

OFFICE OF SPECIAL COUNSEL

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Whistleblower Rebuttal 03/16/2016

To: Lynn Alexander, Attorney Disclosure Unit, U.S. Office of Special Counsel

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Robert D Snyder,

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Fast is fine, but accuracy is everything. Human error, error avoidance and proactive approaches for error avoidance are ALL defined by adequate staffing. We as a society must empower every employee to do things consistently right ALL of the time. Any departure from existing policies and procedures will inevitably lead to error. Cutting corners is probably the most frequent cause of errors in the sterile processing department at the Southern Arizona Veterans Administration Health Care System (SAVAHCS). Shortcuts taken in violation of policies and procedures for processing reusable medical instrumentation (RME), specifically telescopes, probes, robotic, neurological and orthopedic instruments, for reusing single use devices (non RME) and for storing and handling of sterilized instrumentation provide examples that occur on a daily basis at SAVAHCS. Whether caused by an employee who doesn't know, doesn't care, doesn't follow procedure, doesn't pay attention or improper direction by the Chief or Assistant Chief of Sterile Processing, the end result produces the same outcome.

Understaffing creates unwanted and unnecessary deviation from the standards of excellence demanded at ALL times for personnel at SAVAHCS. Time constraints invoked by the Chief and Assistant Chief also pressure personnel to eliminate or modify one or more steps in the cleaning, testing, sterilization, storage and handling process of RME. I have witnessed this myself, as well as many other employees. This has been of concern and complaints by caring personnel as short staffing has been an issue for the last five years or so. The Chief and Assistant Chief of sterile processing ARE aware that more procedures, more responsibilities including but not limited to new clinical settings have been added to staffing duties. I totally disagree with the findings of this investigation. The staff either told the Office of Medical Inspectors (OMI) things that they wanted to hear for fear of retaliation or because they really don't care about human life except their own. I have witnessed the deviation and have even been injured by an infectious disease while working in the clean room so unless you are working side by side with fellow coworkers, it becomes something an inspector will never EVER witness because staff

knows it is not the right way to do things. May I suggest an unknown investigative employee plant placed within the department to really see what is occurring and who is really at fault?

Effectiveness and efficiency is doing the right thing and doing it correctly. Sterile processing technicians should not and cannot revise processing procedures. Moreover, the Operating Room is NOT at fault. Issues occur on a daily basis at SAVAHCS as well as other hospitals and this is the reason that experienced and educated technicians work to resolve such issues throughout any given day. Repetitive reprocessing of limited or one of a kind instrumentation for back to back scheduled cases occurs quite often and it is up to the sterile processing technician to bring this to the attention of the Chief or Assistant Chief. A knowledgeable Chief would in turn bring this to the attention of the Operating Room, informing them that sterile processing is having a problem handling the scheduled case load because of a staffing shortage and address THAT issue so that sterile processing technicians are not pushed to take shortcuts due to time constraints, limited instrumentation, scheduling demands and emergent unforeseen situations and add on cases added to the daily schedule. For whatever reason, sterile processing Chiefs obviously haven't enough experience to get a temp agency in to help out or do some serious hiring. The Chief that hired me twenty years ago as a temp had this insight. We are not in the business of building houses. We are in the business of saving lives. Veteran's lives matter.

In the investigative report it states that the Chiefs do not emphasize speed over compliance with competencies. NOT true. There has always been a priority system in place to triage the workload. That is a given. Anyone who knows their job, definitely knows this well. Prioritizing is as follows in the process:

1. First in, first out lane. RME is normally processed throughout the entire process.
2. RME moves to the front of the first in, first out lane and normally processed.
3. STAT processing, RME jump to the front of the first in, first out lane, normally processed and sterilized in the sterile processing department.
4. SUPER STAT processing, RME jump to the front of the first in, first out lane, normally processed and sterilized in the operating room.

The emphasis is on "normally processed". No deviation from competencies. Compliant but expedited.

Extremely developed detailed "Standard Operating Procedures" and Competencies and duplicating manufacturer's instructions doesn't seem cumbersome to me. It should be common practice for any new piece of RME that is introduced to staff at ANY level facility, as well as a comprehensive in-service show and tell, thus any written evidence in sterile processing leadership enforcing standard operational procedures and VA directives seems laughable especially when sterile processing leadership has NEVER worked a single day in the decontamination portion of the department. They would NOT know how to properly handle the amount of processes in a given eight hour shift on an EASY day. So how would they

know about enforcement? Strange.....the workload duties were always accomplished for the day by the first shift.

The workload for the following day in the preparation room was always accomplished by the second shift and the shelves were always clean when I arrived in the morning for my 7AM shift regardless of priority or staff shortages. So my question is.....If all the work was getting accomplished with the "extreme staff shortage", then why were 7 or 8 full time employees hired after I blew the whistle? Wow, YES.....corners were cut and probably still are being cut by employees who are lying about it because they are afraid of reprisal by Chiefs and Assistant Chiefs. Some are lying just because they are promised perks such as bonuses or even upward mobility such as becoming a supervisor and such.....some are standing by the real truth even though they have seen the wrath of the rotten management in the inner circle, they will always do the right thing....now it's up to the agencies to do the right thing and listen to the truth. Leadership communication style IS the problem, not the workload pressure. Because leadership pressures for quantity over quality! Most staff has no problem with communication. They know what needs to be done and when to do it. They know how to prioritize without direction from incompetent Chiefs and Assistant Chiefs.

The Chief of Sterile Processing has always completed training modules in the "Talent Management System" (TMS) for employees that I myself have witnessed. One of which is a personal friend of the Chief. This person constantly brags about her NOT having done her education requirements in years and wouldn't know any of the answers since the Chief always has her sign in and does the testing for her. I have witnessed this. This employee is not fulfilling her educational requirements and if asked according to her, would have a hard time. A few other people have told me that the Chief completes theirs also, but I have never witnessed this, only told about it.

Thank you for giving me this opportunity to comment and provide the truth once again in your investigation,

Lena Denise Cruz