

August 2, 2011

COOPERATION WITH THE OFFICE OF THE MEDICAL INSPECTOR

1. PURPOSE: This Veterans Health Administration (VHA) Directive specifies policy regarding the cooperation needed in order for the Office of the Medical Inspector (OMI) to carry out its investigative functions and inquiries.

2. BACKGROUND: Established in 1980 by the Chief Medical Director (later, the Under Secretary for Health), the OMI is responsible for investigating the quality of care in the Department of Veterans Affairs (VA) health facilities. In 1984, a memo of understanding between the Chief Medical Director and the Office of the Inspector General (OIG), entitled *Statement of Responsibilities and Relationships between the Office of the Medical Inspector and the Office of the Inspector General*, affirmed the investigative function of the OMI and defined the oversight role of the OIG. Senate Oversight hearings in September 1980 confirmed the OMI's placement within the VHA and its direct reporting to the Under Secretary for Health, provided that the OIG retained oversight.

b. Eight years later, Congress expanded the functions of the OMI through Public Law 100-322, Veterans Benefits and Services Act of 1988. The law addressed the Department's quality assurance activities, which included "upgrading and expanding of the Office of the Medical Inspector...increasing the number of employees...to ensure the independence, objectivity, and accountability of that office." Since that time, the number of OMI staff has fluctuated and currently stands at 23 full-time equivalent (FTE) employees, with 21 positions currently filled.

c. The OMI serves as independent arm of the Office of the Under Secretary for Health, responsible for investigating the quality of medical care provided by the VHA, and for independent review of VHA offices that manage quality and performance activities. The OMI also conducts reviews of systemic issues such as credentialing and privileging, as directed or approved by the Under Secretary for Health. The OMI may also review care provided to Veterans by contractual arrangements at VA facilities.

3. POLICY: It is VHA policy that VHA officials and staff must cooperate with OMI, and that requests for information or follow-up by the OMI are to be viewed as requests by the Under Secretary for Health.

4. ACTION

a. **Office of the Medical Inspector (OMI).** Although OMI functions independently with oversight by the OIG, the OMI has primary responsibility for:

(1) Conducting individual case reviews, program reviews, or reviews of systemic issues or other issues determined by the Medical Inspector to be within the scope of the OMI.

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(2) When indicated by the information received or through other circumstances, establishing a team to investigate an issue.

(3) Coordinating and collaborating with the parties involved in an investigation.

(4) Presenting the findings of an inquiry to the Under Secretary for Health.

b. **VHA Program Officers, Veterans Integrated Service Network (VISN) Directors, and Facility Directors.** Each VHA Program Officer, VISN Director, and Facility Director is responsible for ensuring:

a. Requests for information from the OMI (whether oral or in writing), are promptly and completely answered. The OMI, as a component of VHA, has legal authority under applicable Federal privacy laws and regulations to access and use any information, including health information, maintained in VHA records for the purposes of health care operations and health care oversight. The OMI's requests for information must be honored. If any problems in responding are anticipated, the OMI is to be contacted immediately to review issues and to determine how they will be handled. The OMI's decision in this regard is final.

b. Maximum support and assistance is provided to an OMI team in the course of an investigation. Should the effort required to respond promptly to an OMI request impinge on a unit's ability to do its work in a timely manner, the unit, through the program office and facility Director, may request an extension for replying.

c. When issues arise that might lead to questions or difficulties regarding provision of information to or support for the OMI team, the Medical Inspector is contacted directly.

5. REFERENCES: None.

6. FOLLOW-UP RESPONSIBILITY: The Office of the Medical Inspector (10MI) is responsible for reporting on compliance with the contents of this VHA Directive. Questions may be addressed to 202-461-4083.

7. RESCISSION: VHA Directive 2006-042 dated June 27, 2006, is rescinded. This VHA Directive expires August 31, 2016.

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

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