



**OIG**

**Office of Inspector General**

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Office of Audits

August 2018

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**Management Assistance Report:  
Medical Personnel Assigned to Protective  
Movement Details at U.S. Embassy  
Baghdad, Iraq, Lack Access to Needed  
Medications**

**MANAGEMENT ASSISTANCE REPORT**

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## Summary of Review

During an audit that is currently underway involving the management and oversight of security services provided to U.S. Embassy Baghdad, Iraq, for the Department of State's (Department) Bureau of Diplomatic Security (DS), the Office of Inspector General (OIG) discovered that paramedics assigned to protective movement security teams do not possess the medications needed to render aid to severely injured personnel. Specifically, the medications required but not available are Ketamine, Diazepam, Midazolam, Morphine, and Oxycodone. These medications are used to help manage pain resulting from severe injury and have not been available for more than a year.

In September 2016, the Bureau of Administration, Office of Logistics Management, Office of Acquisitions Management (A/LM/AQM), on behalf of DS, awarded the Worldwide Protective Services (WPS) II contract Task Order 2 to Triple Canopy, Inc. to provide protective movement security services for U.S. Embassy Baghdad. To carry out its responsibilities, Triple Canopy hired paramedics to accompany the protective movements. The paramedics were expected to carry with them specific controlled medications when accompanying a security movement. In accordance with contractual provisions, the Department's Office of Medical Services, Office of Operational Medicine (MED/OM), was required to review and clear the medications in April 2017. However, as of June 20, 2018, Triple Canopy has not obtained these medications, in part, because the Government of Iraq will not allow security contractors to import controlled medications into Iraq. According to DS officials, they have worked with Triple Canopy to obtain the Government of Iraq's permission to import the medications but have not been successful.

Despite the impasse with the Government of Iraq, DS expressed its belief that the contract requires Triple Canopy to obtain the medications. However, the Foreign Affairs Handbook (FAH) also states that "*where necessary, [DS] and/or post will facilitate importation of medication.*"<sup>1</sup> OIG concludes that this is a circumstance in which such facilitation is "necessary."

OIG made one recommendation in this report. Specifically, OIG recommended that DS, in conjunction with A/LM/AQM, assess the issues preventing the importation of the required medications and take appropriate action to facilitate the acquisition of those medications necessary to support the efforts of paramedics assigned to protective movement details at U.S. Embassy Baghdad. In response to a draft of this report, DS concurred and stated that it had taken steps to implement the recommendation. Specifically, DS reached an agreement with the Bureau of Administration, Logistics Management Diplomatic Pouch and Mail to ship the controlled medications. Barring any issues, DS expects the first shipment of medicines to be sent to Baghdad in July 2018. On the basis of the actions taken by DS, OIG considers the recommendation resolved, but the recommendation will remain open until OIG receives documentation demonstrating that Triple Canopy paramedics have received the required medicines. DS's response to a draft of this report is reprinted in Appendix A.

## BACKGROUND

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DS uses contractors to assist in the protection of personnel, information, and national security-related activities globally, including to pre-plan, organize, establish, deploy, and operate protective security details for U.S. Embassy personnel under chief of mission authority. In 2010, A/LM/AQM, on behalf of DS, awarded the WPS contract to provide protective movement and static security services worldwide in high-risk and high-threat environments. The WPS contract was an indefinite delivery/indefinite quantity contract under which contractors competed for specific task orders awarded under the contract. The WPS contract required contractors to plan, manage, and provide various security services, including static guard security, protective movement security, and emergency response teams, as assigned.

In February 2016, A/LM/AQM awarded the WPS II contract to provide a continuation of the security services to seven contractors: the contract had a “not-to-exceed” value of \$10.2 billion. A/LM/AQM awarded Task Order 2 to Triple Canopy, Inc.<sup>1</sup> to provide protective movement security services for U.S. Embassy Baghdad. As part of the security services prescribed in the contract, Triple Canopy hired paramedics to accompany protective movements. Task Order 2 commenced on October 12, 2016, with a “not-to-exceed” value of \$812.1 million during 5 years.<sup>2</sup>

The WPS II contract requires the contractor to establish a set of clinical protocols addressing specific medical conditions that take into account MED/OM practice guidelines.<sup>3</sup> As part of clinical protocols, the contractor identifies the controlled and non-controlled medications that paramedics can administer. The WPS II contract also required Triple Canopy to submit the clinical protocols to the Contacting Officer for review and clearance from MED/OM to make sure they comply with the Department’s practice guidelines upon Task Order 2’s commencement. Triple Canopy did so. The medications associated with the clinical protocols prepared by Triple Canopy and approved by MED/OM are Ketamine, Diazepam, Midazolam, Morphine, and Oxycodone. These medications are intended to help manage pain resulting from severe injury.

### **Purpose of the Ongoing Audit and Management Assistance Report**

OIG is conducting an audit, which is currently underway, to determine whether DS’s management and oversight of WPS II, Task Order 2 is in accordance with Federal and Department regulations and guidance, including DS policies and procedures. This Management Assistance Report is intended to provide early communication about a deficiency that OIG identified during the audit. OIG is reporting this deficiency in accordance with generally accepted government auditing standards and believes that the evidence obtained reasonably

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<sup>1</sup> Triple Canopy, Inc. is a subsidiary of Constellis, which provides security, risk management, and operational support services to government and commercial clients worldwide.

<sup>2</sup> This includes a base year and 4 option years, with the base year operations period of performance starting September 2016 and extending through September 2017, and option years starting from September 2017 and extending to September 2021.

<sup>3</sup> WPS II Contract No. SAQMMA16D0048, Appendix 13, Section 1.

supports the deficiency identified in this report. This report relates to the overseas contingency operation, Operation Inherent Resolve, and was completed in accordance with OIG's oversight responsibilities described in Section 8L of the Inspector General Act of 1978, as amended.

## RESULTS

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As of June 20, 2018, it has been more than a year that Triple Canopy's paramedics have operated without required medications available to them when accompanying security movements. Although MED/OM cleared these controlled medications in Triple Canopy's paramedic clinical protocols, the Government of Iraq subsequently denied the company the license to import the controlled medications. These medications are needed to manage the pain of any severely injured personnel. According to DS officials, they worked with Triple Canopy to obtain the Government of Iraq's permission to import the medications but have not been successful. DS also takes the position that it is primarily Triple Canopy's contractual responsibility to obtain the medications. However, the FAH specifically states that "*where necessary, [DS] and/or post will facilitate importation of medication*" in connection with the WPS program. However, to date, DS has not taken steps to facilitate importation. Because this issue has persisted for more than a year, OIG is issuing this Management Assistance Report to bring attention to this important matter.

### Contractor Efforts in Meeting Clinical Protocol Requirements

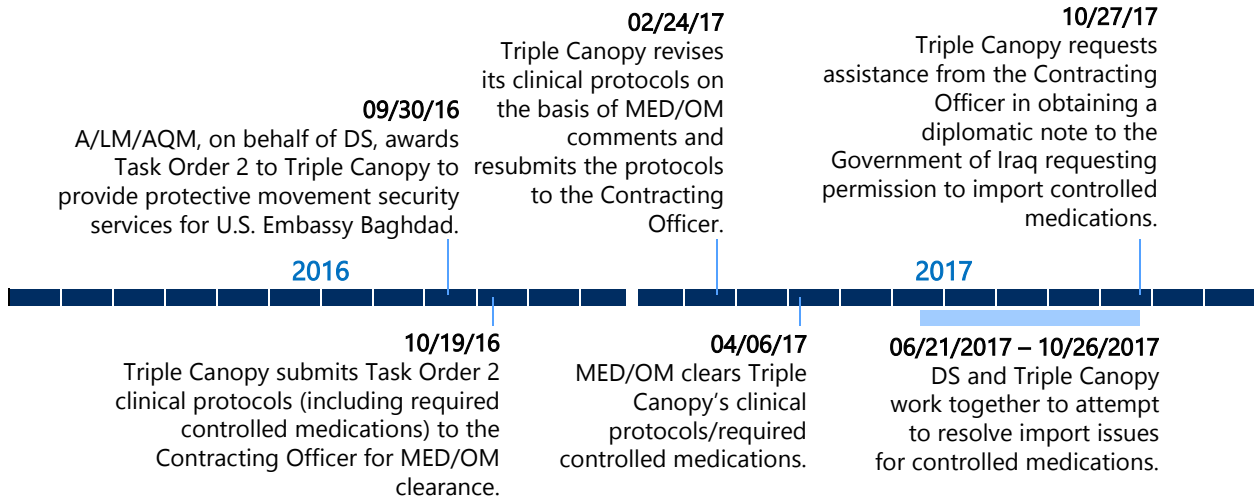
In accordance with contract requirements, Triple Canopy prepared and submitted its paramedic clinical protocols to the Contracting Officer on October 19, 2016, who then sent them to MED/OM for review. MED/OM asked for revisions; Triple Canopy subsequently revised the protocols and resubmitted them on February 24, 2017. MED/OM reviewed the revised protocols and cleared them on April 6, 2017, about 6 months after Task Order 2's commencement. For the paramedic clinical protocols, MED/OM cleared five controlled medications: Ketamine, Diazepam, Midazolam, Morphine, and Oxycodone. These medications are intended to manage pain resulting from severe injury.

After MED/OM cleared the clinical protocols in April 2017, Triple Canopy submitted a request to a medical vendor to procure the controlled medications. Before the vendor could ship the medications, however, Triple Canopy was notified that it needed the approval of the Government of Iraq. Triple Canopy began working with DS to obtain the Government of Iraq's approval but, as of June 20, 2018, has not been successful. According to DS officials, the Government of Iraq will not allow security contractors to import controlled medications into Iraq.

Email communications between Triple Canopy and DS between June 2017 and October 2017 showed that DS prepared a diplomatic note to the Government of Iraq, requesting that it grant Triple Canopy permission to import the medications. Neither DS nor Triple Canopy has records later than October 2017 showing additional efforts to obtain the Government of Iraq's approval to import the controlled medications. According to DS officials, Triple Canopy's medical vendor has been unable to import the medications into Iraq throughout this time period.

Figure 1 shows key events relating to this issue.

**Figure 1: Timeline of Key Events - Clinical Protocol Controlled Medications**



Source: OIG generated from information provided by DS, AQM, and Triple Canopy.

### DS Has Not Facilitated the Importation of Necessary Medications

DS officials told OIG that it is their belief that it is Triple Canopy's responsibility to obtain the medications. The Contracting Officer's Representative (COR) and Assistant Contracting Officer's Representative (ACOR) for Task Order 2 cited the contract's language generally requiring Triple Canopy to manage risks and issues. Specifically, contract section C.3.3 *Task Order Performance Location Business Risks* states that,

The Contractor shall be capable of effectively managing a wide array of business risks and issues, particularly those associated with working in high risk/high threat and international environments. Such risks include, but are not limited to, exposure to loss, labor disputes, political unrest, exporting/importing regulation compliance especially regarding the manufacture and export of items and services controlled under the International Traffic in Arms Regulations and dual-use items controlled under the Export Administration Act, unstable local politics, geographic issues, and vastly different legal systems, all of which can have a profound effect on the Contractor's ability to meet contractual requirements.<sup>4</sup>

Also, contract section H.26.A, Special Contract Requirements/Deductions, states that, "the contractor, not the Government, is responsible for management and quality control to meet the terms of the contract. The role of the Government is to monitor contractor performance to ensure that contract standards are achieved."

The FAH, however, does not support DS's position that Triple Canopy has sole responsibility to resolve the problem. The FAH does state that "[c]ontracts/task orders must stipulate that the acquisition, importation, and transport of over the counter, prescription, and *controlled medications to be used in support of WPS program services are the responsibility of the*

<sup>4</sup> WPS II Contract No. SAQMMA16D0048, C3.3.

*contractor [emphasis added],*" and that "[h]ost country laws regarding the importation and use of medications must be considered when establishing medical services as part of a WPS program deployment."<sup>5</sup> However, the same provision also states that "*where necessary, [DS] and/or post will facilitate importation of medication.*"

When OIG asked what efforts DS had made to facilitate Triple Canopy's efforts, Task Order 2's COR and ACOR told OIG that, beyond the diplomatic note in October 2017, DS has not pursued the matter further or attempted to negotiate with the Government of Iraq. Instead, DS officials added that they have been focusing on addressing Triple Canopy's overall inability to secure adequate levels of staff to execute Task Order 2's requirements. In addition, citing DS's understanding of the contract's terms and conditions, DS officials reiterated that it is Triple Canopy's responsibility to obtain the medications.

## Conclusion

As of June 20, 2018, the required Task Order 2 controlled medications that are needed to render aid to severely injured personnel remain unavailable 14 months after they were approved by MED/OM. Despite DS's position that Triple Canopy is responsible for obtaining the medication, the FAH specifically stipulates that DS or other entities may need to provide assistance. Unless DS takes action to "facilitate importation," this problem will persist, and the paramedics assigned to protective movement security teams will not have the medications necessary to manage the pain of any severely injured personnel.

In a meeting with DS to present the findings of this Management Assistance Report, DS officials told OIG that they had recently reached an agreement with A/LM/AQM to ship the controlled medications required in the contract task order.<sup>6</sup> Once OIG receives documentation demonstrating that the paramedics have received the required medications, OIG will close the recommendation. However, until that time, the recommendation will remain open and OIG will track its implementation through the audit compliance process.

**Recommendation 1:** OIG recommends that the Bureau of Diplomatic Security, in conjunction with the Bureau of Administration, Office of Logistics Management, Office of Acquisitions Management, assess the issues preventing the importation of the five controlled medications—Ketamine, Diazepam, Midazolam, Morphine, and Oxycodone—and take appropriate action to facilitate the acquisition of the medications necessary to support the efforts of paramedics assigned to protective movement details at U.S. Embassy Baghdad.

**Management Response:** In response to a draft of this report (see Appendix A), DS officials stated that they had recently reached an agreement with the Bureau of Administration, Logistics Management Diplomatic Pouch and Mail to ship the controlled medications to Baghdad. Barring any issues, DS expects the first shipment of medicines to be sent in July 2018.

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<sup>5</sup> 12 FAH-3, H 327.1.

<sup>6</sup> The meeting was held June 20, 2018, at DS Headquarters in Arlington, VA.

**OIG Reply:** On the basis of the actions taken by DS, OIG considers the recommendation resolved pending further action. This recommendation will be closed when DS provides OIG documentation demonstrating that Triple Canopy paramedics have received the required medicines.

## RECOMMENDATION

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**Recommendation 1:** OIG recommends that the Bureau of Diplomatic Security, in conjunction with the Bureau of Administration, Office of Logistics Management, Office of Acquisitions Management, assess the issues preventing the importation of the five controlled medications—Ketamine, Diazepam, Midazolam, Morphine, and Oxycodone—and take appropriate action to facilitate the acquisition of the medications necessary to support the efforts of paramedics assigned to protective movement details at U.S. Embassy Baghdad.



# APPENDIX A: RESPONSE FROM BUREAU OF DIPLOMATIC SECURITY

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United States Department of State

Washington, D.C. 20520

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July 18, 2018

## INFORMATION MEMO TO INSPECTOR GENERAL LINICK - OIG

FROM: DS – Michael T. Evanoff *ME* JUL 19 2018

SUBJECT: Bureau of Diplomatic Security response to the Office of Inspector General (OIG) Management Assistance Report: Medical Personnel Assigned to Protective Movement Details at U.S. Embassy Baghdad, Lack Access to Needed Medications

Below is the Bureau of Diplomatic Security's (DS) response to Recommendation #1 of the draft subject report.

**Recommendation #1:** OIG recommends that the Bureau of Diplomatic Security, in conjunction with the Bureau of Administration, Office of Logistics Management, Office of Acquisitions Management, assess the issues preventing the importation of the five controlled medications – Ketamine, Diazepam, Midazolam, Morphine and Oxycodone – and take appropriate action to facilitate the acquisition of the medications necessary to support the efforts of paramedics assigned to protective movement details at the U.S. Embassy Baghdad.

**DS Response (07/18/18):** DS agrees with this recommendation. The Office of Overseas Protective Operations (DS/IP/OPO) has developed a procedure to assure tight control of necessary medications, and has partnered with the Bureau of Administration, Office of Logistics Management Diplomatic Pouch and Mail (DPM) to ship the controlled medications needed for official life safety purposes in Iraq, as outlined in the contract task order. The Worldwide Protective Services II vendor will procure the five controlled medications and take possession of those medications upon arrival at Post. Barring any issues, DS/IP/OPO expects the first DPM shipment to be sent in July 2018.

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Approved: DS – Michael T. Evanoff [ ]

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