

**ADMINISTRATIVE SUMMARY OF INVESTIGATION  
BY THE VA OFFICE OF INSPECTOR GENERAL  
IN RESPONSE TO ALLEGATIONS  
REGARDING PATIENT WAIT TIMES**



**VA Medical Center in Southeast Louisiana VA Health Care  
System, New Orleans/Baton Rouge, Louisiana  
March 3, 2016**

**1. Summary of Why the Investigation Was Initiated**

This case was initiated in May 2014 based on information provided by an anonymous source to the Department of Veterans Affairs (VA) Office of Inspector General (OIG) Hotline alleging that the scheduling staff members at the VA Outpatient Clinic (OPC) New Orleans and the Community Based Outpatient Clinic (CBOC) Baton Rouge were manipulating patient appointment information. The alleged manipulation was intended to make patient access to care appear to be more timely than the actual wait time experienced by patients.

**2. Description of the Conduct of the Investigation**

- **Interviews Conducted:** VA OIG interviewed CBOC Baton Rouge employees and supervisors involved in patient scheduling and nursing staff. We also interviewed OPC New Orleans employees and a supervisor involved in patient scheduling, as well as the director of the Southeast Louisiana Veterans Health Care System.
- **Records Reviewed:** VA OIG reviewed email correspondence, a training certificate provided by an employee, and the electronic official personnel folder (eOPF) of the former director of the Southeast Louisiana Veterans Health Care System.

**3. Summary of the Evidence Obtained From the Investigation**

**Interviews Conducted**

- A Patient Services assistant at CBOC Baton Rouge stated he was trained in 2008 to use the “next available date” as the patient’s “desired date” when scheduling appointments for patients in the Veterans Health Information Systems and Technology Architecture (VistA), an electronic scheduling system. He was not directed to use the next available date by the current management at CBOC Baton Rouge. He always used the next available date as the patient’s desired date because that was the way he was trained.

When re-interviewed, he stated that in October 2010, he attended training, “Scheduling Training – Make Appointment,” at a VA administrative office New Orleans, LA (he did not recall who the instructor was). During this training, attendees were trained to use the next available date as the patient’s desired date in VistA when scheduling appointments for patients (he provided a copy of his certificate of completion for this course). He also provided an email that he received in May 2014 from the newly appointed administrative manager that he believed instructed the scheduling staff at CBOC Baton Rouge to use the negotiated date, which was the date agreed upon by the patient based on the provider’s availability, as the patient’s desired date.

- A program analyst stated that she supervised phone pool schedulers at CBOC Baton Rouge, but she did not schedule appointments. She stated that the phone pool clerks only scheduled new patients and were instructed to use the patient's desired date when scheduling appointments. If that date was not available, the patient was placed onto the electronic wait list.
- Another CBOC Baton Rouge manager stated he never instructed or pressured anyone at CBOC Baton Rouge to use the next available date as the desired date when scheduling patients' appointments. He was never instructed or pressured by any of his supervisors to use the next available date as the desired date. He instructed his staff to use each patient's actual desired date when scheduling appointments.

When re-interviewed, he stated that he did not know the next available date was being used as patients' desired dates by schedulers at CBOC Baton Rouge when scheduling appointments. He reiterated that he instructed his staff to "not use next available, do not back out."

- A CBOC Baton Rouge nurse stated that she was trained in 2000 at a VA Medical Center in another state to use the next available date as the patient's desired date when scheduling appointments in VistA and she always used the next available date as she was trained. She was not directed to use the next available date by the current management at CBOC Baton Rouge. She stated that she always used the next available date as the patient's desired date because that was the way she was trained to schedule appointments.

When re-interviewed, she reiterated that she was not instructed by current management at CBOC Baton Rouge to use the next available date as the patient's desired date in VistA when scheduling appointments. She explained that using the next available date was the way all patient appointments in the VA were scheduled because that was the way all personnel within the VA that schedule appointments were trained to do it.

- Another CBOC Baton Rouge VA nurse stated that she did not schedule appointments for patients and she was not familiar with the scheduling process in VistA. She was not aware of any issues the registered nurses had with scheduling patients or using VistA. She met with the clinic manager almost every morning and she did not recall ever discussing (at any time) the patient scheduling process.
- Another CBOC Baton Rouge clerk stated that she was trained to schedule patients' appointments in VistA by another unnamed clerk. She was taught to use the next available date as the patient's desired date, and this was the only way she knew how to schedule appointments. She was unaware that using the next available date as the patient's desired date affected the wait time metrics. She was not directed to use the next available date as the patient's desired date by the current management at CBOC Baton Rouge.
- A Patient Services assistant, CBOC Baton Rouge, demonstrated scheduling an appointment in VistA for a patient and she used the next available date as the patient's desired date. She located the next available appointment date, backed out of the system,

and then went back into the system and used the next available appointment date as the patient's desired date. It was her understanding that when the patient agreed to come in for an appointment on a date that the doctor had an available time slot, the patient's desired date changed to the agreed-upon date of the appointment. The only training she received regarding scheduling patient appointment in VistA was a PowerPoint presentation at an unrecalled date when the VA first began using VistA to schedule appointments. She did not recall if anyone ever instructed her to back out and change the desired date. Although she had trained other patient services assistants at CBOC Baton Rouge on scheduling patient appointments in Vista (by backing out and changing the desired date), she has not trained anyone in a long time. She has not attended any other training regarding scheduling appointments in VistA since the initial PowerPoint presentation.

- A manager at CBOC Baton Rouge stated that she did not know how to schedule appointments in VistA. She discussed the definition of what the patient's desired date was with the Patient Services assistants at CBOC Baton Rouge, but not how to use that date when scheduling appointments in VistA. She received a PowerPoint presentation titled *Access & Scheduling Core Concepts and Business Practices* from the associate chief of staff for Clinics, Southeast Louisiana Veterans Health Care System. She misinterpreted the slide regarding desired dates and believed the desired date was an agreed-upon date based on the first available date the physician had that the patient desired to be seen. She sent an email to the Patient Services assistants at CBOC Baton Rouge explaining the desired date as such. She did not recall any discussions with her clinic manager regarding the use of desired dates when scheduling patient appointments.
- An OPC New Orleans manager stated she did not use, nor did she instruct the schedulers at OPC New Orleans to use, or have knowledge of other schedulers using the next available date as the patient's desired date when scheduling appointments in VistA. She had no knowledge of any scheduler at the VA OPC New Orleans using the next available date as the patient's desired date in VistA. She demonstrated scheduling an appointment in VistA and she used the correct desired date. She did not conduct training regarding the use of patients' desired dates when scheduling appointments in VistA with the schedulers at OPC New Orleans because she assumed they were all trained on how to correctly use the patient's desired date in VistA when they were hired by VA.
- An OPC New Orleans employee stated she was trained by a (former) clerk to use the next available date as the patient's desired date when scheduling patient appointments in VistA. She always used the next available date as the patient's desired date because that was the way she was trained. She was not directed to use the next available date by the current management at OPC New Orleans.
- Another OPC New Orleans employee stated she was trained by another clerk to use the next available date as the patient's desired date when scheduling patient appointments in VistA. She was not directed to use the next available date by the current management at OPC New Orleans. She always used the next available date as the patient's desired date because that was the way she was trained.

- The Director of the Southeast Louisiana Veterans Health Care System reported she never directed anyone to manipulate wait times to stay within the 14-day scheduling requirement and she did not direct anyone to “back out” of the system while scheduling patient appointments in VistA. She defined the patient’s desired date as “the first available date that the patient desires to be seen.” She was not trained on scheduling appointments for patients in VistA. Meeting patient access standards was a part of her performance plan, but she did not recall if it was within 14 or 30 days. There were no consequences for employees if patients were not being scheduled within the 14-day standard. If patients could not be seen because the demand exceeded the supply, she would attempt to get more supply (that is, doctors). She felt that numbers did not direct quality care. She believed the important thing was patients being seen at the right frequency, in the right place, and by the right provider as directed by clinical need.

### **Records Reviewed**

We attempted to review the past performance appraisals of the former director of the Southeast Louisiana Veterans Health Care System. However, the U.S. Office of Personnel Management’s Electronic Official Personnel Folder (eOPF) did not include those documents for the period of 2010 to present.

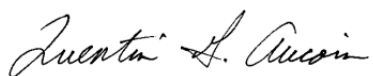
We examined email messages from May 2014 provided by a Patient Services assistant, COBC Baton Rouge.

We reviewed a training certificate for “Scheduling Training – Make Appointment” provided by a Patient Services assistant, CBOC Baton Rouge.

### **4. Conclusion**

The investigation revealed that OPC New Orleans VA and CBOC Baton Rouge scheduling staff did not properly use patients’ desired dates when scheduling appointments for patients. The agreed-upon dates, or next available dates, were used as patients’ desired dates. As a result, the true wait times were not recorded. This was caused by incorrect training and a lack of understanding of the system. The scheduling staff was not pressured or instructed by management to misuse the desired date. The investigation did not identify any schemes or “gaming” of the system that appeared to be intended to improve VA employee performance measures. No specific patient harm was identified as a result of the above allegations.

The OIG referred the Report of Investigation to VA's Office of Accountability Review on April 17, 2015.



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For more information about this summary, please contact the  
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