# Appendix A: Peer Review Report Template

##### (Reviewing OIG Letterhead)

External **[Replace with “Modified”, if appropriate]** Peer Review Report **[Insert “Draft”, if applicable]**

##### (Date)[Date the report is made final and delivered to the Reviewed Office of Inspector General (OIG). Put “TBD” on draft version]

##### To (Name), Inspector General [Or name and title of head of the Reviewed Organization’s Inspection and Evaluation (I&E) Organization]

##### (Name of Agency)

This required external **[Replace with “modified,” if applicable]** peer review was conducted in accordance with the Council of the Inspectors General on Integrity and Efficiency (CIGIE) Inspection and Evaluation Committee guidance as contained in the CIGIE *Guide for Conducting Peer Reviews of Inspection and Evaluation Organizations of Federal Offices of Inspector General (Blue Book)*. The peer review was conducted from **[Insert date of entrance meeting]** through **[Insert date of final report]**.

The Reviewing OIG assessed the extent to which **[Insert Name of Reviewed Organization]** complied with the seven covered **[Adjust the number if additional standards were covered]** Blue Book standards, specifically: Quality Control; Planning; Data Collections and Analysis; Evidence; Records Maintenance; Reporting; and Followup. **[Insert any additional standards covered and the rationale for their inclusion.]** This assessment included a review of the **[Insert Name of Reviewed Organization]**’s internal policies and procedures **[Insert issuance date and any other identifying information, such as title]** implementing the seven covered **[Adjust for any added standard(s)]** CIGIE *Quality Standards for Inspection and Evaluation*, January 2012. It also included a review of selected inspection and evaluation reports issued between **[Insert Date]** and **[Insert Date]** to determine whether the reports complied with the covered Blue Book standards and the **[Insert Name of Reviewed Organization]**’s internal policies and procedures. **[Do not include this sentence for a modified peer review.]**

##### Overall Conclusion

The Reviewing OIG determined that the **[Name of Reviewed Organization]**’s policies and procedures generally **[Insert either “were consistent with”, “were not consistent with”, or “were consistent with XX (Insert appropriate number) of]** the seven Blue Book standards addressed in the external peer review. **[List the Blue Book standard(s) or part of standards that the internal policies and procedures were generally not consistent with.]** Of the **XX [Insert number of reports reviewed]** reports reviewed, **XX [Insert appropriate number of reports]** generally complied with **[Replace with “did not comply with”, when appropriate]** the seven covered Blue Book standards. **[Do not include the last sentence for modified peer review.]**

##### Descriptions of Significant Noncompliance(s) [Insert when one or more significant noncompliances are identified]

We noted the following significant noncompliance(s) during our review:

##### [Describe each significant noncompliance identified in terms of the applicable Blue Book standard(s) and noncompliance with the Reviewed Organization’s internal policies and procedures, when applicable.]

##### [Example provided below]

1. Noncompliance – Reporting Standard. We identified significant errors in two of four I&E reports reviewed that affected the factual accuracy of the reports. Each of the two I&E divisions reviewed issued one of the reports. The Blue Book reporting standard states that reports should present factual data accurately, fairly, and objectively. The **[Insert Reviewed Organization’s name]** internal policies and procedures adequately addressed implementation of the reporting standard requirements by requiring a quality control as recommended in the quality standard. However, the I&E division did not adequately implement the required quality control procedure. The errors found, and the impact the errors had on the factual accuracy of the reports, are summarized below:
	* Report No. XX, Title (Date). The report stated that the actions taken by the program office were in noncompliance with Departmental Regulation No. XX Title. The evidence in the project documentation shows that the program office was in compliance with the regulation as it existed at the time the program office took the action. However, the change to the regulation that lowered the threshold for requiring the specific action that was the basis for citing the noncompliance was not effective until six months later. Therefore, the report finding was inaccurate, and the recommendation was not applicable. The internal policies and procedures require an independent reference review of all reports to verify the factual accuracy prior to issuance. Due to time constraints the independent reference review was not performed.

Recommendation – **[Insert Reviewed Organization’s name]** OIG should implement a quality control check to verify that the required independent reference review is performed on all reports.

Views of Responsible Official. Agree. The OIG will review its current process for tracking completed independent reference reviews and identify and implement an appropriate control.

* + Report No. XX, Title (Date). The report stated that the responsible management official had taken the appropriate actions needed to ensure that a certain activity related to the health and safety of a work force had occurred. The evidence supporting the finding and conclusion in the report was a statement from the responsible management official explaining what steps had been taken and concluding that the activity had occurred with the expected result. The inspector did not verify the information in the management official’s statement as required by the inspection plan. Therefore, the report finding was inaccurate and incorrectly provided stakeholders assurance that the work force was adequately protected from a specific threat. The required supervisory review of the

project documentation or the report was not performed due to the inspector’s experience level and years of experience.

Recommendation – **[Insert Reviewed Organization’s name]** OIG should verify that the required supervisory review of the project documentation and report occurred prior to final report issuance.

Views of Responsible Official. Agree. Final reports will not be issued without a signed statement by the supervisor that the required duties have been performed.

1. Noncompliance – **[Describe in format as shown above]**

Enclosure 2 to this report includes the response by **[Insert Reviewed Organization’s name]** OIG to the above deficiencies.

**[Insert this sentence when a Letter of Comment is issued.]** We have issued a Letter of Comment dated **[Insert date]** that describes findings that were not considered to sufficiently impact compliance with a covered Blue Book standard.

The **[Insert Name of Reviewed Organization]** management officials provided a response to our Peer Review Report (Enclosure 2) in which they agreed with **[Insert or “disagreed with”, when appropriate] XX [Insert number of recommendations agreed with or disagreed with, as appropriate]** of **XX [Insert total number of recommendations]** recommendations.

/s/

##### [Insert Name], [Inspector General or their designee]

Enclosure(s) As stated

## ENCLOSURE 1: Scope and Methodology

##### The [Insert Name of the Reviewing OIG] selected the following [Insert number of reports reviewed] reports for review. [Insert an explanation of the basis or methods used to select the reports. If the Reviewed Organization suggested certain reports for consideration, identify the report(s) included for that reason.]

##### [If the peer review included a review of the Reviewed Organization’s monitoring or oversight of a contracted out I&E, explain the work performed.]

##### [Any changes to the scope or methodology for the review (i.e., agreements on streamlining for smaller I&E units as appropriate) should be documented in this section.]

##### [List each report reviewed including title, number, and date issued. Indicate any reviewed report that was performed by a contractor.]

##### The [Insert Name of the Reviewing OIG] conducted an onsite visit(s) on [Insert appropriate dates]. [Briefly describe additional methods used in conducting the review, such as interviews or briefings.]

##### [Describe any constraints on the Reviewing OIG’s ability to exercise its professional judgment and state the impact of this constraint(s) on the peer review.]

##### [Describe any limitation on or impairment to the Reviewing OIG’s independence, as well as mitigating actions taken, if applicable.]

## ENCLOSURE 2: Reviewed Organization Comments to Draft Peer Review Report

Reviewed Organization’s comments to the draft Peer Review Report, when provided, should be included as an enclosure to the final Peer Review Report.