

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

TO: Assistant Inspector General for Healthcare Inspections **From:** Atlanta Regional Director for Healthcare Inspections

Subject: Adverse Outcomes After Minor Surgical Procedures Central Alabama Veterans Health Care System MCI#2012-00768-HI-0331

The Office of Healthcare Inspections, Atlanta region, conducted a Combined Assessment Program (CAP) review at the Central Alabama Veterans Health Care System (CAVHCS), Montgomery and Tuskegee, Alabama, during the week of November 28, 2011. As part of the CAP, we conducted an Employee Assessment Review (EAR) survey, which inquires if employees of a VA facility believe there are conditions present that are inconsistent with quality medical care, which may put patient(s) at risk. An anonymous survey respondent alleged a number of issues related to the surgical program and facility leadership's responsiveness to these concerns. The OHI Hotline Working Group accepted four surgical cases with adverse outcomes for review.

We conducted preliminary reviews of the four surgery cases, the first of which occurred in 2007 and the last in 2011. We reviewed the CAVHCS root cause analyses (RCAs), peer reviews, fact-findings, and Administrative Board of Investigation (AIB) which were conducted in response to the four cases. We also reviewed the Office of the Medical Inspector's report on these same issues and CAVHCS follow-up actions on recommendations related to the four cases we reviewed. Further, we were told that the CAVHCS had been on a semi-surgical stand down as a result of previous complaints and issues concerning Surgical Service. However, a VHA surgery team conducted a site visit the week we were on site for the CAP review and approved the facility for a reinstatement to provide standard surgical services.¹

We found that each of the four cases we reviewed had received thorough and credible reviews, often by multiple parties, and that CAVHCS managers developed reasonable corrective action plans and are following-up to assure action completion and effectiveness. Therefore, we recommend that this case be administratively closed.

I concur with recommendation for administrative closure of this inspection.

Assistant Inspector General

for Healthcare Inspections