

## Why GAO Did This Study

IHS provides health care services directly to American Indian and Alaska Native populations at federally operated medical facilities. Well-functioning facilities and equipment are necessary for the provision of high quality and accessible services.

GAO was asked to review IHS's facilities and equipment and how they affect the provision of health care. This report reviews the state of IHS's federally operated medical facilities and equipment. It also describes IHS efforts to mitigate negative effects on patient care. GAO interviewed IHS officials from headquarters, three geographic areas, and 14 federally operated facilities, conducting site visits to 13 of these facilities. GAO also reviewed agency documents, including relevant policies, and IHS data on its facilities and equipment for the selected areas and facilities.

## What GAO Recommends

GAO is making three recommendations to IHS, including that IHS should: assess the extent of medical equipment data problems across IHS areas and implement a plan to correct any problems; and regularly monitor adherence to IHS medical equipment inventory management policy requirements. IHS concurred with all three recommendations.

View [GAO-24-105723](#). For more information, contact Michelle B. Rosenberg at (202) 512-7114 or [RosenbergM@gao.gov](mailto:RosenbergM@gao.gov).

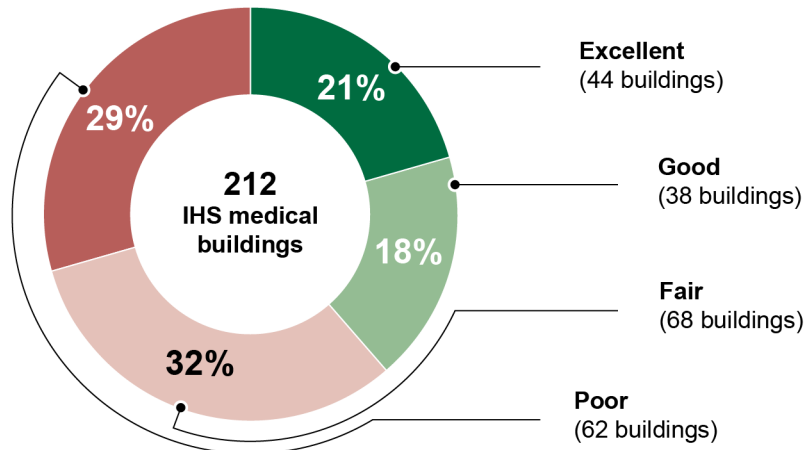
# INDIAN HEALTH SERVICE

## Many Federal Facilities Are in Fair or Poor Condition and Better Data Are Needed on Medical Equipment

### What GAO Found

Indian Health Service (IHS) data show that the buildings that comprise its federally operated medical facilities range in age from 1 to 171 years, with a median age of 39 years. Of the 212 buildings that IHS has rated, about 61 percent are in fair or poor condition, compared to the goal of having 90 percent in good or excellent condition. According to IHS officials, older facilities may have insufficient space for modern health care delivery needs and outdated infrastructure that can fail and lead to facility closures. IHS officials also reported that funding constraints and other challenges, such as maintaining adequate staffing levels, limit their ability to repair and improve their medical facilities.

Condition of Indian Health Service Federally Operated Medical Buildings



Source: GAO analysis of Indian Health Service data. | GAO-24-105723

The state of medical equipment at IHS federally operated facilities cannot be determined because IHS does not have complete or reliable data. Although IHS policy requires its facilities to maintain medical equipment inventories in a designated system, GAO's review of data for three selected IHS areas found that not all facilities were doing so. Further, when equipment was recorded, the data, such as the installation date, were not always accurate. IHS leadership was not aware of these problems until GAO's review and does not know the extent to which similar problems may exist in the other seven IHS areas with federally operated facilities. Without complete or reliable medical equipment data, IHS cannot appropriately plan and budget for its equipment needs, putting its ability to deliver high quality health care at risk.

IHS officials reported using a number of strategies to help mitigate negative effects aging facilities and equipment may have on patient care, including transferring patients to other facilities. Despite these efforts, officials described ways their aging facilities and equipment can negatively affect patient care. For example, overcrowded waiting areas or facility deficiencies like uneven walkways can increase the risk of patient infections or injuries. Also, officials noted that broken medical equipment or having to refer patients to other facilities could lead to delays in care—potentially exacerbating patients' medical conditions.