

# Inspection and Evaluation Committee

## President's Council on Integrity and Efficiency

July 2008



### INSPECTION AND EVALUATION COMMITTEE MEMBERS

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IG FDIC



### FOR MORE INFORMATION...

For more information about any item in this newsletter, or to contribute suggestions for future newsletters, please contact Cynthia Thomas at [cynthia.thomas@oig.hhs.gov](mailto:cynthia.thomas@oig.hhs.gov).

### I&E COMMUNITY SPOTLIGHT



As the Federal I&E community continues to grow, we will feature a different I&E unit or individuals from I&E units each month to familiarize readers with and provide insight on the organization and operations of units throughout the community.

### MEET HEALTH & HUMAN SERVICES' I&E UNIT

The HHS Office of Evaluation and Inspections (OEI) originally began in 1977 as the Office of Health Care Systems Review, in the former Department of Health, Education, and Welfare Inspector General's Office. The unit merged with other offices and was renamed several times over the years, first as the Office of Program Inspections, next as the Office of Systems Integrity, later as the Office of Analysis and Inspections, and finally in 1985 as the present Office of Evaluation and Inspections. Early OEI work featured employee surveys, best practices, and some analysis of limited data sets. As OEI grew in size and experience, its evaluations addressed multifaceted issues in ways that presented comprehensive information and



recommendations to decision-makers. Sophisticated statistical techniques were employed to ensure the integrity of the data collection and analysis. OEI has broadened its evaluation scope over the years and strives to issue reports on topics with significant impact on HHS programs and beneficiaries. In selecting evaluation topics, OEI focuses on the potential impact, methodological and resource feasibility, appropriateness to the OEI mission, and the timeliness of the issue. Significant attention is directed toward oversight of Medicare and Medicaid program operations as well as human services issues, such as the protection of human subjects in clinical trials, the integrity of organ donations, adoption and foster care protections, and bioterrorism preparedness. Additionally, OEI report recommendations have received interest by the Congress. For instance, laws enacted in the last decade, including the Balanced Budget Act of 1997, the Medicare Prescription Drug, Improvement, and Modernization Act of 2003, and the Deficit

### UPCOMING MEETING

A host is still needed for the next I&E Roundtable. If your office would like to host the next I&E Roundtable or submit agenda items, please contact Cynthia Thomas at [cynthia.thomas@oig.hhs.gov](mailto:cynthia.thomas@oig.hhs.gov) or 410-786-7896.

Reduction Act of 2005, contained numerous OEI report recommendations, which resulted in savings totaling billions of dollars in areas such as home health, durable medical equipment, and prescription drugs. OEI has strongly committed to staff development and training. Several years ago, OEI developed a set of core competencies that addressed all positions at all grade levels in the organization. The core competencies are divided into 7 broad skill areas (e.g., communication, research, and leadership and support), which are then further divided into a total of 37 specific skills (e.g., oral presentation, method selection, and project management). As needed, OEI develops training programs to address specific skills, which are provided to all staff throughout the organization. This approach ensures a baseline of understanding as it relates to essential skills for conducting evaluations. Every 2 years, OEI holds a national training conference that brings together staff for intensive training tied to the core competencies. Individuals can select from a variety of sessions to increase their competencies related to specific skills. Finally, seeing the need for additional leaders throughout the organization, OEI developed an internal leadership development program. Every year, up to five team leaders can apply and be selected for the program. While continuing to perform their regular duties, these individuals participate in a number of intensive leadership development training opportunities intended to provide them with the tools and experience to become future leaders within OEI.

## PCIE STANDARD OF THE MONTH

Periodically we will highlight a different PCIE standard in an effort to encourage the consistent application of these standards throughout the Inspector General community. The July PCIE standard of the month is quality control.



### QUALITY CONTROL

Each OIG organization that conducts inspections should develop and implement written policies and procedures for internal controls over its inspection processes/work to provide reasonable assurance of conformance with organizational policies and procedures, the "Quality Standards for Inspections," and other applicable policies and procedures. The nature and extent of these internal controls and their associated documentation will be dependent on a number of factors, such as the size and structure of the organization and cost-benefit considerations. As appropriate, organizations should seek to have quality control mechanisms that provide an independent assessment of inspection processes/work. Documentation of the execution of quality control mechanisms should be retained for a sufficient period of time to allow for evaluation and use in conjunction with other quality control mechanisms. This standard is part of the PCIE "Quality Standards for Inspections."



## EXTERNAL QUALITY REVIEW SURVEY

The Inspection and Evaluation Committee met last summer to discuss, in part, external



quality reviews for I&E units throughout the Inspector General community. At that meeting, the Committee members decided to explore further whether some form of external quality review process should be instituted for these units. Toward that end, Stuart Wright, Chair of the I&E Roundtable, will be forwarding a survey to all I&E Roundtable members. In consultation with their respective Inspectors General, the head of each I&E unit is asked to provide responses to questions about such things as what the community would like to achieve through external quality reviews, what information should be included as part of these reviews, and whether such reviews should be voluntary or mandatory. Responses to this survey are requested no later than July 25, 2008.

## TRAINING INFORMATION

If your I&E unit is conducting a training course in-house and there are extra slots, please consider opening the training to others in the community. You may send training information to [cynthia.thomas@oig.hhs.gov](mailto:cynthia.thomas@oig.hhs.gov).