To: All IHS

I have reviewed the concerns raised in the hearing on the Aberdeen Area held by the Senate Committee on Indian Affairs. In addition, a letter was sent to the HHS Secretary requesting investigations of all IHS-operated facilities due to concerns that these issues may be occurring in other IHS Areas. Given that the concerns raised are serious and unacceptable, I am directing IHS senior leadership to implement the following items immediately throughout the organization:

1) Ensure that we do not hire or contract with excluded felons: Before every hire, the supervisor, as part of the required reference checks, and the human resources staff, as part of the screening process prior to the job offer, and contracting officers during the contract award process (majority of the issues identified in Aberdeen were contract providers) must both check the OIG Exclusion List for the name of the person they intend to hire. If the individual is on that list, they are not to be hired. It takes just a few minutes to go to the website http://exclusions.oig.hhs.gov/ and enter an individual’s information. Anyone who hires someone who is on the OIG Exclusion List will be held accountable and appropriate disciplinary action will be taken. This applies to Commissioned Officers and Civil Service employees who are transferred, reassigned (including IPAs, MOAs), or re-hired (including CO-STEPS, etc.)

2) Conduct background checks quickly and as a condition of hire: Before every hire, fingerprint checks must occur as a part of the pre-employment process. It only takes a few days to check now that the process is electronic. If problems appear, the individual should not be hired until the background check is resolved. Every position description, vacancy announcement and all counseling of potential new hires should include clear instruction that employment is conditional on a cleared background check. We are also updating our list of “public trust” positions that require more extensive background checks. We must take seriously the assessment of suitability for hire for all potential employees. Our patients are counting on us to get this right. **This change will be effective for all pending new hires that have not yet entered on duty as of today.**

3) Limit use of administrative leave (Civil Service)/Non-Duty with Pay (Commissioned Officers): I am directing all Area Directors and HQ Office Directors to review the use of administrative leave/non-duty with pay and, if necessary, to take actions to ensure it is appropriate and used on a limited case-by-case basis. While sometimes outside entities require placement of individuals on administrative leave pending investigations, we need to closely monitor the status of these investigations and encourage prompt resolution.

4) Improve security in IHS pharmacies: In order to prevent missing and stolen narcotics, I am directing all IHS Area Directors and Chief Medical Officers to review all relevant pharmacy policies and monitoring processes and systems and to implement improvement strategies as soon as possible. Consult with your local human resources staff to determine whether proposed changes require notice to the union because it is a change in working conditions (such as security cameras placed in pharmacies).

5) Ensure that healthcare providers have current licenses: I am directing all Area Directors and Chief Medical Officers to review how we monitor healthcare provider license status and to develop a process to ensure that providers with expired (revoked, suspended and conditional) licenses are not allowed to practice in our hospitals and clinics until they correct their licensure status. Exceptions only apply to providers who are in training without full licensure.

6) Ensure program integrity: I sent an email to all IHS recently emphasizing the importance of
program integrity and have explained how employees can report allegations of fraud, waste or abuse by other employees. We will hold individuals accountable if investigations reveal they have engaged in any of these types of activities. All employees are responsible for ensuring that we are using our federal resources in the most effective and efficient manner. A link will be added by OMS/PIES to the IHS home page for reporting fraud, waste and abuse.

7) **Improve business practices in the Contract Health Services Program**: I have been consulting with tribes on how to improve the business of the CHS program. I just received recommendations from the tribal workgroup and after review by all tribes, we will be implementing specific activities to ensure that we are maximizing these resources through sharing and implementing best practices, improving customer service, improving billing and referral processes and negotiating the best rates from outside providers.

8) **Improving accountability**: Because these concerns are serious, it is important to make sure that if these action items are not implemented, responsible individuals will be held accountable. I heard from staff input last year that the lack of accountability for poor performance was a big problem throughout IHS. Accountability is one of our agency priorities — and needs to be an important part of ensuring that we do change and improve as an organization. This will be added to managers’ performance plans that are accountable for the implementation.

We will include these subject areas in the IHS Area review process to assure that these recommendations have been implemented in all our IHS-administered facilities. I am recommending that our tribally-administered facilities implement these actions as well.

Thank you to all employees who help us implement these reforms. In order to gain the trust of our patients, we have to address these issues as soon as possible.

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Director

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