country post has Medical Officers (PCMO) to support Volunteers in the field. The PCMOs, who are limited to licensed physicians and licensed and certified nurse practitioners, serve as the primary healthcare providers for Peace Corps Volunteers and Trainees overseas. OHS personnel and field staff use TGs for guidance in their clinical and administrative decision making.

The OHS QI Unit is responsible for issuing TGs that provide programmatic and clinical guidance for operating the Volunteer Health System overseas. In the survey, the majority of PCMOs reported that the TGs contain sufficient information, are very helpful in supporting Volunteer healthcare, and that PCMOs rarely deviated from the TGs. According to one interviewed staff member, TGs are the “backbone” of OHS and provide a structure by which care is provided to Volunteers and the post Health Unit’s administrative and functional processes are documented.

At the time of this report’s writing, there were 376 documents in the Agency Resource Hub for TGs and their associated attachments. OIG has found in previous work that outdated TGs pose a risk to the agency and to the health and safety of Volunteers.

The Peace Corps Office of Medical Services Standard Operating Procedure on the Development, Update, and Review of Technical Guidelines (herein SOP) is a one-page policy that governs how TGs are developed, maintained, and reviewed. According to the SOP, TGs are required to undergo a review every 2 to 3 years to ensure content oversight is performed and, if applicable, improvements are made. Each TG is developed and modified by specific OHS Units with the applicable expertise. The TG is then reviewed by the QI Unit; a sub-unit of OHS that monitors the Peace Corps’ healthcare system.

New TGs must be presented to the Clinical Standards Committee, which is chaired by the Chief of Quality Improvement. The SOP outlines that TGs are maintained in an electronic file on the Peace Corps’ shared drive and published on the agency intranet.

OBJECTIVE, SCOPE, & METHODOLOGY

OBJECTIVE

The purpose of our evaluation was to determine whether OHS efficiently and adequately updated TGs and assess any challenges to their implementation. This evaluation also sought to determine to what extent the PCMOs used TGs in their administrative and clinical practices.

SCOPE

Our evaluation focused on OHS's process for updating TGs and how the PCMOs' implement and use TGs. The evaluation covered the period April 2018 to August 2023.

It was outside of the scope of this review to assess TGs for clinical accuracy.

METHODOLOGY

Our evaluation team collected more than 200 documents from the agency related to OHS's processes for updating TGs. We also interviewed both headquarters and regional post staff and managers with roles and responsibilities that were relevant to updating and using TGs.

Additionally, we surveyed the 104 PCMOs who were active in their position prior to the March 2020 global evacuation of Volunteers and received 95 responses. The survey consisted of 29 questions. The evaluation team aggregated and analyzed data from agency documentation, interviews, and survey responses.

EVALUATION RESULTS

THE TECHNICAL GUIDELINES ARE A VALUABLE TOOL FOR PEACE CORPS MEDICAL OFFICERS

Part of this evaluation's data collection process was to survey the PCMOs who were active in their position prior to the Peace Corps' 2020 global evacuation of Volunteers. The 29 survey questions focused on the PCMOs' TG usage and their processes for following TG guidance. Of the 104 PCMOs surveyed, OIG received 95 responses.

Our review confirms the importance technical guidance has in the delivery of healthcare to Peace Corps Volunteers. The survey results demonstrate that the TGs are a prominent and regularly used tool for providing healthcare to Volunteers. A majority of PCMOs also believe that the technical guidance is helpful, accurate, and in treating Volunteers; they rarely deviate from guidance. (Figure 1. See also Appendix A, survey data questions 15, 19, and 25).

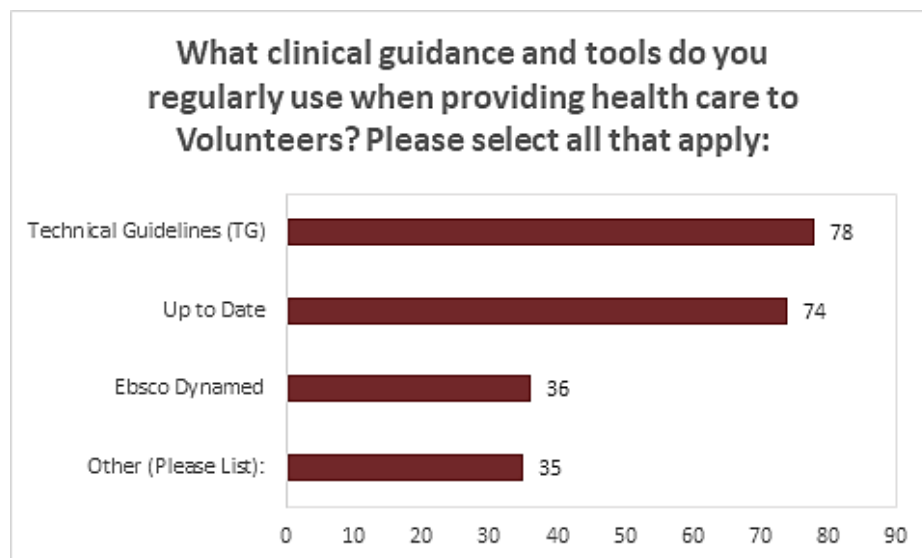


Figure 1. PCMO Survey Result. Source: OIG Survey, Question 4. Note: Ebsco DynaMed and Up to Date are two popular point-of-care information tools.

Additionally, most PCMOs found it easy to access the TGs (Figure 2) and were able to find the information they were looking for (Figure 3).

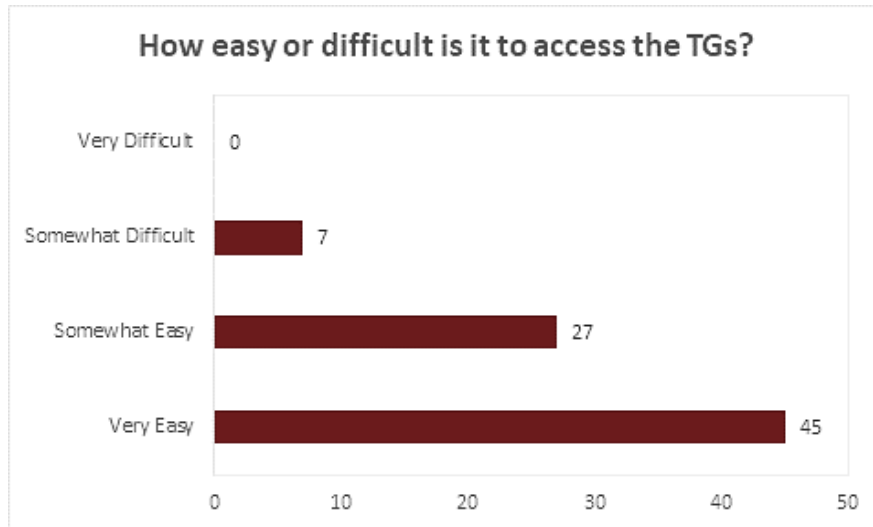


Figure 2. PCMO Survey Result. Source: OIG Survey, Question 7

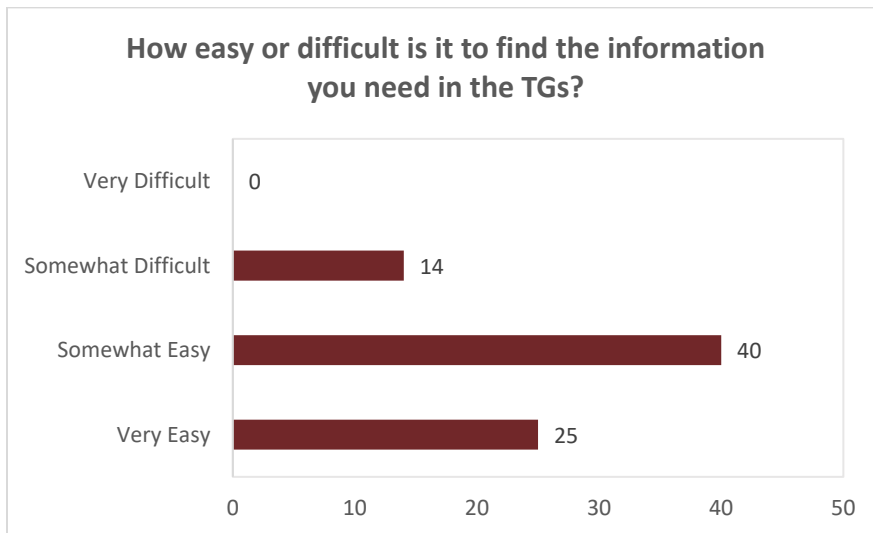


Figure 3. PCMO Survey Result. Source: OIG Survey, Question 9

The PCMOs provided additional positive feedback about TGs. According to our survey results, the majority of PCMOs agreed that the information included in the TGs was sufficient and found the TGs to be properly organized. The majority of PCMOs did not find the TGs' English text to be a language barrier and that it was easy for them to apply the practices outlined in the TGs. According to our survey results, the provision of healthcare in accordance with the TGs was not significantly impacted by healthcare resource limitations.

We also learned from our survey results that the PCMOs agree that TGs provide them with adequate guidance for clinical and administrative decision making. Overall, the survey results demonstrated that the majority of PCMOs find that the TGs are a useful and necessary resource for PCMOs providing healthcare to Volunteers. For additional graphs and survey data, see Appendix A.

TGS ARE OUT OF DATE AND THE CURRENT PROCESS FOR UPDATING TGS NEEDS IMPROVEMENT

As part of our evaluation, we reviewed the policies and tracking documents related to TGs and interviewed OHS and headquarters staff to better understand the TG revision and update processes. We found that TGs were inconsistently revised and updated.

The SOP that was in place during the scope of this review states:

The OHS utilizes Technical Guidelines which guide and direct the clinical and administrative decision making of OHS and Field Staff. The Technical Guidelines are documents that require review every two to three years. They can be developed and/or modified by units with the expertise but cannot be posted or circulated without review and documentation from the Quality Improvement Unit. New Technical Guidelines must be presented to the Clinical Standards Committee which is chaired by the OHS Medical Director. Technical Guidelines are to be maintained in an electronic file on the shared drive and presented on the agency intranet.

The SOP also states that the QI Unit is responsible for managing TG development, updates, and tracking. At the time of our review, we found that only one person in the QI Unit was responsible for tracking TG updates and was doing so by manually maintaining the information on a spreadsheet. Based on our interviews with OHS staff and an analysis of the TG tracking spreadsheets, we determined that this process was inadequate, inefficient, and vulnerable to human error.

Interviewed staff reported that there has consistently been a significant number of outdated TGs and that it was hard to ensure that the TGs were updated, at a minimum, every 3 years, as required in the Peace Corps SOP.¹ Many of the interviewed staff indicated that the agency needs an automated system to manage the TGs and support their updating process.

Peace Corps has contracted with a consultancy group to provide OHS with cloud-based software. OHS reports that this software will meet several of its needs, including support for the QI Unit's oversight of the Peace Corps overseas medical officers and medical facilities.

OHS stated that the software could improve TG management by automating its update schedule. According to documentation provided by OHS, the original project plan had its system deployment scheduled for March 3, 2023. As of April 2024, the software was going through the security testing process. At the conclusion of this evaluation, the software has yet to be launched, however, based on a briefing provided by OHS, OIG concurs that once implemented, the software, as an automation tool, has the potential to resolve the inadequacy and inefficiency issues identified in the TG update process. The software and its implementation may require further evaluation in the future.

OIG recommends that:

- 1. The Peace Corps develops a plan to implement automation of the Quality Improvement Unit's update process and management of Technical Guidelines and to assess its impact on the efficiency and effectiveness in managing and updating Technical Guidelines.**

¹Determining the number of TGs that were out of date was outside the scope of this review.

FLAGGING TECHNICAL GUIDELINES ISSUES

Based on the results of our survey, we found that the PCMOs regularly used TGs when providing healthcare to Volunteers. They reported that the guidelines were helpful and that they rarely deviated from the TGs. When asked, “How often do you report problems you experience with the TGs to OHS staff?”, most PCMOs responded “Rarely.” While OHS staff stated that they expect PCMOs to email headquarters about any problems with the TGs, our survey results show that most PCMO respondents rarely or never report TG problems to OHS staff (see Figure 4 below).

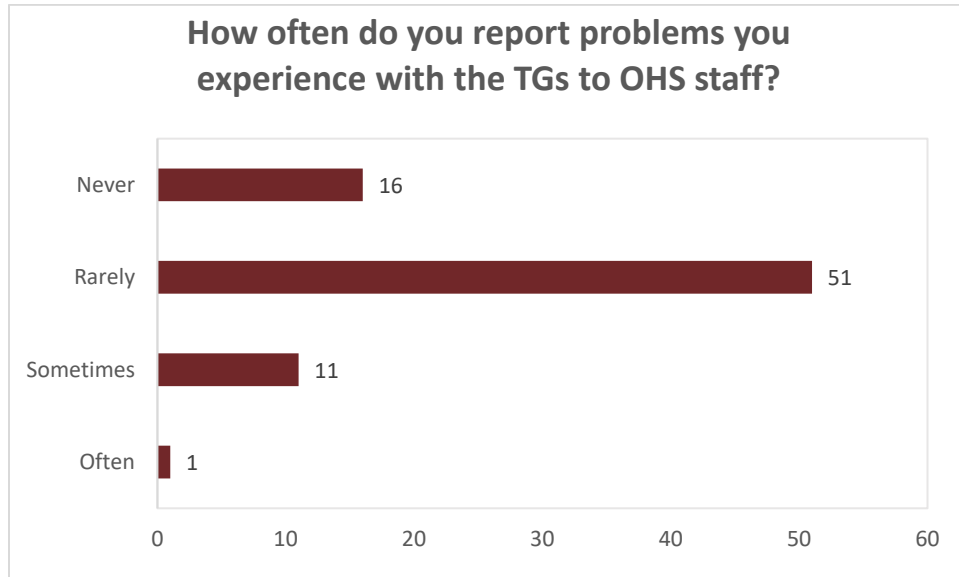


Figure 4. PCMO Survey Result on TG Access. *Source: OIG Survey, Question 22.*

In addition, most of the PCMOs who were surveyed indicated that they did not have a clear process for reporting questioned TGs that needed to be reviewed. The graph below shows that 59 out of 79 respondents stated that they did not have a clear process for flagging TGs that need review (see Figure 5). The PCMOs provide clinical expertise for Volunteers and are a critical resource to the success of the agency. Both Volunteer health and safety and the agency are at risk if PCMOs do not report the problems they experience with the TGs. We determined that the SOP does not address how TGs should be flagged for review. OIG is concerned that this perpetuates an unnecessary risk in the TG management system.

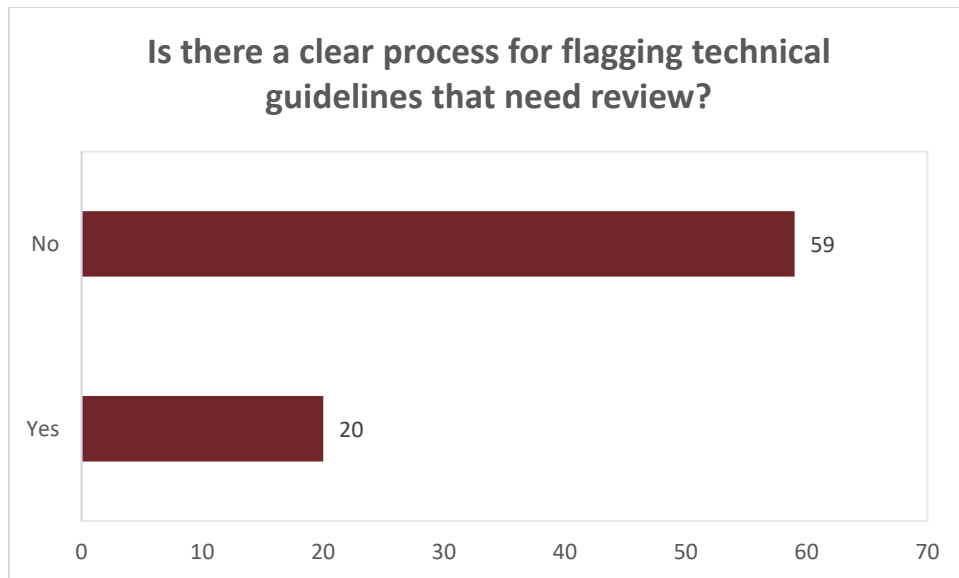


Figure 5. PCMO Survey Result on TG Access. Source: OIG Survey, Question 21.

OIG recommends that:

- 2. The Peace Corps develops a process or mechanism for PCMOs and other users to report TGs that need review, to include a procedure for how the issues will be systematically addressed.**

CLINICAL STAFF CAPACITY

Clinical staff are assigned to review and update specific TGs based on their expertise. During our evaluation, we learned that OHS leadership had concerns regarding the clinical staff's workload and availability to review TGs. While it was outside the scope of this review to assess staff capacity to support TG updates, we encourage the agency to evaluate staffs' ability to efficiently review their assigned TGs, ensure the SOP requirements are met, and remedy any identified issues in the review and update process.

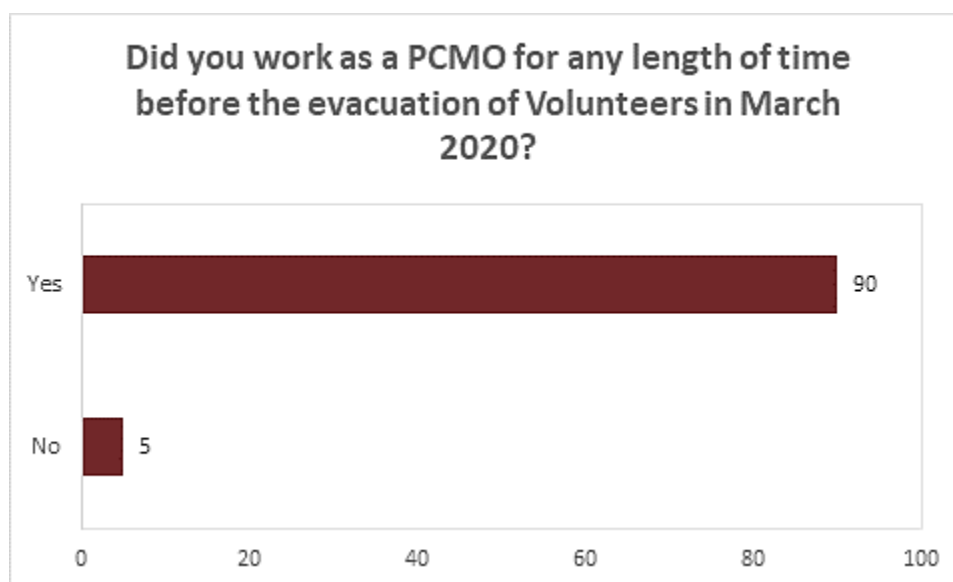
RECOMMENDATIONS

WE RECOMMEND THAT:

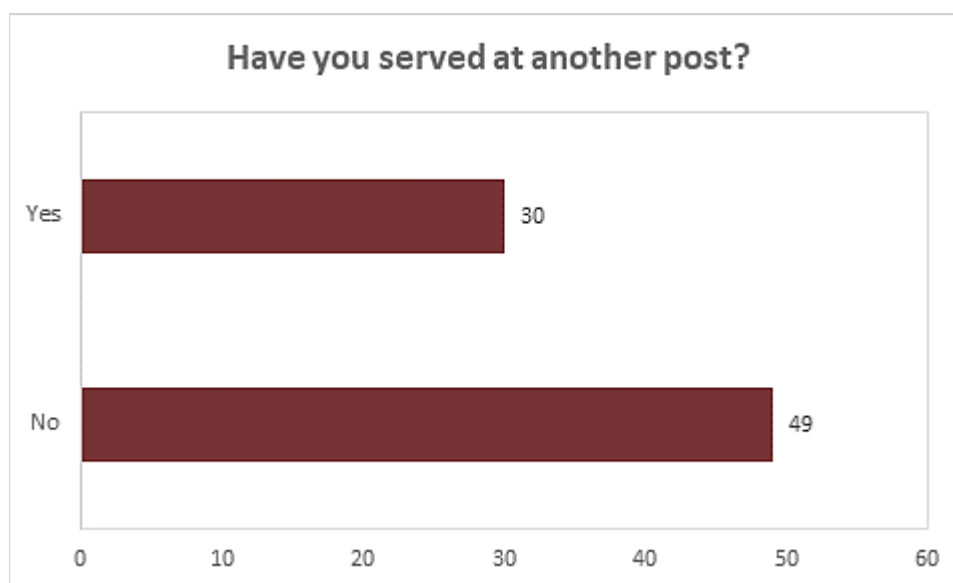
1. The Peace Corps develops a plan to implement automation of the Quality Improvement Unit's update process and management of Technical Guidelines and to assess its impact on the efficiency and effectiveness in managing and updating Technical Guidelines.
2. The Peace Corps develops a process or mechanism for Peace Corps Medical Officers and other users to report Technical Guidelines that need review, to include a procedure for how the issues will be systematically addressed.

APPENDIX A: SELECTED SURVEY RESULTS

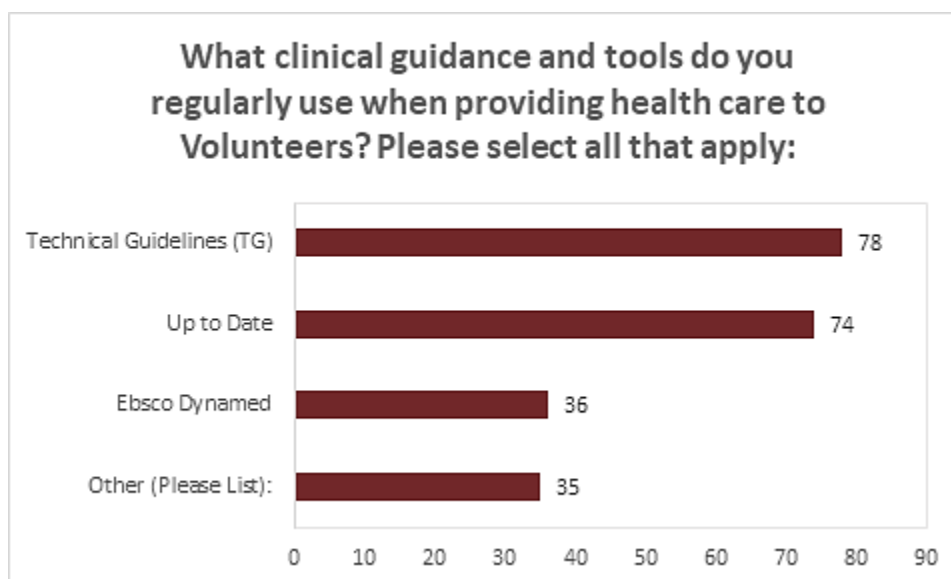
The survey consisted of 29 questions, both quantitative and qualitative, and was conducted using a survey platform. A response to each survey question was not required. The graphs below illustrate the quantitative data from the survey. There were 95 survey respondents out of a total of 104 PCMOs who were active in their position prior to the evacuation of Volunteers in 2020. Data was collected from October 27, 2022, to November 25, 2022.



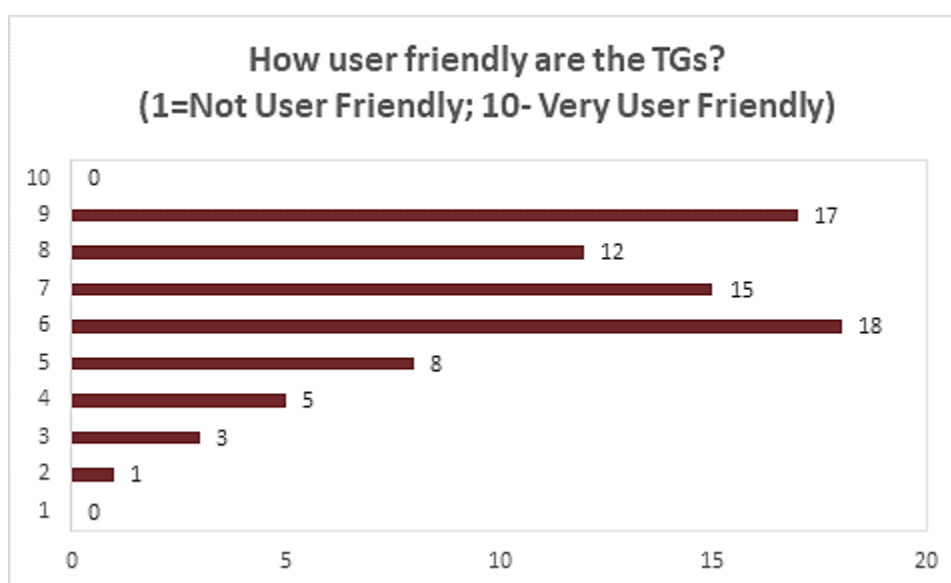
OIG Survey, Question 1.



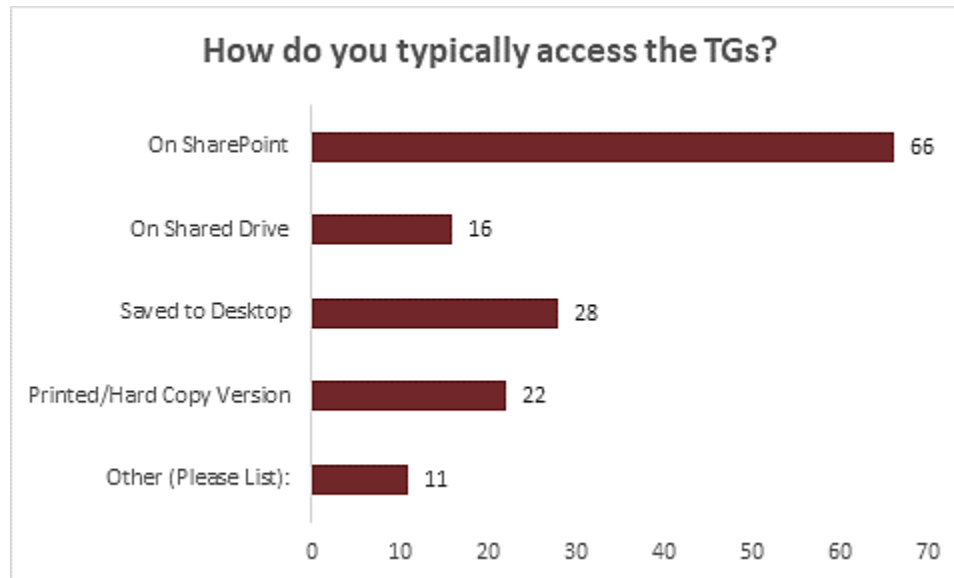
OIG Survey, Question 3.



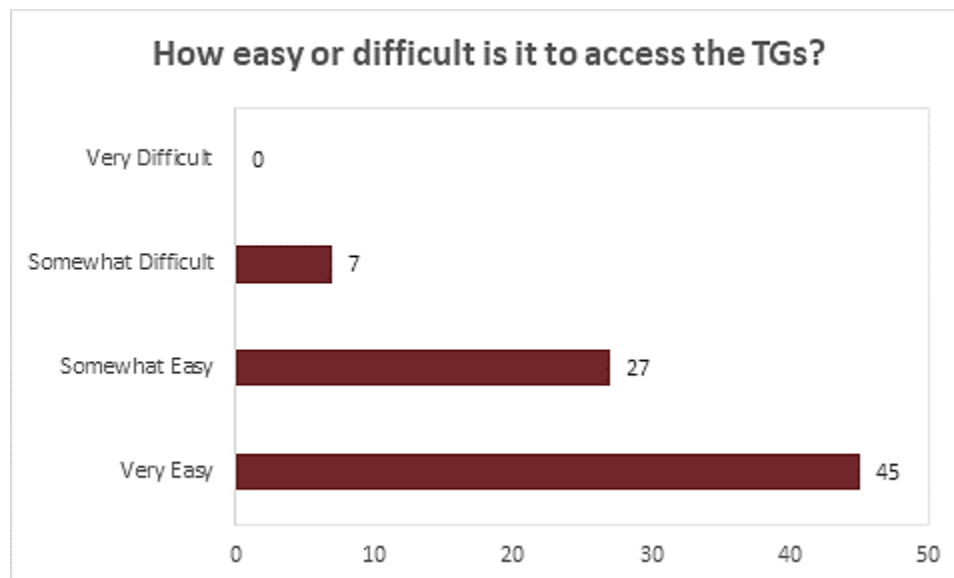
OIG Survey, Question 4.



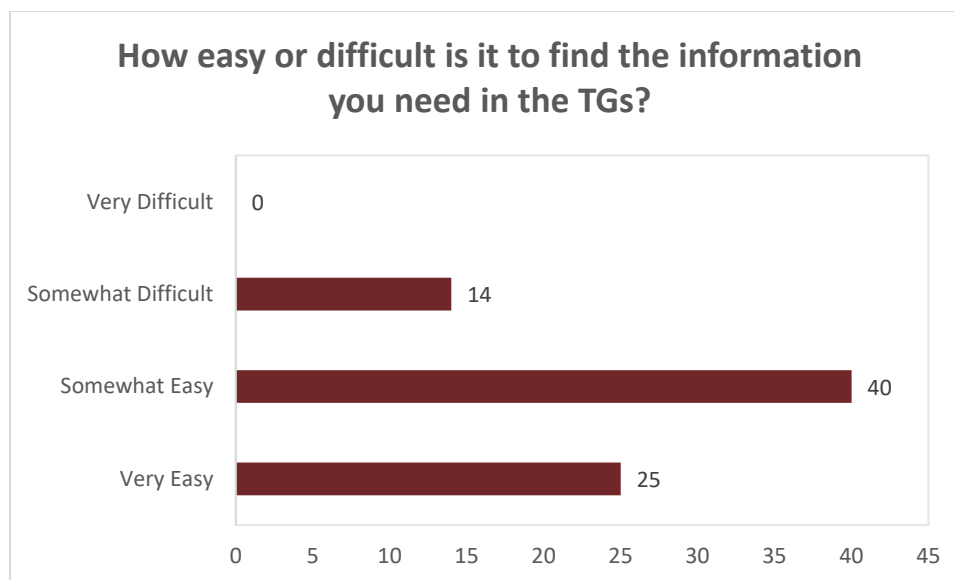
OIG Survey, Question 5.



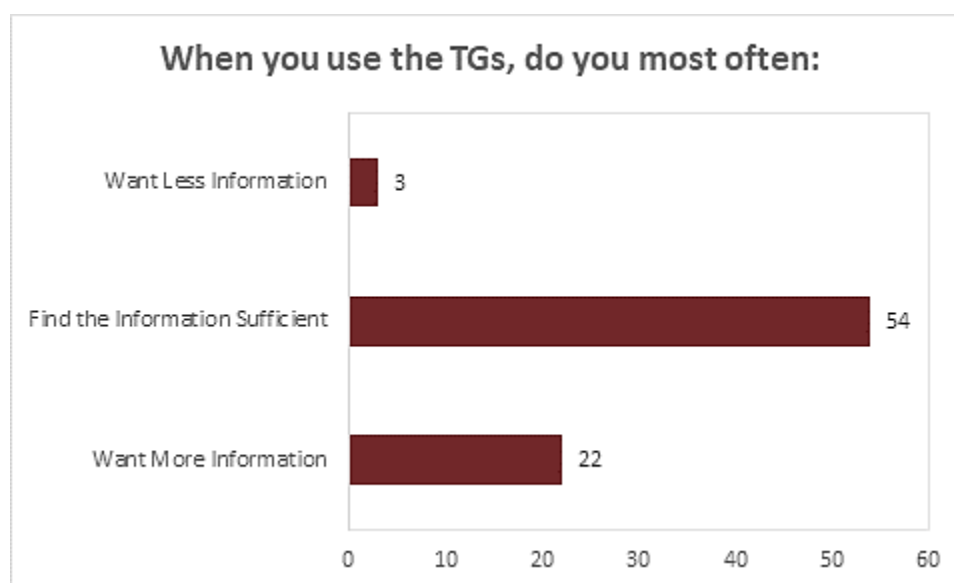
OIG Survey, Question 6.



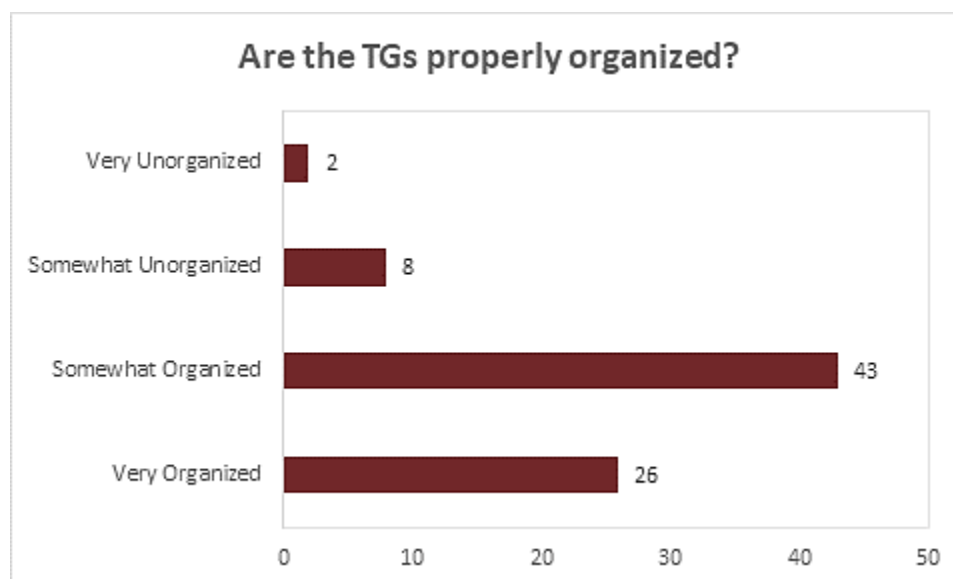
OIG Survey, Question 7.



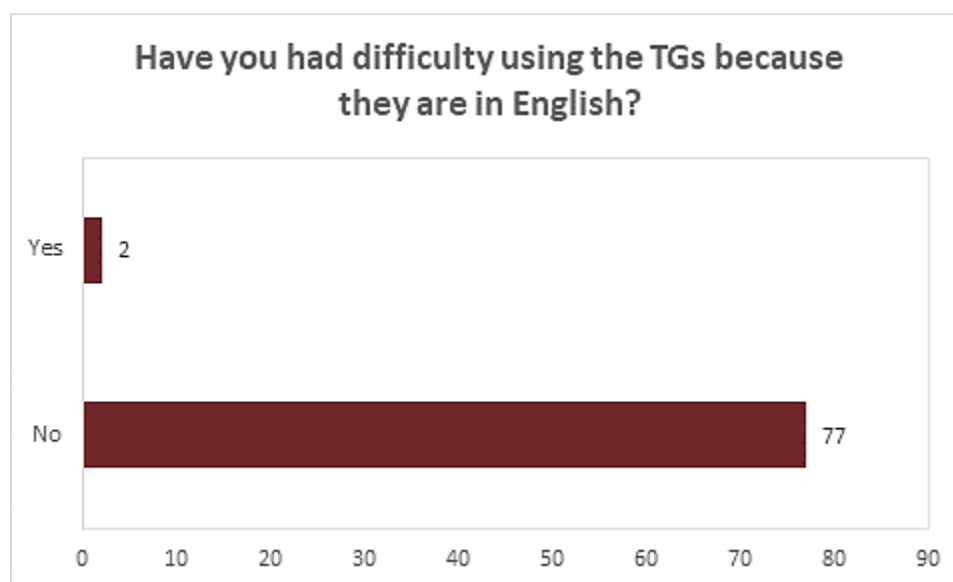
Source: OIG Survey, Question 9.



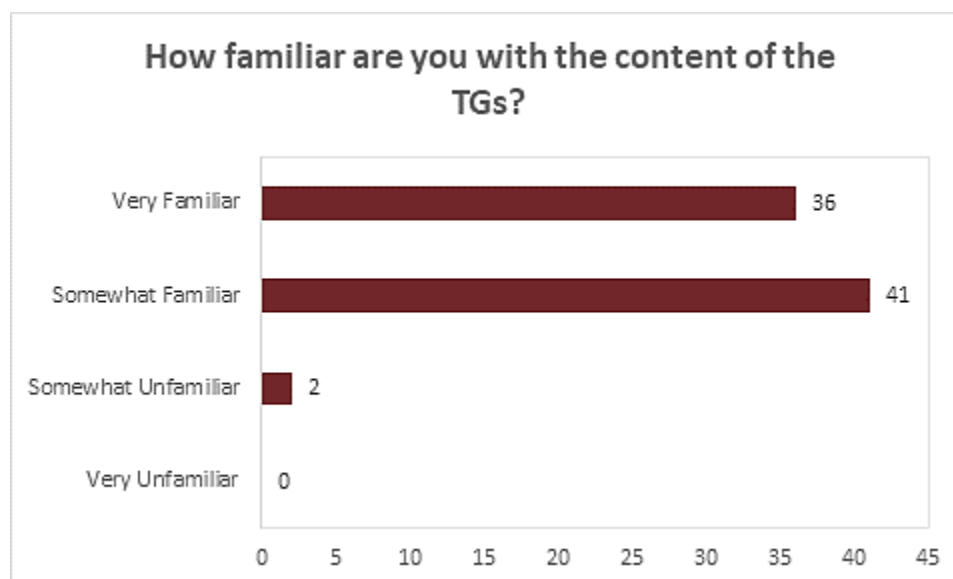
OIG Survey, Question 10.



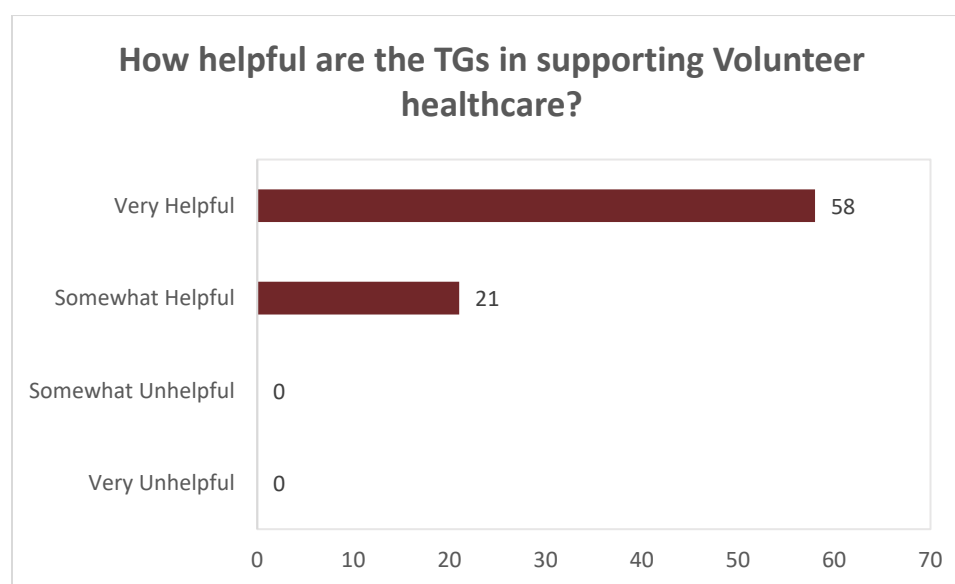
OIG Survey, Question 11.



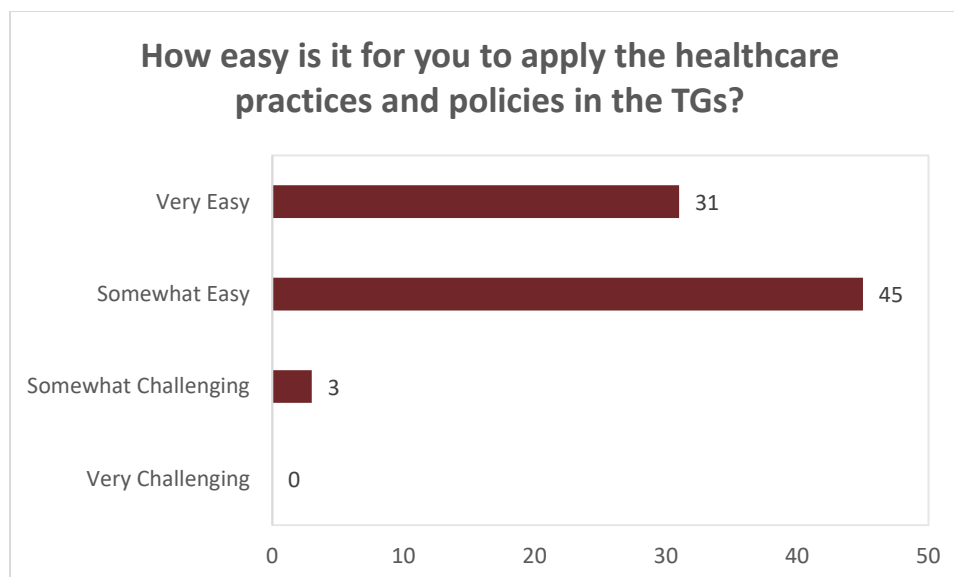
OIG Survey, Question 13.



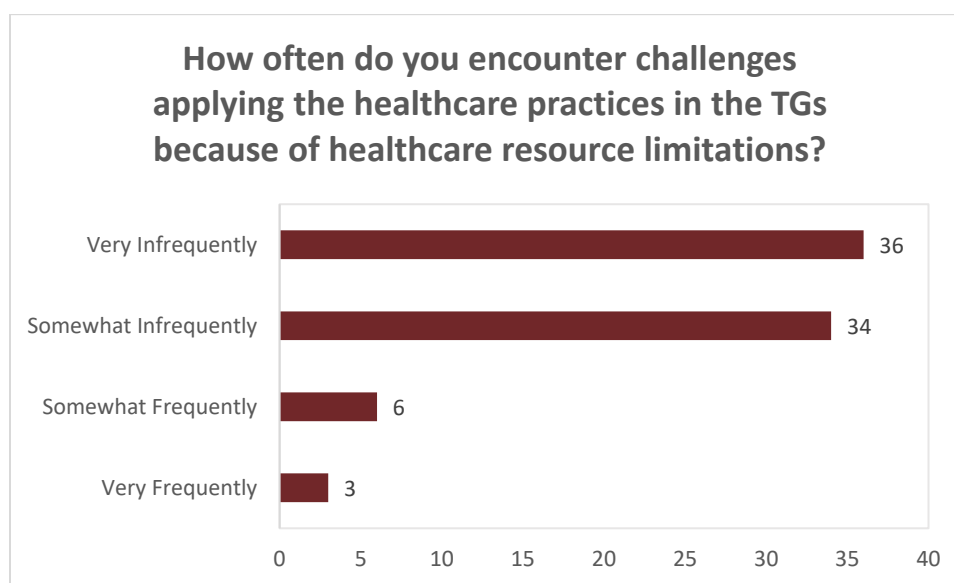
OIG Survey, Question 14.



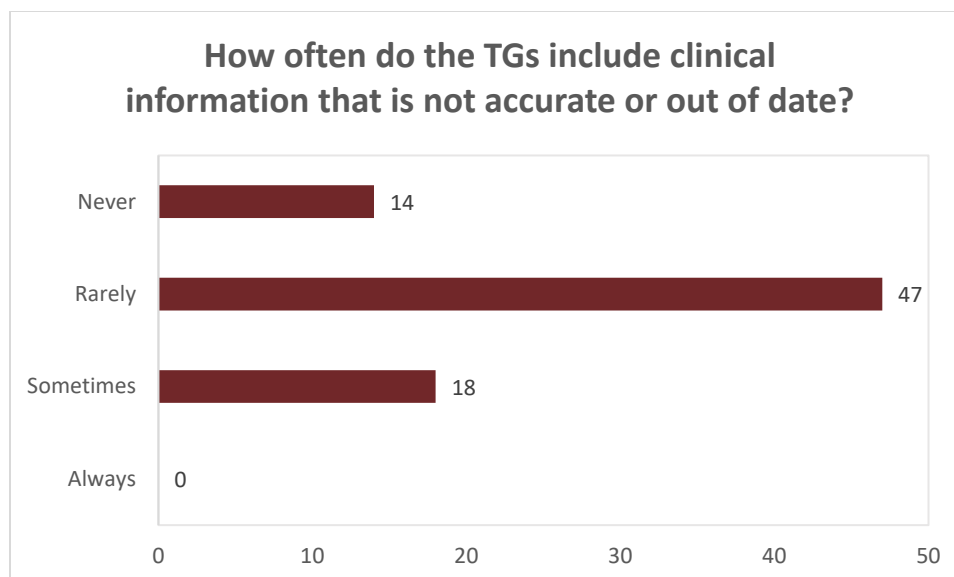
OIG Survey, Question 15.



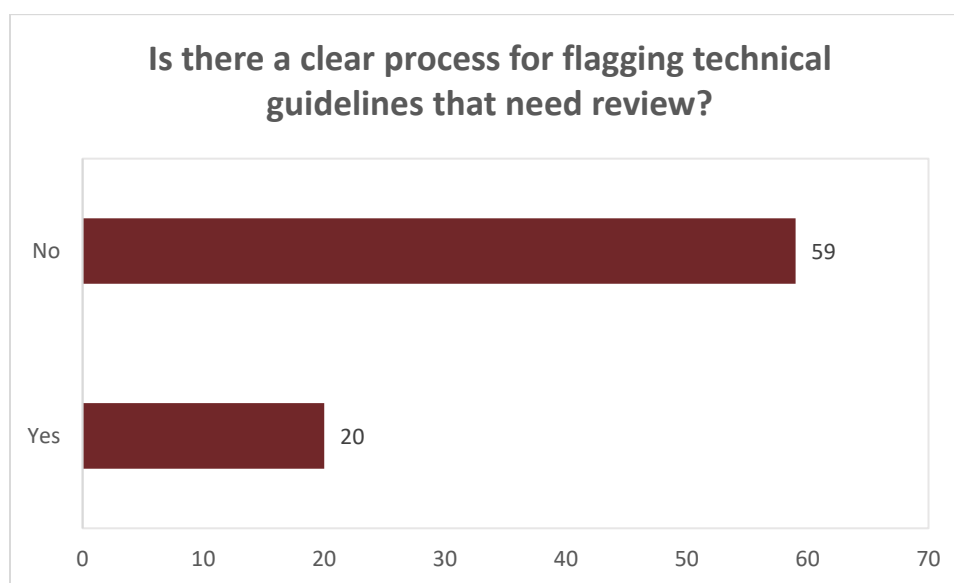
OIG Survey, Question 16.



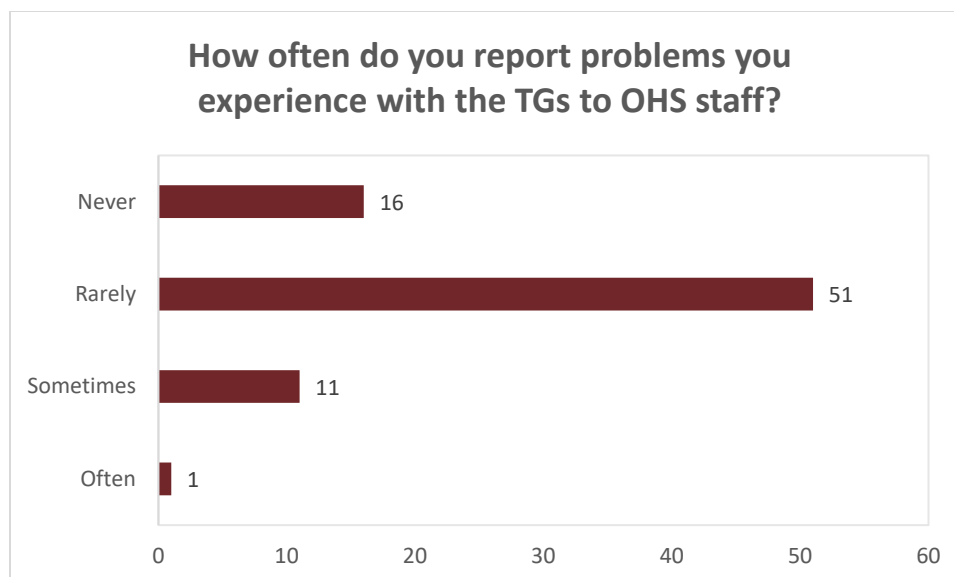
OIG Survey, Question 17.



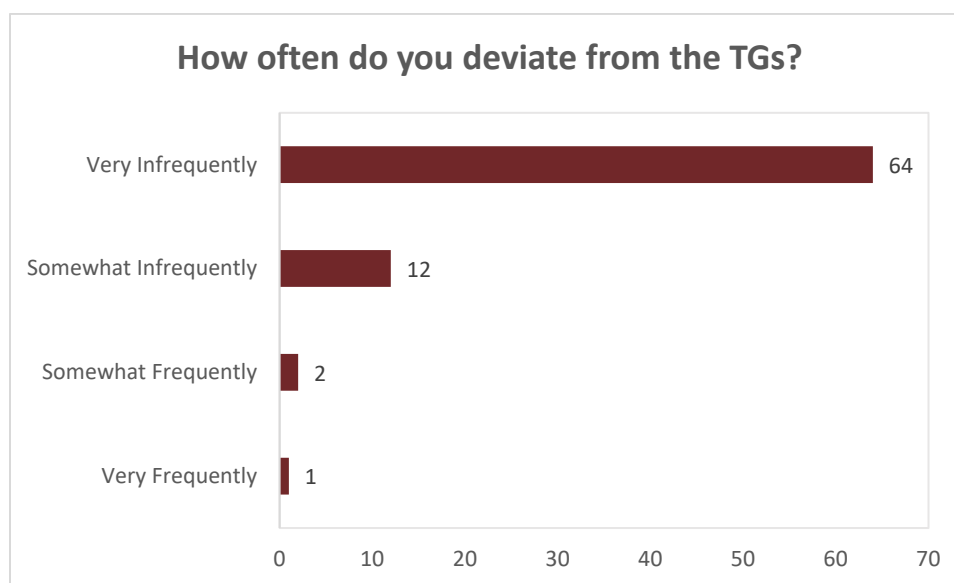
OIG Survey, Question 19.



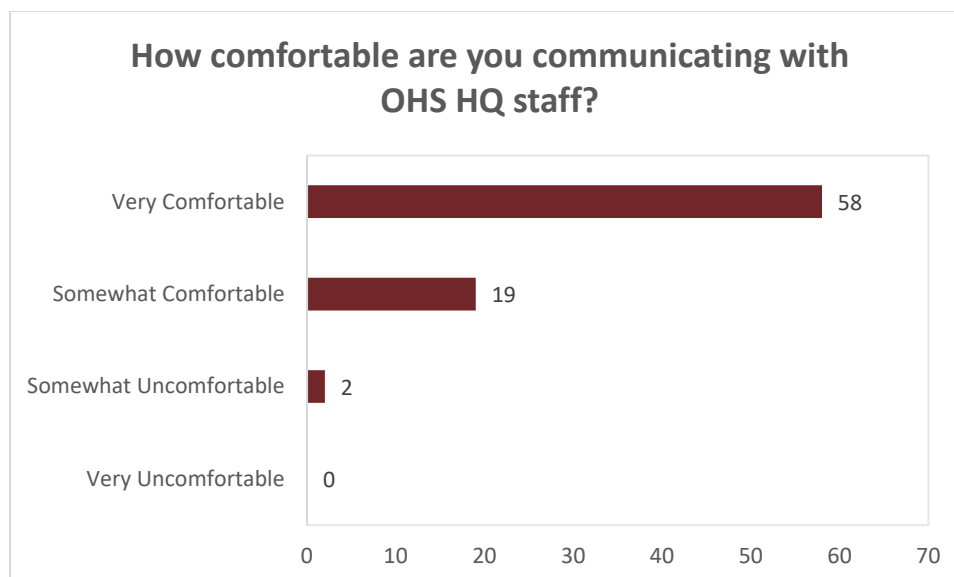
Source: OIG Survey, Question 21.



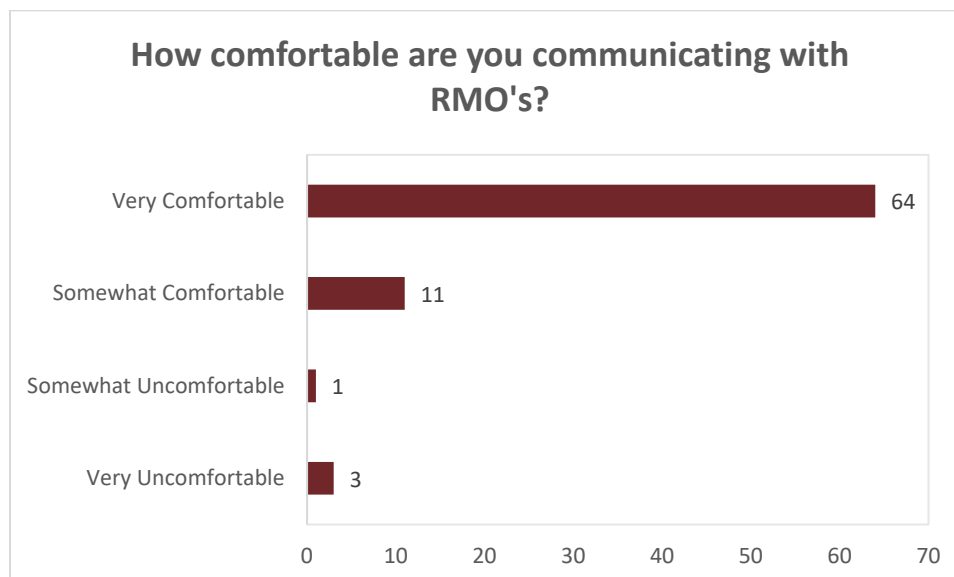
Source: OIG Survey, Question 22.



OIG Survey, Question 25.



OIG Survey, Question 26.



OIG Survey, Question 27.

APPENDIX B: LIST OF ACRONYMS

OHS	Office of Health Services
OIG	Office of Inspector General
PCMO	Peace Corps Medical Officer
RMO	Regional Medical Officer
SOP	The Peace Corps Office of Medical Services Standard Operating Procedure on the Development, Update, and Review of Technical Guidelines
TG	Technical Guideline
QI	Quality Improvement Unit

APPENDIX C: AGENCY COMMENTS



MEMORANDUM

TO: Joaquin Ferrao, Inspector General

FROM: David E. White Jr., Deputy Director **DAVID WHITE** Digitally signed by DAVID WHITE
Date: 2024.09.13 13:03:01 -04'00'

DATE: September 13, 2024

SUBJECT: Agency Response to the Preliminary Report: Evaluation of the Office of Health Services' Technical Guidelines' Revision and Implementation Process (Project No. 21-EVAL-05)

CC: Carol Spahn, Director
Lauren Stephens, Chief of Staff
Emily Haimowitz, Chief Compliance and Risk Officer
Stefanie Generao, Chief, Quality Improvement, Office of Health Services
Devin Meredith, Acting Associate Director, Office of Health Services
Laura Weir, Deputy Director, Office of Health Services
Ruchi Jain, General Counsel
Scott Beale, Associate Director, Office of Global Operations
Kris Besch, Senior Advisor, Office of Global Operations
Jennifer Piorkowski, Executive Secretariat

Thank you for the opportunity to respond to this preliminary report from the Office of Inspector General. Enclosed please find the agency's response to the recommendations made by the Inspector General as outlined in the OIG's Preliminary Report: Evaluation of the Office of Health Services' Technical Guidelines' Revision and Implementation Process (Project No. 21-EVAL-05) sent to the agency on Wednesday, July 17, 2024.

Recommendation 1

The Peace Corps develops a plan to implement automation of the Quality Improvement Unit's update process and management of Technical Guidelines and to assess its impact on the efficiency and effectiveness in managing and updating Technical Guidelines.

Concur

Response:

The Office of Health Services (OHS) has been working to develop a Quality Improvement (QI) software that, among other things, will improve the management of medical Technical Guidelines (TG). As mentioned in the OIG's report, the new software will automate the update schedule by tracking when the every-three-year updates are needed, its assigned author, and the revision history. The system is expected to go live by the end of 2024.

In addition to ensuring a successful launch of the QI software, OHS will develop a plan to assess the impact of the new software to measure whether it improved the efficiency and effectiveness in managing and updating the TGs. This will include tracking data available from the QI software including the average approval time for a TG, number of TGs in revision, and number of TGs overdue. This plan will be implemented by after enough data has been collected.

Documents to be Submitted:

- Screenshots from new QI software
- TG of the Medical Technical Guidelines
- Assessment plan

Status and Timeline for Completion: January 2025

Recommendation 2

The Peace Corps develops a process or mechanism for PCMOs and other users to report TGs that need review, to include a procedure for how the issues will be systematically addressed.

Concur

Response:

While Peace Corps Medical Officers (PCMOs) frequently provide feedback to the Office of Health Services (OHS) on the medical Technical Guidelines, there currently is not a documented process for PCMOs to report TGs that need revision. The new QI software has a function that will allow users, including PCMOs to add comments in a TG, which will be routed to the author of the TG and the OHS/Quality Improvement unit. OHS will update its TG on the Medical Technical Guidelines to ensure this process is clearly outlined.

Documents to be Submitted:

- Screenshot from new QI software
- TG of the Medical Technical Guidelines

Status and Timeline for Completion: January 2025

APPENDIX D: OIG RESPONSE

Management concurred with the two report recommendations, which remain open. In its response to the preliminary report, management described the actions it is taking or intends to take to address the issues that prompted each of our recommendations. We want to note that in closing recommendations, we are not certifying that the agency has taken these corrective actions or that we have reviewed their effects. Certifying compliance and verifying effectiveness are management's responsibilities. However, at its discretion, the OIG may conduct a follow-up review to confirm that actions have been taken and to evaluate the impact.

The OIG will consider closing the two recommendations once it receives the documentation referenced in the agency's response to the preliminary report. OIG is requesting additional documentation for recommendations 1 and 2. These recommendations will remain open pending confirmation that the Chief Compliance and Risk Officer has received the documentation reflected in our analysis below.

1. **The Peace Corps develops a plan to implement automation of the Quality Improvement Unit's update process and management of Technical Guidelines and to assess its impact on the efficiency and effectiveness in managing and updating Technical Guidelines.**

Concur

Response:

The Office of Health Services (OHS) has been working to develop a Quality Improvement (QI) software that, among other things, will improve the management of medical Technical Guidelines (TG). As mentioned in the OIG's report, the new software will automate the update schedule by tracking when the every-three-year updates are needed, its assigned author, and the revision history. The system is expected to go live by the end of 2024.

In addition to ensuring a successful launch of the QI software, OHS will develop a plan to assess the impact of the new software to measure whether it improved the efficiency and effectiveness in managing and updating the TGs. This will include tracking data available from the QI software including the average approval time for a TG, number of TGs in revision, and number of TGs overdue. This plan will be implemented by after enough data has been collected.

Documents to be Submitted:

- Screenshots from the new QI software
- TG of the Medical Technical Guidelines

- Assessment plan

Status and Timeline for Completion: January 2025

OIG Analysis

To close this recommendation, the agency should submit the screenshots from the new QI software, the TG of the Medical Technical Guidelines, and the assessment plan as described by the agency. In addition, they agency should submit documentation to show that the software has been launched, successfully implemented, and that PCMOs and other users have been trained on how the new software should be incorporated into their work processes. Finally, the assessment plan should address how much data will be collected in order to trigger implementation of it.

2. **The Peace Corps develops a process or mechanism for PCMOs and other users to report TGs that need review, to include a procedure for how the issues will be systematically addressed.**

Concur

Response:

While Peace Corps Medical Officers (PCMOs) frequently provide feedback to the Office of Health Services (OHS) on the medical Technical Guidelines, there currently is not documented process for PCMOs to report TGs that need revision. The new QI software has function that will allow users, including PCMOs to add comments in a TG, which will be routed to the author of the TG and the OHS/Quality Improvement unit. OHS will update its TG on the Medical Technical Guidelines to ensure this process is clearly outlined.

Documents to be Submitted:

- Screenshot from new QI software
- TG of the Medical Technical Guidelines

Status and Timeline for Completion: January 2025

OIG Analysis

To close this recommendation, the submitted documentation should include the stated screenshots from the new QI software, and the TG of the Meical Technical Guidelines. It should also include how PCMOs and other users will be trained to use the software, including how to add comments in a TG, and confirmation that TG authors are able to use this feedback in their process.

APPENDIX E: REVIEW PURPOSE, COMPLETION AND OIG CONTACT

REVIEW PURPOSE

In 1989, OIG was established under the Inspector General Act of 1978 and is an independent entity within the Peace Corps. The purpose of OIG is to prevent and detect fraud, waste, abuse, and mismanagement and to promote economy, effectiveness, and efficiency in government. The Inspector General is under the general supervision of the Peace Corps Director and reports both to the Director and Congress.

The Evaluation Unit provides senior management with independent evaluations and reviews of management and operations of the Peace Corps, including overseas posts and domestic offices. OIG evaluators identify best practices and recommend program improvements to comply with Peace Corps policies.

REVIEW COMPLETION

This review was conducted under the direction of Assistant Inspector General for Evaluations Reuben Marshall, by Christine Fagioletti, Kristen Hochreiter, Erin Balch, and Belen Carriedo.

OIG CONTACT

Following issuance of the final report, a stakeholder satisfaction survey will be distributed to agency stakeholders. If you wish to comment on the quality or usefulness of this report to help us improve our products, please contact Assistant Inspector General for Evaluations Reuben Marshall at rmarshall2@peacecorpsig.gov.

Help Promote the Integrity, Efficiency, and Effectiveness of the Peace Corps

Anyone knowing of wasteful practices, abuse, mismanagement, fraud, or unlawful activity involving Peace Corps programs or personnel should call or write the Office of Inspector General. Reports or complaints can also be made anonymously.

Contact OIG

Reporting Hotline:

U.S./International: 202.692.2915
Toll-Free (U.S. only): 800.233.5874

Email: OIG@peacecorpsoig.gov

Online Reporting Tool: peacecorps.gov/oig/contactoig

Mail: Peace Corps Office of Inspector General
1275 First Street NE
Washington, DC 20526

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