



**COUNCIL OF THE INSPECTORS GENERAL
ON INTEGRITY AND EFFICIENCY**

**Quality Assurance Review Guidelines
for
Offices of Investigations
of
Federal Offices of Inspector General**

July 15, 2025

Council of the Inspectors General on Integrity and Efficiency

Authority: Section 424 of the Inspector General Act of 1978 (IG Act), as amended, [5 U.S.C. §§ 401-424](#) (IG Act).

Mission: The mission of the Council of the Inspectors General on Integrity and Efficiency (CIGIE) is to address integrity, economy, and effectiveness issues that transcend individual Government agencies and increase the professionalism and effectiveness of personnel by developing policies, standards, and approaches to aid in the establishment of a well-trained and highly skilled workforce in the Offices of Inspectors General.

CIGIE Investigations Committee: The Committee contributes to improvements in program integrity, efficiency, and cost effectiveness Government-wide by providing analysis of investigative issues common to Federal agencies. The Committee provides the CIGIE community with guidance, support, and assistance in conducting high-quality investigations. The Committee provides input to the CIGIE Professional Development Committee and the Training Institute on the training and the development needs of the CIGIE investigations community. The Committee actively engages with the Assistant Inspector General for Investigations Subcommittee to assist in carrying out the Committee's goals and strategies.

Message from the Chairman of the CIGIE Investigations Committee

I am pleased to present the Quality Assurance Review (QAR) Guidelines for Investigative Operations of Federal Offices of Inspector General (OIGs). Throughout this version, you will note clarification changes from the 2017 version. The most notable changes are the inclusion of language to: 1) establish a checklist for Executive Orders compliance and review; 2) mandate the Memorandum of Understanding (MOU) between the reviewed and reviewing OIGs; 3) all entities conducting criminal, civil, and administrative investigations within an OIG are subject to review; 4) mandate that the QAR team leader complete CIGIE QAR training; 5) streamline the rating options definitions; 6) provide revised checklists (previously referred to as appendix) questions, instructions, and requirements; 7) require the completion of the Observations Letter; 8) new email addresses to send finalized reports to CIGIE and the Attorney General's Office; and 9) inclusion of guidance in handling the employee queries.

The purpose of the QAR program, or investigations peer review, is to ensure that the “professional standards” promulgated by the Quality Standards for Investigations (QSI) established by CIGIE are followed and that law enforcement powers conferred by the IG Act and all amendments, or other authorities, are properly exercised.

Each OIG is required to implement and maintain a system of quality control for its investigative operations. The nature, extent, and formality of such a system will vary based on each OIG's circumstances. The system of quality control must emphasize performing high-quality work, compliant with required standards.

In conducting a particular QAR, the reviewing OIG will render an opinion on adequacy of the reviewed OIG's internal safeguards, management procedures, and quality control in connection with compliance with the IG Act, QSI, Executive Orders, and law enforcement authority, as applicable.

I want to thank the Policy Working Group for their diligence in revising these Guidelines and incorporating input from the CIGIE community. I also want to thank the Investigations Committee for their review and support in finalizing the QAR Guidelines. The members of the Policy Working Group who contributed to this effort are listed in the “Acknowledgements” below.

Parisa Salehi
Chair, Investigations Committee
CIGIE

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- C Assessment of Compliance with the CIGIE Quality Standards for Investigations
- D Assessment of Compliance with the CIGIE Quality Standards for Digital Forensics
- E Individual Closed Case Review Checklist
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REFERENCE MATERIALS

1. Model Engagement Letter and Reports
2. Model Memorandum of Understanding
3. Attorney General's Guidelines for Offices of Inspector General with Statutory Law Enforcement Authority (AG Guidelines) (December 8, 2003)
4. Attorney General's Guidelines for Domestic FBI Operations, including the cover memo (September 29, 2008)
5. Attorney General's Guidelines Regarding the Use of Confidential Informants (May 30, 2002)
6. CIGIE Quality Standards for Investigations (dated July 15, 2025)
7. CIGIE Guidelines on Undercover Operations (June 2013)
8. CIGIE Quality Standards for Digital Forensics (June 2019)
9. CIGIE Quality Standards for Federal Offices of Inspector General (August 2012)
10. Executive Order 14074 on Advancing Effective, Accountable Policing and Criminal Justice Practices to Enhance Public Trust and Public Safety (May 25, 2022)

PREFACE

This document provides standards and guidance for conducting a CIGIE QAR. The purpose of a QAR is to establish an independent external review process to:

1. Ensure that the general and qualitative standards adopted by OIGs comply with the requirements of the QSI. Compliance is mandatory and will be assessed for all CIGIE member OIGs who have statutory law enforcement authority or U.S. Marshal's Service (USMS) Deputation. OIGs that do not have statutory law enforcement authority, but conduct investigations in accordance with the QSI, are strongly encouraged to participate voluntarily in the QAR process.
2. If an OIG has law enforcement authority pursuant to the IG Act or other statutory authority, ascertain whether adequate internal safeguards and management procedures exist to ensure that the law enforcement powers are properly exercised by the OIG in accordance with such authority.

Each OIG is required to implement and maintain a system of quality control for its investigative operations. The system of quality control should emphasize performing high-quality work that is compliant with the required standards. The policies and procedures of each OIG must be designed to provide reasonable assurance of complying with professional standards and applicable legal and regulatory requirements. The nature, extent, and formality of an OIG's system of quality control will vary based on the OIG's circumstances. Each OIG must develop and document its quality control policies and procedures in accordance with the QSI and the OIG's individual requirements, as well as relevant law enforcement authorization statutes (if applicable), the AG Guidelines (if applicable), executive orders, and communicate those policies and procedures to its personnel.

These guidelines may be adapted for OIGs' internal reviews (self-assessments) within the CIGIE community. It also provides guidance for reviewing investigative processes and records maintenance in any OIG that conducts investigations.

GENERAL CONSIDERATIONS

1. **Checklists and Applicability.** The following checklists were developed to assist in conducting the QAR:

- Checklist A (Quality Assurance Review Organizational Profile) is a profile of administrative data about the OIG being reviewed.
- Checklist B-1 (Assessment of Law Enforcement Powers Implementation Derived from IG Act) is a tool to assist in assessing whether adequate internal safeguards and management procedures exist within OIGs that exercise law enforcement powers pursuant the IG Act and the AG Guidelines.
- Checklist B-2 (Assessment of Law Enforcement Powers Implementation Derived from Other Statute) is a tool to aid in assessing whether adequate internal safeguards and management procedures exist within OIGs that exercise law enforcement powers pursuant to any other authorities, such as independent statutory law enforcement authority (outside of the IG Act) or USMS deputation.
- Checklist C (Assessment of Compliance with the CIGIE Quality Standards for Investigations) is a tool to assist in assessing compliance with the general and qualitative standards outlined in the QSI. Checklist C may be used for a wide variety of case types, including criminal, civil, and administrative.
- Checklist D (Questionnaire for Review of Compliance with Quality Standards for Digital Forensics) is a questionnaire to assess conformity with CIGIE's Quality Standards for Digital Forensics. The incorporation of Checklist D is for OIGs that perform digital forensics activities in-house. Checklist D focuses on the *technical* aspects of digital evidence analysis activities. The *investigative* aspects of information technology/cyber-related cases will be evaluated with Checklist C. If the reviewing OIG does not have in-house personnel with digital evidence analysis capability to conduct a review using Checklist D, it may seek assistance from other CIGIE OIGs that possess appropriately trained personnel. (See Section 4 below for the timing of this review for new programs.)
- Checklist E (Individual Closed Case Review Checklist) and Checklist F (Case Review Summary Checklist) are individual and summary checklists, respectively, used to assess a sample of closed investigative case files when testing the degree of compliance with the AG Guidelines and/or the QSI.
- Checklist G (Executive Order Compliance) is a questionnaire designed to assess compliance with Executive Orders. This checklist is designed to be a living document that may be changed with the issuance and/or repeal of Executive Orders affecting OIGs.

2. **Background.** These guidelines are based primarily on the IG Act, the QSI, and,

where applicable, the AG Guidelines.

There are statutory OIGs in over 70 Federal establishments and designated entities, including cabinet departments and Executive Branch agencies, boards, commissions, corporations, and foundations and Legislative Branch agencies.

The QSI categorizes investigative standards as General and Qualitative. General Standards address qualifications, independence, and professional judgment. Qualitative Standards focus on investigative planning, execution, and reporting, as well as information management.

The AG Guidelines govern the exercise of statutory law enforcement powers by most Inspectors General (i.e., those that receive such powers from the IG Act) and eligible employees and address the role of Federal prosecutors in providing guidance in the use of sensitive criminal investigative techniques. Certain other Inspectors General derive their law enforcement authority from other statutes and others may have separate policies or Department of Justice agreements that govern the exercise of their law enforcement powers.

- 3. Objectives of the QAR Program.** The overall objective of a QAR is to determine whether internal control systems are in place and operate effectively to provide reasonable assurance that an OIG is complying with professional standards and other requirements. This assessment program is intended to be positive and constructive rather than negative or punitive. The reviewing OIG is encouraged to identify “best practices” or similar notable positive attributes of the reviewed OIG. Additionally, the reviewing OIG should view favorably on-the-spot corrections to non-systemic potential weaknesses. Further, the reviewing OIG must consider the extent to which the reviewed OIG had/has control over a potential weakness (e.g., another division of the entity may be responsible for a particular process such as inventory control, encryption, or background investigations).

These guidelines are applicable to OIGs in a diverse set of Federal and non-Federal organizations, including all cabinet departments, Executive Branch agencies, boards, commissions, corporations and foundations, and Legislative Branch agencies. Reviewing OIGs must be cognizant of the structure of the OIG they are reviewing and how that OIG has adapted the QSI and other professional standards to the unique circumstances of that entity. As such, reviewing OIGs may adapt the guidelines, as appropriate. The review process is designed to be as flexible as possible for the variety of sizes and complexity of the OIGs being reviewed. Some aspects of the review may not be applicable to some OIGs, and this should be annotated in the checklists and supporting documentation.

- 4. Management and Oversight of QAR Program.** The CIGIE Investigations Committee has responsibility for overall management and oversight of the QAR process. This Committee will resolve all issues that cannot be mutually agreed upon by the reviewing and reviewed OIGs.

The Chair of the CIGIE Investigations Committee is responsible for establishing a QAR schedule. The Investigations Committee will coordinate its scheduling efforts with other CIGIE Committees. The QAR schedule should be updated and distributed with sufficient lead time to ensure OIGs are able to plan their participation. Absent unique circumstances, the reviewing and reviewed OIGs should be made aware of future QARs at least one year in advance and the reviews should occur at approximately three-year intervals. The OIGs involved in a specific QAR may, upon mutual agreement, accelerate or delay a QAR by one fiscal year quarter without the prior approval of the Investigations Committee, but must request an extension if over one fiscal year quarter for tracking purposes. The Chair of the Assistant Inspector General for Investigations (AIGI) Subcommittee is responsible for resolving scheduling conflicts or issues that may arise. The AG Guidelines state that QARs should occur no less often than once every three years. The Chair of the AIGI Subcommittee will assess any unique circumstances that may delay or deviate from the normal cycle of QARs.

The selection of the QAR team must be done in a manner that ensures the integrity of the QAR process. QAR team members must be free, both in fact and appearance, from impairments to independence. An OIG that receives a noncompliant QAR rating will be deemed unqualified to conduct a QAR of another OIG until that reviewed OIG receives a compliant rating, and QAR scheduling adjustments will be made accordingly. Where feasible, QAR partners will be of similar size and have similar law enforcement status (e.g., an OIG without law enforcement powers will not conduct a QAR of an OIG with law enforcement powers).

Newly established OIGs that do not have statutory law enforcement authority but conduct investigations in accordance with the QSI are strongly encouraged to participate voluntarily in the QAR process.

OIGs that seek and obtain law enforcement authority from the AG must immediately initiate steps to adhere to the AG Guidelines. Compliance with these guidelines will be evaluated during their next scheduled QAR but not sooner than two years following the granting of the authority. Such OIGs should request that the Investigations Committee add them to the QAR schedule.

OIGs deriving their law enforcement authority outside of the IG Act, including agencies that use USMS deputation, will also be included in the QAR program.

OIGs with newly established digital forensics capabilities must immediately take steps to adhere to CIGIE's Quality Standards for Digital Forensics. Compliance with these guidelines will be evaluated during the OIG's next scheduled QAR but not sooner than two years following the implementation of a digital forensics program. OIGs with a QAR scheduled prior to the digital forensics program reaching two years are strongly encouraged to allow the visiting QAR team to conduct an informal digital forensics assessment. The results of the assessment must be conveyed in a

separate observations letter than the official QAR documentation. The findings of the informal assessment will not be included in the overall assessment of organizational compliance/non-compliance with CIGIE, the AG, and other requirements.

The function of the QAR is considered inherently governmental. The process must be handled within the Inspector General (IG) community and not contracted externally.

- 5. Memorandum of Understanding.** The reviewing OIG and the reviewed OIG will prepare and sign an MOU to ensure mutual agreement regarding the fundamental aspects of the QAR and to avoid misunderstandings. A critical aspect of the MOU includes a clear understanding of which entities within the OIG conduct criminal, civil, and/or administrative investigations and are therefore subject to review, and which standards are applicable. In this regard, the reviewed OIG will provide to the reviewing OIG a description of its investigative operations, including those reporting to an AIGI and those within other divisions/components of the OIG. For example, if the reviewed OIG's structure consists of investigative operations reporting to the AIGI and other investigative activity reporting outside of the AIGI's chain of command (e.g., internal affairs or a special investigative unit), the reviewed OIG will specify the additional chain of command covering that investigative activity.

The reviewing OIG will draft the MOU, which will then be discussed with the reviewed OIG. Both IGs will sign the MOU as soon as practical after the reviewed OIG is notified of the QAR review process. CIGIE has prepared a model MOU to be used as a template by the OIGs in drafting the final MOU. At a minimum, the MOU will include the following information:

- a. Purpose and Scope of the Review.** The MOU will include the investigative offices and activities that will be subjected to the QAR, as well as the time period for documentation review (e.g., within the previous three years) and the time period limitation for case file review.
- b. Staffing and Timeframe.** The review should be scheduled and conducted to ensure a report is issued within one to two months from the conclusion of the on-site review(s).
- c. Disclosure Restrictions.** The MOU may be modified for circumstances such as national security and non-disclosure agreements. However, it should not contain clauses that override the requirements in the QAR guidelines (e.g., deviating from the QAR rating options, changing definitions, or waiving the requirement for a final report).
- d. Preliminary Findings.** The MOU provides for timely interim discussion of preliminary findings including, as applicable, holding exit meetings at each site reviewed. A commitment to open and ongoing communication between the parties is important to ensure that the review is conducted in an efficient manner.
- e. Reporting Results.** The MOU establishes the guidelines for the reporting process, specifically:

- Designating the report's addressee and signer (i.e., draft issued to and from the respective AIG or equivalent and final report issued to and from the Inspectors General).
- Providing a discussion draft report and a formal draft report for the official response.
- Scheduling the exit conference.
- Designating a time period for responses to the applicable draft reports.
- Issuing the final report.

f. Administrative Matters. Other topics may be covered as needed or considered appropriate, including the points of contact, objectives of the QAR, access to investigative and administrative files, review approach, handling of sensitive information or clearances required, logistics, and facilities access. When preparing the MOU, the parties should take care not to unreasonably restrict in any way the reviewing OIG's ability to conduct the work necessary to accomplish the objectives of the review. If restrictions exist, the OIGs may need to discuss whether there is a scope limitation because of these restrictions.

g. Disposition and Disclosure of QAR Documentation. The MOU will cover the OIGs' respective responsibilities for producing QAR records in response to requests such as Freedom of Information Act (FOIA) requests, litigation or discovery demands, or requests from oversight bodies. The parties may utilize Attachment A to the MOU to further delineate requirements in this area.

6. QAR Team Staffing and Qualifications. Conducting a QAR review requires considerable professional judgment and leadership. The QAR team will consist of OIG staff with appropriate knowledge and experience to conduct QARs. It is recommended that the team leader be at or above the GS-14 grade level, or equivalent. The team leader must have completed QAR training within two years before leading a QAR. The rest of the team will consist of OIG investigators and/or support staff from one or more OIGs with the necessary competencies to complete the QAR. Team members are strongly encouraged to complete QAR training prior to participating in a QAR.

QAR team size and composition may vary depending on several factors, including, but not limited to, the size and geographic dispersion of the reviewed OIG; changes in organizational structure, control, and leadership; and the number, type, and importance of reports issued at each field/regional location or satellite office.

If the reviewed OIG has exercised law enforcement authority in the prior three years, the reviewing OIG must ensure that the team includes investigators or other staff with the knowledge and experience appropriate to review law enforcement functions.

If the reviewed OIG handles classified information, members of the reviewing QAR team must have or obtain the appropriate level of security clearance(s) to permit a

complete QAR without undue limitation on the quality of the review.

- 7. Independence.** The review team members and their senior management must meet the independence standards in the *“Quality Standards for Federal Offices of Inspector General”* and the QSI. To avoid any appearance of bias, the QAR team members should not have been employed by the reviewed OIG within the previous three years. However, if a team member was a GS-15 equivalent or above at the reviewed OIG, recent is defined as at least five years removed from employment. The reviewing OIG cannot review an OIG that conducted its last Investigations or Audit QAR, absent unusual circumstances and approval by the AIGI committee. Questions or concerns related to the composition of the QAR team should be raised during the MOU discussion. Issues that cannot be resolved between the OIGs should be raised with the CIGIE Investigations Committee.

- 8. Confidentiality and Security.** The reviewing OIG must safeguard all privileged, sensitive personnel, confidential, non-public, national security, or classified information in compliance with applicable laws, regulations, and professional standards.

All matters discussed, materials assembled, documents prepared, and reports generated through a QAR will, at a minimum, be treated as proprietary information and maintained appropriately. To the extent possible, privileged, or confidential information, such as names and other personally identifying information should not be recorded in reports issued by the QAR team. The team leader must ensure that the reviewing OIG complies with relevant professional guidance on the use, protection, and reporting of information such as classified material, Internal Revenue Service tax information, Bank Secrecy Act information, and protection of grand jury material and information.

In some circumstances, the OIG being reviewed may have statutory, regulatory, or other restrictions on the dissemination of information relating to their cases. In such circumstances, the QAR team members may be asked to sign non-disclosure agreements to provide the OIG being reviewed with assurances that the information being reviewed will be handled appropriately. This issue should be resolved prior to the commencement of the review to allow sufficient time for a legal review, as appropriate.

- 9. Professional Judgment.** The reviewing OIG will exercise sound professional judgment in planning, performing, and reporting the results of the QAR.
- 10. Internal Affairs/Special Investigative Units.** All investigative operations (including internal affairs or a special investigative unit, etc.) within a reviewed OIG will be included in the QAR process.
- 11. Self-Inspection Programs.** Some OIGs have an internal self-inspection program. If so, the reviewed OIG will furnish a copy of any internal self-inspection reports that

have been completed since the last QAR to the reviewing OIG. The reviewed OIG must provide the reviewing OIG with a copy of the self-inspection report(s) before the on-site review. The reviewed OIG may limit disclosure to those portions that relate to areas covered by the QAR. The reviewing OIG may consider information and corrective action from the self-inspection program; however, such information must not be the sole basis for the overall QAR rating.

12. Special Considerations. The QSI guidelines and, when applicable, AG Guidelines and executive orders, will be utilized to evaluate internal safeguards and management procedures for investigative functions. QAR checklists ensure basic continuity, consistency and transparency in conducting the OIG reviews, and permit flexibility for special reviews. Some investigative functions and OIGs may not have law enforcement powers, and their investigative work may focus more heavily on administrative matters. When reviewing these OIGs, further coordination may be necessary to identify potential review issues. Additionally, there may be other regulatory requirements related to investigations conducted by these OIGs. Any unique circumstance should be discussed during planning, and when appropriate, included as part of the review. When conducting reviews of these OIGs, the reviewing OIG should identify, during the planning phase and in coordination with the reviewed OIG, areas that are not applicable or that have specific additional authorizations.

PLANNING AND PERFORMING THE QAR

As stated above, the objective of a QAR is to determine whether internal safeguards and management procedures are in place and operate effectively to provide reasonable assurance that established policies, procedures, and applicable investigative standards are being followed. In making this determination, the reviewing OIG will analyze existing policies and procedures, query selected staff, and review closed investigative files and other administrative records, as warranted.

The documentation required for a full QAR is completion of all applicable QAR checklists. For OIGs that have not exercised law enforcement powers during the review period, the reviewing OIG should note this on Checklist A and annotate “N/A” for questions in subsequent checklists that do not apply. For example, for the question, *“Was the FBI notified in accordance with Attorney General Guidelines?”*, if the case was an administrative case and no coordination with FBI was required, the reviewing OIG should annotate “N/A” for that question.

1. Scope. The scope of the QAR is to assess whether the OIG’s investigative operations are in compliance with the QSI, relevant law enforcement authorization statute(s), and the AG Guidelines or other applicable guidelines, requirements, Executive Orders, and statutes. The QAR should encompass the period beginning with the most recent QAR but should generally not exceed three years. Exceptions to this timeframe may be negotiated between the reviewed OIG and the reviewing OIG.

- 2. Checklists.** The reviewed OIG will complete and provide to the reviewing OIG all applicable checklists prior to the on-site review. Answers to certain questions in checklists may not be readily available or apparent based on available documentation and information. In these instances, the reviewing OIG should assess whether there is clear, specific, and articulable information in the case file or from other sources to obtain the professional judgment necessary to assess the OIG.
- 3. Approach.** Generally, the reviewing OIG will be assessing whether the reviewed OIG has policies, procedures, and/or programs in place to ensure compliance with the QSI, relevant law enforcement authorization statute(s), and the AG Guidelines or other applicable guidelines, requirements, and statutes. More specifically, the reviewing OIG will:
- Review and gain an understanding of the reviewed OIG's investigative function(s) and system of internal safeguards and management procedures.
 - Review the reviewed OIG's internal self-inspection reports, if applicable, and the most recent QAR report.
 - Select the office(s) and elements of investigative functions to review and determine the extent of the assessment based on knowledge obtained from the preceding steps.
 - Assess, via the QAR checklists, whether the reviewed OIG:
 - Has policies, procedures, and/or programs in place to facilitate compliance with the CIGIE QSI, relevant law enforcement authorization statute(s), and the AG Guidelines or other applicable guidelines, requirements, and statutes;
 - Complies with those policies, procedures, and/or programs in practice; and
 - Identifies and implements corrective action to ensure adherence to the above, if necessary.
 - Maintain open communication with the reviewed OIG to ensure an understanding of the issues evaluated and an awareness of potential issues as they arise.
 - Review a sample of individual closed investigations to assess compliance with the reviewed OIG's policies and procedures, the QSI, relevant law enforcement authorization statute(s), and the AG Guidelines or other applicable guidelines, requirements, and statutes.
 - Review other documents and electronic records necessary for assessing compliance with standards (e.g., training documentation and relevant human capital information).
 - Query appropriate staff (optionally) within the reviewed OIG to assess their understanding of and compliance with relevant policies and procedures.

- 4. Pre-Site Review Steps.** The reviewed OIG will complete Checklist A in its entirety and only the “Reviewed Agency Policy/Manual Reference” column of Checklists B-1 or B-2, C, D (if applicable), and G. See each checklist for completion instructions.

In advance of a QAR, the reviewed OIG should indicate with an “N/A” those questions that do not apply to the OIG. OIGs are strongly encouraged to provide an explanation for any questions it feels warrant “N/A.” These comments will aid the assessment by the reviewing OIG. In instances where “N/A” is checked, a discussion between the two OIGs should occur prior to the start of the review to ensure there is a common understanding of why the question is not applicable.

The following references and other documentation must be made available for the reviewing OIG prior to the on-site review:

- a. Manuals and Policy Statements** – pertinent documents describing the operational policies and procedures.
- b. Semiannual Reports to Congress** – at least the four most recent semiannual reports to Congress. The semiannual reports will provide information regarding the nature and volume of investigative work being performed. The reports may also assist the reviewing OIG in identifying closed case files to be reviewed.
- c. OIG’s Last QAR report** – a copy of the OIG’s last QAR report with the Letter of Observations and a summary of the corrective action taken in response to QAR findings.
- d. Closed Case Inventory** – a listing of the cases closed during the past 12 months. This listing must include information such as the case identifiers; dates the investigations were opened and closed; case types (e.g., employee integrity or procurement fraud); disposition; and types of action taken. For OIGs with multiple entities that conduct investigations in accordance with the QSI, the reviewed OIG must delineate the entity that conducted the investigation.
- e. Self-Inspection Reports** – a copy (or appropriate portions) of self-inspection or internal evaluation reports conducted by the reviewed OIG.

Requests for information should be submitted to the OIG being reviewed approximately 60 to 75 calendar days before the on-site review begins.

- 5. Working Environment.** Before beginning the on-site work, the QAR team leader should arrange with the reviewed OIG to have adequate workspace for the reviewing OIG. The AIGI or equivalent of the reviewed OIG, or a designee, should facilitate the coordination of logistics and access for the reviewing OIG and in obtaining requested materials.
- 6. Review Schedule.** The QAR on-site dates will be scheduled by mutual agreement between the reviewing OIG and the reviewed OIG. Once a tentative schedule is established, the reviewing OIG will send the reviewed OIG an engagement letter

modeled on the example provided by CIGIE.

7. **Entrance Briefing.** An entrance briefing will be conducted with the IG or a designee of the reviewed OIG. This meeting provides an opportunity to outline the objectives of the QAR, review the methodology, and address any areas of management concern.
8. **Regional/Field Location Selection.** Factors to be considered in selecting regional or field locations to be reviewed include the following:
 - Number, size, and geographic dispersion of regional or field locations.
 - Changes in organizational structure, control, and leadership.
 - Degree of centralized control over regional or field locations.
 - Results of prior internal inspection reports or other external reviews.
 - Location of relevant resources.
9. **Employee Queries.** The reviewing OIG may interview a sample of the reviewed OIG's staff to assess whether the reviewed OIG's practices are consistent with its policies and procedures. The queries are not intended to gauge employee morale or office climate. The same questions should be asked of each staff member, but logical follow-up questions may be asked based on answers and topic areas.

Additionally, queries of specific staff members may be conducted to address program areas related to the guidelines and checklists. For example, the reviewing OIG may query evidence custodians or use of force instructors to understand whether their procedures are consistent with the reviewed OIG's policy and the QSI. The reviewed OIG may request that the reviewing OIG include additional questions or subject areas in their staff queries. Results of the queries may be shared with the reviewed OIG during the exit conference, but specific comments will not be attributed to individual staff members.

- a. **Instructions for reviewing OIG.** The purpose of the queries is to determine the extent to which the reviewed OIG's quality control policies and procedures have been effectively communicated to staff. When gathering information, consideration should be given to privacy-related concerns, sensitive matters, safety concerns, and immediacy of any issues that should be communicated to the reviewed OIG. Generally, at least 25%-50% of the staff within a reviewed office location may be queried.
- b. **Instructions to be communicated to the queried staff of the reviewed OIG.** "These queries are intended to determine the extent to which your OIG's quality control policies and procedures have been effectively communicated to you, and to obtain your views about several factors related to your office's adherence to those policies and procedures. The queries are not intended to gauge employee morale or office climate. We will use the results to help assess whether your

office's system of quality control is in place and operating effectively.”

c. Examples of appropriate questions.

- Do you have the training, guidance, programs, resources, and support from your management to help you achieve your professional goals?
- How well are policy changes, guidance, and news communicated?
- Do you feel that the agency policies are fair and applied consistently?
- Are you aware of any ambiguities within your agency's policies?
- Is incriminating as well as exculpatory information shared with prosecutors?
- Are firearms and other sensitive items safeguarded in your OIG?

d. Examples of questions that are not appropriate for the QAR.

- Do you like your management?
- Are you doing things you really want to do?
- How can we make things easier?
- Do you feel liked by your team?

10. Closed Case Selection.

The reviewing OIG must review a sample of cases closed during the previous 12 months. The sample selection should include a cross-section of investigation types performed by the OIG (e.g., procurement fraud, environmental crimes, technology crimes, traditional crimes, employee misconduct, or cases involving specialized investigative techniques). Additionally, the reviewing OIG may, at its discretion, review closed cases from prior years for further validation if the original sample is either too small or suggests potential deficiencies. However, the reviewing OIG generally should not examine cases closed more than 24 months prior to the review.

The following guidance is furnished to assist the reviewing OIG in determining the number of closed cases selected in the sample:

Number of Closed Cases	Minimum Number of Closed Cases In the Sample
1 – 20 Case(s)	All Files
21 – 100 Cases	20 Closed Cases
101 – 500 Cases	30 Closed Cases
501 (or more) Cases	50 Closed Cases

11. Other Sampling.

Sampling may also be used to assess other elements of the QAR.

12. Defining and Identifying Observations, Findings, and Deficiencies.

Determining the relative importance of matters noted during the QAR, individually or combined with others, requires professional judgment. Careful consideration is required in forming conclusions. This includes assessing the nature, cause(s), pattern, and pervasiveness of an issue.

The descriptions that follow are intended to assist in aggregating and evaluating the QAR results, forming conclusions, and determining the rating of the QAR report to issue:

- a. **Observation.** An “*observation*” generally occurs when one or more “No” answers are recorded for questions in a QAR checklist.
- b. **Finding.** A “*finding*” is one or more related *observation(s)* that result from a condition such that there is more than a remote possibility that the reviewed OIG’s system of quality control or compliance would not perform, or did not perform, in conformity with its policies and procedures, applicable professional standards, or related requirements. The reviewing OIG will assess whether one or more *findings* will rise to the level of a *deficiency* (defined below). If the reviewing OIG concludes that no *finding*, individually or combined with others, rises to the level of a *deficiency*, a report rating of compliant is appropriate (see below). Findings may be reported to the reviewed OIG with suggestions for improvement, if appropriate.
- c. **Deficiency.** A “*deficiency*” is one or more *finding(s)* or condition(s) that the reviewing OIG has concluded—due to the nature, causes, pattern, or pervasiveness, including the relative importance of the finding to the OIG’s system of quality controls taken as a whole—that the reviewed OIG did not perform, or has a reasonable likelihood of not performing, in conformity with applicable professional standards or related requirements. A *deficiency* is limited to a material failure(s) to conform to mandatory provisions of the QSI, the Attorney General’s Guidelines for Statutory Law Enforcement Authority, and related requirements (as applicable), or other applicable law enforcement authorities and guidelines. A *deficiency* indicates a breakdown in practices, programs and/or policies that had an actual or likely material adverse impact on the reviewed OIG’s ability to conform to those applicable professional standards. If the review team identifies one or more *deficiency*, a report rating of noncompliant is generally appropriate. *Deficiencies* will be reported to the reviewed OIG with recommendations for correction and/or improvement.

In each of the above determinations—*observation*, *finding*, and *deficiency*—the reviewing OIG must consider the nature, causes, pattern, materiality, pervasiveness

and relative importance to the issue or system of quality control. The reviewed OIG must be afforded the opportunity to provide explanatory or mitigating information prior to the reviewing OIG reaching a conclusion. This conversation should be ongoing during the on-site review, after the on-site review, and during development of the discussion draft. A reviewed OIG may not be given a *finding* or *deficiency* for checklist items that are not applicable to that OIG. If a *deficiency* is identified, the reviewing OIG must notify the reviewed OIG as soon as possible and prior to the issuance of the discussion draft.

The following circumstances generally do not give rise to a noncompliant finding:

- Administrative issues were found in a limited number of case files or at one of several sites reviewed.
- An issue existed in an area outside the exclusive or substantial control of the OIG such as security clearances/determinations.
- The reviewed OIG lacked stand-alone internal written policy but, in practice, complied with applicable standards.
- The reviewed OIG violated its own internal policy, but has complied with the CIGIE QSI, AG Guidelines, or equivalent (e.g., its internal policy documents require training at a shorter interval than it conducts, but its practice, although violating its own policy, is consistent with the QSI and AG Guidelines).
- The reviewing OIG identified isolated instances of noncompliance with policy that are deemed to be non-systemic or where corrective action has occurred.

QAR assessments must be complete, fair, and balanced. One way to ensure the objectiveness, accuracy, and completeness of the findings is to obtain the views of the reviewed OIG prior to finalizing the assessment. If tentative *observations*, *findings*, or *deficiencies* are found, the reviewing OIG must discuss them with the appropriate responsible official(s) designated by the reviewed OIG during the review. ***On-the-spot corrections will be viewed favorably but must be completed prior to the issuance of the final report.***

Depending on the gravity of the matter corrected on-the-spot, the issue—and corresponding corrective action—may be noted in either the opinion letter or letter of observations.

All preliminary *observations*, *findings*, or *deficiencies* must be presented during the review to the official(s) designated by the reviewed OIG, prior to issuing the draft report. This action will help avoid misunderstandings and aid in ensuring that all facts are considered before a formal draft report is prepared.

13. QAR Rating Options. The reviewing OIG has the below two options for assessing the reviewed OIG's overall performance. The rating must be supported by sufficient appropriate evidence. In forming the report rating, the review team should consider

the nature and extent of the evidence taken as a whole. Determining what rating to issue is a matter of professional judgment and is the responsibility of the reviewing OIG.

<u>Rating</u>	<u>Explanation</u>
Compliant	A rating of “ compliant ” conveys that the reviewed OIG has adequate internal safeguards and management controls to ensure that CIGIE standards are followed and that law enforcement powers conferred by the IG Act or other statutes are properly exercised.
Non-compliant	A rating of “ non-compliant ” indicates the reviewed OIG’s internal safeguards and management controls are not adequate to ensure that CIGIE standards are followed or that law enforcement powers conferred by the IG Act or other statutes are properly exercised (e.g., a breakdown in practices, programs, or policies that had an actual or likely material adverse impact on the OIG’s ability to conform to those applicable professional standards or to exercise law enforcement powers.)

14. Discussion Draft. The “discussion draft” is a draft report that includes an outline of the results and contains the overall message of the results. Any potential observations, findings, or deficiencies must be supported by evidence. The discussion draft will be provided to the reviewed OIG prior to the exit conference. The intent of the discussion draft is to present information and facilitate the exchange of information between the reviewed and reviewing OIGs on relevant QAR issues.

15. Exit Meeting. An exit meeting will be held where the reviewing OIG discusses the tentative findings with the IG and/or other members of the senior management team of the reviewed OIG. The exit meeting also provides added assurance that all aspects of the results have been considered and the reviewed and reviewing OIGs’ positions are clearly established before the report is finalized.

16. Formal Draft. After the exit meeting, the reviewing OIG will consider any relevant information gained from the reviewed OIG at or around the exit meeting with respect to the tentative findings and prepare a formal draft. The formal draft will then be provided to the reviewed OIG. The reviewed OIG must be afforded an opportunity to comment on the formal draft report prior to the issuance of a final QAR report. All material facts provided by the reviewed OIG must be considered by the reviewing OIG to determine whether the initial comments included in the draft report should be

revised. The reviewed OIG may provide written comments on the formal draft to the reviewing OIG.

17. Final Report. Prior to the issuance of the final report, the reviewing OIG must consider any written comments from the reviewed OIG. If necessary, the final report will include the reviewing OIG's comments or rebuttals. The entire written response from the reviewed OIG must be included in the final report.

The following recommended timeframes are provided as general guidance:

Action Item	Recommended Timeframe (calendar days)
Appointment of QAR team leader and selection of review team	120 days before the site review
Send engagement letter and draft MOU to the reviewed OIG	90 days before the site review
Finalize MOU	75 days before the site review
Request necessary information from the reviewed OIG	60 to 75 days before the on-site review begins
Reviewed OIG provides information to the reviewing OIG	30 to 45 days before on-site review begins
Conduct the entrance briefing	5 to 7 days before on-site review begins
Conduct on-site review	5 to 10 days (depending on sites visited)
Complete the discussion draft, provide to the reviewed OIG, and conduct the exit meeting	30 days after completing the on-site review
Complete the draft QAR report and submit the draft report to the reviewed OIG for comment in an exit conference	15 days after the exit meeting
Allow reviewed OIG to comment on the draft report	15 days upon receipt of report
Issue final QAR report and related documents (including comments from the reviewed OIG, if any)	15 days after receipt of comment(s) by reviewed OIG
Memorandum from reviewed OIG on the status of corrective actions it committed to implement	45 days after issuance of the final report

REPORTING REVIEW RESULTS

The QAR Report consists of an Opinion Letter and an Observations Letter. (See Model Engagement Letter and Reports).

1. **Opinion Letter.** This letter is prepared by the reviewing OIG and furnished to the IG of the reviewed OIG. The body of the opinion letter contains information such as:
 - a. Scope of the review, including any limitations thereon, and any expansion of the review beyond the basic review guide, if applicable.
 - b. Description of the review methodology, including the field offices visited and a listing, by case number, of each investigative file reviewed.
 - c. The reviewing OIG's opinion regarding the **compliance or non-compliance** with the QSI and applicable law enforcement standards.
 - d. An explanation of the reviewing OIG's actions taken in response to the reviewed OIG's official comments to the draft report.

If a rating of **non-compliant** is reported, all *deficiencies* that served as the basis for the rating must be included in an attachment. The *deficiencies* must be supported by clear and convincing evidence of **non-compliance**, as well as a specific listing of the standard(s) violated.

A **non-compliant** rating will also be accompanied by recommendations for corrective action and/or improvement. Such recommendations for corrective action and/or improvement should be discussed with the reviewed OIG prior to finalizing the opinion letter. The reviewing OIG will work closely with the Investigations Committee to determine if the reviewed OIG will be required to provide periodic updates on the status of implementing such recommendations. The timing and form of such updates, and to whom they will be provided, will also be determined in coordination with the CIGIE Investigations Committee. Recommendations will close upon mutual agreement between the Investigations Committee and the reviewed OIG. They will remain open or not fully implemented until that time. The Investigations Committee will review and resolve disputes in this area. *Deficiencies* and associated recommendations may be reportable in an OIG's Semiannual Report to Congress.

2. **Observations Letter.** A supplemental observations letter will be furnished to the IG of the reviewed OIG. Observations fall into two categories:
 - a. **Best Practices or similar notable positive attributes of the reviewed OIG.** In keeping with the constructive nature of the QAR program, the reviewing OIG will highlight practices, policies, programs, accomplishments, etc., that are particularly worthy of praise or acknowledgement. Examples include, but are not limited to, a comprehensive management development program, an advanced management information system, or quality report writing and reviewing process.

In coordination with the reviewed OIG, the reviewing OIG should report particularly noteworthy accomplishments found during the review in a separate letter from the team leader to the CIGIE Investigations Committee for dissemination to the CIGIE community, as other OIGs may benefit from this information.

- b. Areas for Improvement or Increased Efficiency/Effectiveness.** The reviewing OIG may offer suggestions for improvement or increased efficiency/effectiveness based on *observations, findings, and deficiencies* identified. The reviewing OIG will identify a specific applicable Quality Standard, AG Guideline, Executive Order, or other statutory law enforcement authorization statute as a benchmark. Isolated instances of policy or procedural nonconformity, or non-systemic events or conditions, should be included in this section. For example, a reviewing OIG could identify policies or programs that are inconsistent with applicable standards. Implementation of the suggestions is done at the discretion of the reviewed OIG and will not be tracked or monitored by the reviewing OIG.
- 3. Dispute Resolution.** If a dispute arises, the first step for resolving the dispute is for the respective AIGs or equivalents of the reviewed and reviewing OIG to discuss and seek to resolve the dispute. If the dispute is not resolved at that level, the second step is for the respective IGs to discuss and seek to resolve the dispute. The reviewed OIG may seek informal advice and guidance from the Investigations Committee regarding any concerns about draft findings or deficiencies. If the dispute is not resolved informally at the IG level, as the third and final step, the IG of the reviewed OIG may formally refer a dispute about a draft *deficiency* or other significant unresolved issues to the CIGIE Investigations Committee for review and resolution. The IG of the reviewed OIG should provide the Investigations Committee with the following: (a) a copy of the *draft* QAR report and attachments; (b) the reviewed OIG's response to the draft QAR findings; and (c) a written summary of the material facts regarding the disagreement.

The Investigations Committee will work with the IGs of the reviewed OIG and reviewing OIG to resolve the dispute. A range of options are available to the Investigations Committee. For example, the Investigations Committee may elect to: (a) accept the reviewing OIG's initial conclusion related to a *deficiency*; (b) accept the reviewed OIG's explanations; (c) request that the reviewing OIG conduct additional work to facilitate the resolution of the disagreement; (d) form a new QAR team tasked with conducting further review of the disputed findings; or (e) other actions deemed appropriate by the Investigations Committee.

- 4. Report Distribution.** The reviewing OIG will distribute the final QAR results as follows:
 - a. Reviewed OIG:** Original Opinion Letter and Observations Letter, including any attachments.

- b. **CIGIE:** Original Report, including the Opinion Letter, Observations Letter, and any attachments will be provided to CIGIE via email to cigieinvestigationspeerreview@cigie.gov.
- c. **Attorney General:** The Opinion Letter is provided to the AG office, for those OIGs that receive their law enforcement authority pursuant to the IG Act. Submissions of the Opinion Letter to the AG are transmitted via the AG Executive Secretariat at dojexecsec@usdoj.gov.

Additionally, consistent with the CIGIE Quality Standards for Federal Offices of Inspector General, a reviewed OIG may provide a copy of the final letters resulting from the QAR to the head of the agency or department and/or make the results publicly available.

5. Files Maintenance.

- a. The reviewing OIG will maintain any documentation it produced during the QAR (checklists, notes, etc.).
- b. After issuing the final report, the reviewing OIG will return or destroy any hard-copy records that were obtained from the reviewed OIG, as referenced in the MOU.
- c. The reviewing OIG will retain electronic records in accordance with guidelines established by the National Archive and Records Administration. All requests for access to the QAR files—to include FOIA and Privacy Act requests, litigation or discovery demands, or requests from oversight bodies—must be processed in consultation with the reviewing and reviewed OIG and the CIGIE Executive Director. Depending on the nature of the request, the reviewing OIG may need to refer the requested/demanded documentation to the reviewed OIG for further processing.

ACKNOWLEDGEMENTS

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