



Department of Veterans Affairs Office of Inspector General

Healthcare Inspection Review of a Surgical Technician's Duties John D. Dingell VA Medical Center Detroit, Michigan

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DEPARTMENT OF VETERANS AFFAIRS
Office of Inspector General
Washington, DC 20420

TO: Veterans Integrated Service Network Director (10N11)

SUBJECT: Healthcare Inspection-Review of a Surgical Technician's Duties
John D. Dingell VA Medical Center, Detroit, Michigan

Purpose

The Department of Veterans Affairs Office of Inspector General (OIG) Office of Healthcare Inspections (OHI) reviewed an allegation reported to the Hotline Section that a surgical technician at the John D. Dingell VA Medical Center (medical center) was performing duties beyond the scope of practice and position description of a surgical technician. These alleged duties included cutting, clamping, and stitching arteries and veins. The purpose of this inspection was to determine the validity of the allegation.

Background

Located in Detroit, Michigan, the medical center provides a broad range of inpatient and outpatient services. Outpatient care is also provided at two community-based outpatient clinics located in Yale and Pontiac, Michigan. The medical center is part of VISN 11 and serves a veteran population of about 464,000 in a primary service area that includes four counties in Michigan.

An anonymous complainant contacted the OIG Hotline and reported that a surgical technician at the medical center was allowed to perform duties outside the surgical technician's scope of practice and position description. The complainant alleged that the surgical technician was given supervisory authorization to perform in the role of a first assistant surgical technician.

Scope and Methodology

Interviews were conducted with management, the Chief of Surgery, the current operating room (OR) clinical nurse manager (CNM), physicians, OR nurses, surgical technicians, and other personnel assigned to the OR.

We reviewed the criteria used to certify surgical technicians as first assistants,¹ functional statements, staff meeting minutes, Reports of Contact, electronic mail, surgery schedules, and the certified time schedules for the 2nd and 3rd quarters of Fiscal Year (FY) 2005. We also conducted computerized patient record system (CPRS) reviews.

The inspection was conducted in accordance with the *Quality Standards for Inspections* published by the President's Council on Integrity and Efficiency.²

Inspection Results

Issue: A Surgical Technician Functioning as First Assistant

The allegation that a surgical technician was functioning in the role of first assistant was substantiated. We identified three instances in which this occurred, all in assisting a gynecological surgeon.

The medical center's surgery schedule was reviewed for the 2nd and 3rd quarters of FY 2005. The surgical technician who was named in the allegation was documented as first assistant on the surgical schedule and in the OR report in CPRS for three patients.

A review of the surgical technician's education and training records was conducted. No evidence or documentation was found that the surgical technician was ever a certified surgical technician or a certified first assistant. At the time of our review, the surgical technician had resigned employment from the medical center; therefore, a telephone interview was conducted. The surgical technician was questioned regarding education, training, and certification for the role of first assistant. The surgical technician acknowledged not completing the requirements needed to become a certified first assistant. The surgical technician stated that permission was granted by the former OR CNM, who had also resigned prior to our on-site visit, to perform in the role of first assistant in the OR, especially in gynecological surgery cases.

The attending gynecological surgeon was interviewed. This surgeon identified three cases in which that the surgical technician had performed in the role as first assistant. The surgeon praised the surgical technician's performance and stated that the surgical technician performed competently, that all actions were supervised, and at no time were any tasks performed independently. We conducted a record review in the CPRS of these three identified patients that were documented on the Surgery Service List of Operations.

¹ A specially trained clinician that assists with retracting, sponging, suturing, cauterizing bleeding blood vessels, and closing and treating wounds. See: <http://stats.bls.gov/oco/ocos106.htm>

² See: www.ignet.gov

We found that the surgical technician was clearly identified as first assistant for all three gynecological cases. We did not find documentation for any post-operative complications for the three records reviewed. One patient did not attend a post-operative follow-up gynecological appointment; however, that patient did have subsequent CPRS documentation from other clinic appointments.

Conclusion

We substantiated the allegation that a surgical technician was performing beyond the scope of practice and position description for a surgical technician. However, we found that quality of care was not compromised. When medical center management was informed of the surgical technician's actions, they took appropriate action to stop the surgical technician performing first assistant duties. During the course of our review, the surgical technician and the CNM resigned their medical positions, and were no longer employed by the medical center.

Recommendation

We recommended that the VISN Director ensure that the Medical Center Director require that surgical technicians in the OR perform duties within their scope of practice and position description.

Medical Center and VISN Director Comments

The Medical Center Director and VISN Director concurred with the findings.

Assistant Inspector General for Healthcare Inspections Comments

The Medical Center and VISN Directors agreed with the findings and recommendations and provided acceptable improvement plans. We will follow up on planned actions until they are completed.

JOHN D. DAIGH JR., M.D.
Assistant Inspector General for
Healthcare Inspections

VISN Director Comments

**Department of
Veterans Affairs**

Memorandum

Date: March 17, 2006

From: VISN Director

Subject: **Review of a Surgical Technician's Duties Normally
Assigned to Surgeons**

To: Director, Management Review Service (10B5)

1. As a healthcare organization we have the privilege of providing care for our Nation's veterans. With that privilege comes the expectation that the care we provide is given with the utmost attention to professionalism, knowledge, and compassion from our staff.

2. We appreciate every opportunity to optimize our service to veterans and to improve clinical outcomes. This particular incident afforded the leadership team of the John D. Dingell (JDD) VAMC, Detroit, Michigan the opportunity to review internal processes for ensuring that staff are fully aware of their scopes of practice and are in compliance with each of them. This incident identified an opportunity for improving the efficiency and care processes of the operating room at the JDD VAMC.

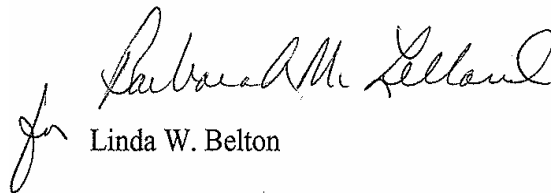
3. The OIG Healthcare Inspector's knowledge, expertise and assistance was insightful and invaluable to the JDD VAMC leadership. The following actions have been taken to address the findings:

a. An appointment of an Associate Chief Nurse for Surgical Service was selected in December 2005, and an Operating Room Clinical Nurse Manager was selected in February 2006 with orientation and training completed related to competency assessment and review.

b. Continuous review process by the Clinical Nurse Manager and Associate Chief Nurse for Surgical Service has been implemented and is reviewed with the Associate Director of Patient Care Services on a monthly basis.

c. Chief of Surgery under the Direction of the Chief of Staff has communicated the scopes of practice by support personnel in the operating room and the limitations of their capabilities at this time.

d. A proposal was developed and approved by the JDD VAMC leadership to fund the advancement of two nurses to first attend status by completion of an approved private sector RN First Assistant (RNFA) Program. The medical center is in the process of developing a plan for establishment of a clinical component of the RNFA training with a target completion date of December 2006.



Linda W. Belton

VISN Director's Comments to Office of Inspector General's Report

The following VISN Director's comments are submitted in response to the recommendation in the Office of Inspector General's Report:

OIG Recommendation

Recommended Improvement Action. We recommend that the VISN Director ensure that the Medical Center Director require that surgical technicians in the OR perform duties within their scope of practice and position description.

Concur **Target Completion Date:** Completed

- a. An appointment of an Associate Chief Nurse for Surgical Service was selected in December 2005, and an Operating Room Clinical Nurse Manager was selected in February 2006 with orientation and training completed related to competency assessment and review.
- b. Continuous review process by the Clinical Nurse Manager and Associate Chief Nurse for Surgical Service has been implemented and is reviewed with the Associate Director of Patient Care Services on a monthly basis.
- c. Chief of Surgery under the Direction of the Chief of Staff has communicated the scopes of practice by support personnel in the operating room and the limitations of their capabilities at this time.
- d. A proposal was developed and approved by the JDD VAMC leadership to fund the advancement of two nurses to first attend status by completion of an approved private sector RN First Assistant (RNFA) Program. The medical center is in the process of developing a plan for establishment of a clinical component of the RNFA training with a target completion date of December 2006.

OIG Contact and Staff Acknowledgments

OIG Contact	Verena Briley-Hudson, MN, RN, Director Chicago Office of Healthcare Inspections (708) 202-2672
Acknowledgments	Andrea Buck, MD, JD Wachita Haywood, RN Jennifer Reed, RN George Wesley, MD

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