

## VA OIG Podcast Transcript Episode 20171002-2

OIG Highlights September 2017

September 2017

[Michael Nacincik Host] Welcome to the VA OIG September 2017 Highlights.

Among the many activities the OIG conducted in September, staff provided two Congressional testimonies.

Dr. David Daigh, Assistant Inspector General for Healthcare Inspections, testified about the VA's suicide prevention efforts before the Senate Committee on Veterans' Affairs.

Dr. Thomas Wong, also with the Office of Healthcare Inspections, discussed OIG's documentation of patient enrollment concerns in home telehealth at the John D. Dingell VA Medical Center in Detroit at a field hearing before the House Veterans Affairs' Subcommittee on Oversight and Investigations in Traverse City, Michigan.

[Host] If you haven't seen the refreshed OIG website, check out the new dashboard tool for tracking the OIG's recommendations to the VA on improving programs and operations while reducing fraud, waste, and abuse.

The dashboard provides real-time statistics on reports and recommendations issued in the last 12 months and the monetary impact of the OIG's work. The website also now hosts the OIG's new podcast series that provides helpful information about the OIG's oversight work, including context and explanations for featured reports.

[Host] The OIG published 25 oversight reports in September. Two reports are of particular note: first is the Office of Audit and Evaluations' *Audit of Purchase Card Use to Procure Prosthetics* where the OIG found if Veterans Health Administration does not implement our recommendations, they increase the risk of improper payments and unauthorized commitments totaling approximately \$3.1 billion over a five-year period.

Second, the Office of Healthcare Inspections published its fourth annual *OIG Determination of VHA Occupational Staffing Shortages for FY 17*. OIG found that for critical need occupations, such as physicians, nurses, psychologists, physician assistants and medical technologists, Veterans Health Administration overall

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staffing gains are significantly offset by staff losses. The OIG recommends predictive staffing models that are more responsive to changes in clinical demand.

Other reports looked at quality of health services, access to health care, VA Regional Office inspections, and Clinical Assessment Program reviews. In addition, the Department of Justice published news releases on OIG investigations of benefits fraud.

[Host] For more information on all of these activities or to report fraud, waste, abuse, mismanagement, or possible criminal activity, visit the OIG website at V-A dot G-O-V backslash O-I-G.