

January 27, 2011

OFFICE OF THE MEDICAL INSPECTOR REPORTS

1. PURPOSE: This Veterans Health Administration (VHA) Directive outlines the roles and responsibilities for reviewing, processing, and distributing Office of the Medical Inspector (OMI) reports.

2. BACKGROUND

a. In 1980, the Department of Veterans Affairs (VA) established the OMI to assess and report on quality of care issues within VHA. OMI reports directly to the Under Secretary for Health. In Public Law 100-322, "Veterans Benefits and Services Act of 1988," Congress expanded the functions of the OMI and assigned the VA Inspector General an oversight role. This law addressed the Department's quality assurance activities, upgraded and expanded the OMI, and increased its number of employees to ensure the independence, objectivity, and accountability of that office.

b. The OMI exercises its quality of care assessment and reporting responsibilities by conducting two types of investigations:

(1) **Case Investigations.** Case investigations result from a patient, family member, or other stakeholder complaint and may result in a site visit to a facility. The investigations may address a single patient at a single facility, or may be more complex involving several patients or facilities.

(2) **National Assessments.** National assessments examine potential systemic issues in VHA and are broad in scope. They usually require surveys, data collection, and analysis of databases.

c. OMI reports, known as Blue Cover Reports, contain conclusions and recommendations for improvement, based on findings from a case investigation or national assessment. OMI's recommendations may be for an individual facility, a Veterans Integrated Service Network (VISN), or all of VHA. The Under Secretary for Health approves all OMI final reports. Applicable privacy and quality assurance disclosure laws apply to OMI reports. In response to a final report, VA facilities, VISNs, and VHA program offices, as appropriate, prepare action plans to address report recommendations.

d. The timely generation of a final OMI report requires contributions from staff of VA Central Office, VHA program offices, VISNs, and VHA facilities. The process and responsibilities that follow apply both to case investigations and national assessments. However, when dealing with national assessments, the OMI establishes the timeline for developing an action plan through negotiations with the responsible program office(s).

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3. POLICY: It is VHA policy that the OMI must continually assess the quality of VA health care and report its findings through case investigations and national assessments.

4. ACTIONS

a. **OMI**. OMI must:

(1) Brief the Principal Deputy Under Secretary for Health within 5 days of a site visit and submit a draft report to the Principal Deputy Under Secretary for Health 30 days after returning from the site visit.

(2) Distribute the draft report for review and comment to appropriate VA Central Office program offices, including the Office of the Deputy Under Secretary of Health for Operations and Management, who in turn sends it to the facility under review and its corresponding VISN;

(3) Distribute the draft report for review and comment to the VA Office of the General Counsel (OGC), the Office of Healthcare Inspections, and the VA Office of the Inspector General;

(4) Revise the draft report, incorporating appropriate comments;

(5) Obtain concurrences on the final draft report from the Deputy Under Secretary of Health for Operations and Management, OGC, and the Principal Deputy Under Secretary for Health.

(6) Submit the final draft report to the Under Secretary for Health for approval and signature;

(7) Send the final report to the Deputy Under Secretary of Health for Operations and Management along with a request for the facility to prepare a final action plan;

(8) Monitor the final action plan to completion;

(9) Prepare a fact sheet summarizing the final action plan and progress towards its completion for the Secretary of Veterans Affairs within 14 calendar days of acceptance of the plan; and

(10) Prepare a report package for the Under Secretary for Health for transmission to the Secretary of Veterans Affairs consisting of:

(a) A transmittal memorandum from the Under Secretary for Health to the Secretary of Veterans Affairs;

(b) Transmittal letters for the Under Secretary for Health's signature addressed to the Chairs of the Senate and House Committees on Veterans' Affairs; and

(c) The OMI final report, Fact Sheet, and Strategic Communication Review (VA Form 0907, Strategic Communication Review), summarizing the results of OMI's investigation and any personnel actions reported by the Deputy Under Secretary of Health for Operations and Management related to the investigation.

(11) Distribute the Final Report to the following:

- (a) The Under Secretary of Health;
- (b) The Principal Deputy Under Secretary for Health;
- (c) The Deputy Under Secretary of Health for Operations and Management;
- (d) Office of Quality and Safety;
- (e) Office of Performance Management;
- (f) Deputy Under Secretary for Health for Policy and Services;
- (g) Freedom of Information Act Officer (FOIA);
- (h) VA Office of Congressional and Legislative Affairs;
- (i) Office of Healthcare Inspections, VA Office of Inspector General; and
- (j) Other offices or facilities having responsibility for policy related to the report or for carrying out any part of the action plan.

(12) Submit a closure package to the Under Secretary of Health following the completion of the final action plan consisting of:

- (a) A transmittal memorandum from the OMI recommending closure of the investigation;
- (b) A closure fact sheet documenting that all facility action items have been completed; and
- (c) An acceptance memo from the Under Secretary of Health to the Deputy Under Secretary of Health for Operations and Management and the OMI closing the investigation.

b. **Program Office, VISN, or Facility.** The program office, VISN, or facility that is the subject of an OMI report must:

- (1) Submit comments and a draft action plan to the OMI within 14 calendar days of receiving the draft report; and

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(2) Submit a final action plan within 10 calendar days of receiving the final report to the OMI that addresses any revisions to the draft report. **NOTE:** *Program offices do not routinely prepare draft action plans for reports on national assessments*

c. **Reviewing Program Office.** The program office that is asked to review an OMI report must submit comments within 14 calendar days of receiving the draft report.

d. **VHA FOIA Officer.** The VHA FOIA Officer must respond to requests for OMI reports from individuals and organizations outside VA.

e. **VA Office of Congressional and Legislative Affairs.** The VA Office of Congressional and Legislative Affairs:

(1) Reviews and concurs on transmittal letters for the Under Secretary of Health's signature addressed to the Chairs of the Senate and House Committees on Veterans' Affairs; and

(2) Provides the final report to the Chairs of the Senate and House Committees on Veterans' Affairs.

5. REFERENCE: Public Law 100-322, Veterans Benefits and Services Act of 1988.

6. FOLLOW-UP RESPONSIBILITY: The Medical Inspector (10MI) is responsible for the content of this Directive. Questions may be addressed to (202) 461-4083.

7. RESCISSION: VHA Directive 2008-016 is rescinded. This VHA Directive expires on January 31, 2016.

Robert A. Petzel, M.D.
Under Secretary for Health

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