



DEPARTMENT OF VETERANS AFFAIRS
Veterans Health Administration
Washington DC 20420

June 28, 2011

The Honorable William E. Reukauf
Associate Special Counsel
U.S. Office of Special Counsel 1730 M Street,
NW Washington, DC 20036-4505
RE: OSC File No. 01-10-1669

Dear Mr. Reukauf:

OSC has requested that VA provide additional information describing any action taken or planned as a result of the investigation. As a result of the investigation the Medical Center has either taken or is in the process of taking the actions listed below.

The following actions have been taken by the Medical Center:

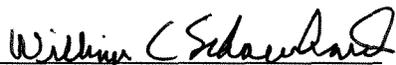
- The Medical Center provides 24/7 staff coverage to the blood culture analyzer.
- The Medical Center established a method of monitoring blood culture turn-around-time. It should take no more than 90 minutes from a positive result to communication with the clinical staff.
- The Medical Center created an operator competency review for microbiology testing.
- The Medical Center created a competency calendar of all microbiology laboratory employees with less than one year of employment. New employees are scheduled to have their 6 month and 12 month testing dates no less than 30 days prior to their 6 month and 12 month anniversaries.
- The Medical Center created a competency calendar for microbiology laboratory employees.
- As of January 31, 2011, the Medical Center assessed the competency of 100% of employees with a year or more of employment at the laboratory.
- The Medical Center developed a calendar listing procedures and expiration dates and provided the calendar in all laboratory binders.

- The Medical Center reviewed and amended procedures to include references validation no less than 30 days prior to the procedure anniversary date.
- The Medical Center presented amended procedures to the Microbiology Technical Meeting for concurrence and documented review in meeting minutes.
- The Medical Center disseminated new policy and changes at a monthly microbiology staff meeting and electronically to all bench staff and ensured that all bench staff signed the Microbiology review coversheet within 14 days of the review of the amendments.
- The Medical Center identified a reference laboratory report on the contamination of urine cultures and defined the audit numerator and denominator.
- The Medical Center determined a baseline urine culture contamination rate.
- The Medical Center developed a tracking tool for area-specific contaminations; and utilized information for targeted education and performance improvement.
- The Medical Center ensured timely (i.e. no greater than 60 minutes) transport time for samples from Central Receiving to Microbiology.
- The Medical Center sent clinical staff groups an educational email regarding the time sensitive nature of the stool specimens and importance of correct receptacle.
- The Medical Center provided picture poster board education for central receiving, nursing and medical staffs in all acute and outpatient clinic settings on the time sensitive nature of the stool specimens, specimen collection time and date, and importance of correct receptacle (e.g. Para Pak versus a Sterile urine cup).
- The Medical Center reviews the monthly Quality Control log book documentation for completeness.
- The Medical Center trends any noncompliance and communicates to the microbiology laboratory staff.
- The Medical Center wrote a procedure on identification and work up of diphtheroids. The Medical Center reviewed and approved the procedure at the microbiology technical meeting by January 19, 2011.

- The Medical Center reviewed all time-sensitive references and removed all dated material leaving only updated information for laboratory staff reference.

The Medical Center is in the process of taking the following actions:

- The Medical Center will ensure that there is at least 98% compliance with the blood culture turn-around-time.
- The Medical Center will review and amend procedures to include references validation, no less than 30 days prior to the procedure anniversary date.
- The Medical Center will present amended procedures to the Microbiology Technical Meeting for concurrence and document review in meeting minutes.
- The Medical Center will disseminate new policy/changes at the monthly microbiology staff meeting and electronically to all bench staff and ensure that all bench staff sign the microbiology laboratory review coversheet within 14 days of review/amendment.
- The Medical Center will establish a urine culture contamination target rate of less than 3 percent.
- The Medical Center is considering a process change that requires microbiology staff to reject stool specimens without the needed collection date/time; and track all rejected specimens by clinician and area/unit/clinic.



William C. Schoenhard, FACHE

Deputy Under Secretary for Health for Operations and Management