**MS 127 Office of Health Services: Organization, Mission, and Functions**

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Post Service Task Force Charter

**Table of Contents**

1.0 Authority  
2.0 Purpose  
3.0 Organization  
4.0 Office Missions  
  4.1 Office of Health Services  
  4.2 Office of Medical Services  
  4.3 Counseling and Outreach Unit  
5.0 Office Functions  
  5.1 Associate Director for Health Services  
  5.2 Office of Medical Services  
  5.3 Counseling and Outreach Unit  
6.0 Effective Date

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**1.0 Authority**

Peace Corps Act, 22 U.S.C. 2506

**2.0 Purpose**

The purpose of this manual section is to describe the organization, mission, and functions of the Office of Health Services (OHS).

**3.0 Organization**

OHS is headed by the Associate Director for Health Services (AD/OHS). The AD/OHS reports directly to the Peace Corps Deputy Director. OHS includes seven sub-units, the Office of Medical Services (OMS), the Quality Improvement Unit, the Epidemiology and Surveillance
Unit, the Peace Corps Medical Officer Support Unit, the Health Informatics Unit, the Financial and Resource Management Unit, and the Counseling and Outreach Unit (COU). These units are each headed by a manager who reports to the AD/OHS. The Office of Medical Services contains three additional units, the Pre-Service Unit, the Field Support Unit, and the Post-Service Unit.

4.0 Office Missions

4.1 Office of Health Services

The Office of Health Services operates a comprehensive, world-wide health system designed to maintain and improve the health of Trainees, Volunteers and, as authorized, Returned Volunteers. OHS achieves this goal by assessing the medical needs of applicants and invitees, providing clinical and preventive health services, clinical supervision and support, technical advice, training and education, and administrative support services through a multidisciplinary staff of trained professionals.

5.0 Office Functions

5.1 Associate Director for Health Services

(a) Advises the Director and senior staff on matters related to the health of applicants, invitees, and V/Ts, during and after their service;

(b) Serves as liaison between OHS and other Peace Corps offices on administrative and program matters that affect the programs and policies of the office;

(c) Establishes Standard Operating Procedures for administrative functions of OHS, such as time and attendance, travel, procurement requests, training requests, and claims processing;

(d) Conducts studies and presents strategies for maintaining and improving the health of V/Ts, containment of health care costs, enhancement of health and safety measures, and continuous quality improvement of the operations of Peace Corps health system.

(e) Ensures performance of the authorities related to the Kate Puzey Act that have been delegated to the Associate Director under Attachment K of MS 114 Delegation of Authority; and

(f) Supports and coordinates the operation of any agency-wide ad hoc working groups designed to improve the health of V/Ts or the operations of the Peace Corps health system, including the Post-Service Task Force.

5.2 Office of Medical Services

The Office of Medical Services is headed by the Director, Office of Medical Services whose primary function is to develop and manage a comprehensive health care program for V/Ts, including the medical clearance of applicants and invitees, delivery of medical care and health
services to V/Ts, including medical evacuation, and to coordinate responsibility and oversight of the health care system for V/Ts with the Regions. Other functions of the Office of Medical Services (OMS) are distributed through three distinct operational units:

5.2.1 Pre-Service Unit

(a) Develops, implements, and monitors, the process for reviewing Peace Corps Volunteer applicants and invitees for medical clearance for service.

5.2.2 Field Support Unit

(a) Provides clinical oversight of and consultation for Peace Corps Medical Officers;

(b) Manages and oversees care provided to V/Ts;

(c) Provides 24-hour medical duty officer coverage for Peace Corps medical emergencies; and

(d) Manages the medical separation process applicable to V/Ts;

5.2.3 Post-Service Unit

(a) Serves as liaison between the Peace Corps and the Department of Labor on the eligibility of former V/Ts for Federal Employees’ Compensation Act (FECA) benefits;

(b) Ensures that Returned Volunteers have access to medical and dental evaluations for service-related medical conditions as authorized by the Peace Corps Act; and

(c) Administers a short-term private insurance plan available to Returned Volunteers.

5.3 Quality Improvement Unit

The Quality Improvement Unit monitors the performance of the Peace Corps health system, primarily related to the quality of clinical care provided to Volunteers. The Quality Improvement Unit:

(a) Manages the credentialing process for Peace Corps Medical Officers (PCMOs) and Medical Assistants;

(b) Manages the performance evaluation process for Peace Corps Medical Officers;

(c) Develops health policy, including medical technical guidelines, and provides oversight of policy implementation;

(d) Investigates, monitors and reports patient safety events;

(e) Manages in-country health unit site assessment program;

(f) Performs chart reviews to assess PCMO performance;
(g) Manages a mechanism that allows Volunteers to express health concerns directly to OHS;

(h) Conducts quality improvement training for overseas and headquarters staff;

(i) Develops data collection, analysis and reporting of health system performance measures; and

(j) Manages the Health Care Quality Assurance Council for agency leadership.

5.4 Epidemiology and Surveillance Unit

The Epidemiology and Surveillance Unit analyzes reportable health events and utilizes data for programming, training, and research related to V/T health. The Epidemiology Unit:

(a) Manages the Epidemiological Surveillance System and databases related to V/T health;

(b) Monitors, evaluates and conducts studies to analyze trends in V/T health;

(c) Assists in designing education and prevention strategies using epidemiologic data;

(d) Monitors and evaluates interventions designed to improve V/T health;

(e) Responds to outbreaks by coordinating efforts with Regions and in-country staff;

(f) Consults with outside agencies (e.g., CDC, EPA, WHO, State) as needed on matters related to V/T health; and

(g) Develops, monitors and maintains systems to respond to requests for information, analysis or advice on Volunteer health conditions.

5.5 Peace Corps Medical Officer Support Unit

The Peace Corps Medical Officer (PCMO) Support Unit provides administrative, educational, and policy support to PCMOs, Medical Assistants/Secretaries and OHS staff. The PCMO Support Unit:

(a) Coordinates PCMO hiring and TDY PCMO coverage to ensure appropriate health unit staffing;

(b) Analyzes PCMO staffing issues with OHS leadership;

(c) Collaborates with various Peace Corps offices on PCMO hiring and management issues;

(d) Develops and coordinates orientation and training for PCMOs, Medical Assistants, Medical Secretaries and OHS staff to maintain their skills and satisfy licensing and credentialing standards;

(e) Mentors new PCMOs;
(f) Assists in remediation of PCMOs;

(g) Provides PCMEDICS training to newly hired Medical Assistants/Secretaries; and

(h) Provides oversight of Medical Inventory processes and programs.

5.6 Health Informatics Unit

The Health Informatics Unit manages OHS health information systems, to include Peace Corps electronic medical record. The Health Informatics Unit:

(a) Assists in the development, management, and maintenance of OHS health information systems;

(b) Manages health data and information generated from OHS health information systems;

(c) Trains and supports OHS health information systems users; and

(d) Manages the Peace Corps medical records system, and releases medical information to V/Ts and authorized facilities and persons.

5.7 Financial and Resource Management Unit

The Financial and Resource Management Unit is responsible for all personnel and financial matters related to OHS.

(a) Facilitates all personnel and financial transactions related to OHS;

(b) Analyzes OHS financial data and provides reports to OHS and Agency leadership as needed; and

(c) Manages the Centrally Managed Account for certain V/T medical expenses.

5.8 Counseling and Outreach Unit

The Counseling and Outreach Unit provides mental health services to Volunteers and Trainees, consultation and support to Peace Corps staff, coordinates some emergency operations, and manages the Medevac Support Program. The Counseling and Outreach Unit:

(a) Provides mental health counseling to Volunteers/Trainees (V/Ts);

(b) Serves as liaison to V/Ts and their families regarding health and welfare inquiries, family emergencies, political unrest, natural disasters, and other emergencies;

(c) Provides consultation to V/Ts, Country Directors, and other staff at post on adjustment issues in country;
(d) Provides Peace Corps staff overseas or in the United States with consultation, training and technical assistance on V/T support and resilience issues, in the areas of personal safety, counseling, administrative separation and death;

(e) Assists Peace Corps’ response in the event of death, disappearance or abduction of a V/T;

(f) Authorizes emergency and respite leave and provides support to V/Ts on emergency leave;

(g) Provides 24-hour duty officer coverage for Peace Corps non-medical emergencies and provides 24-hour COU clinician coverage for mental health emergencies, which includes weekends and holiday. Back-up is provided for both positions.

(h) Provides training and consultation to Peace Corps Medical Officers on mental health concerns.

(i) Ensures performance of the authorities related to the Kate Puzey Act that have been delegated to the Director of the Counseling and Outreach Unit under Attachment K of MS 114 Delegation of Authority.

6.0 Effective Date

The effective date is the date of issuance.