



HIGHLIGHTS

Office of Inspector General
United States Department of State

ISP-I-24-08

What OIG Inspected

OIG inspected executive direction, operational effectiveness and program implementation, resource management, and information management operations of the Bureau of Medical Services.

What OIG Recommends

OIG made 16 recommendations: 15 to the Bureau of Medical Services and 1 to the Bureau of Administration.

In its comments on the draft report, the Department concurred with 15 recommendations and neither agreed nor disagreed with 1 recommendation. OIG considers all 16 recommendations resolved. The Department's response to each recommendation, and OIG's reply, can be found in the Recommendations section of this report. The Department's formal responses are reprinted in their entirety in Appendix B.

December 2023
OFFICE OF INSPECTIONS
DOMESTIC OPERATIONS

Inspection of the Bureau of Medical Services

What OIG Found

- The Chief Medical Officer and Principal Deputy Chief Medical Officer set a positive tone for the Bureau of Medical Services and generally led the bureau in accordance with Department of State leadership and management principles.
- The bureau demonstrated commitment to diversity, equity, inclusion, and accessibility principles, but staff believed the bureau should provide more career advancement and leadership opportunities to Civil Service personnel and Foreign Service medical specialists.
- Duplicative and parallel functions throughout the bureau represented potentially inefficient use of resources and inconsistent practices, which the bureau was addressing through a planned reorganization.
- Informal and ad-hoc decision-making processes resulted in a lack of clarity regarding policy and operational changes, inconsistent dissemination of decisions, and revisions of decisions after the fact.
- Multiple factors contributed to the delay in deploying an electronic health record system, including inadequate project scope and cost management, and insufficient executive-level IT investment oversight.
- The bureau's quality management procedures did not comply with health care industry standards requiring regular clinical performance reviews of medical providers.
- Staff vacancies, insufficient staffing, and increasing workloads affected some aspects of operations, particularly in the areas of medical clearances and mental health support services.
- The bureau played an important and visible role in Department efforts to address COVID-19 and anomalous health incidents.
- The bureau's Executive Office lacked standards to measure its customer support services. The bureau also had shortcomings in its contract management, human resources, and facilities management operations.