



Department of Veterans Affairs Office of Inspector General

Healthcare Inspection

Evaluation of Contracted/Agency Registered Nurses in Veterans Health Administration Facilities

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Executive Summary

Introduction

The Department of Veterans Affairs, Office of Inspector General, Office of Healthcare Inspections completed an evaluation of contracted/agency registered nurses (RNs) in Veterans Health Administration (VHA) facilities. The purpose of this review was to evaluate whether RNs working in VHA facilities through contracts or temporary agencies met the same entry requirements as RNs hired as part of VHA facility staff.

We performed this review at 23 VHA medical facilities during Combined Assessment Program review visits conducted from January 1–December 31, 2009.

Results and Recommendations

VHA facilities generally met requirements regarding contracted/agency RNs. However, not all facilities completed all required verifications, evaluations, and training prior to contracted/agency RNs caring for patients and accessing medical records. We noted opportunities for improvement in licensure verification, background checks, competency evaluations, completion of information security awareness and privacy awareness training, and maintenance of Advanced Cardiac Life Support certification.

We recommended that the Under Secretary for Health, in conjunction with Veterans Integrated Service Network and Facility Directors, ensure that:

- Credentialing documentation, including licensure and background checks, is completed prior to contracted/agency RNs providing patient care.
- Contracted/agency RNs comply with necessary competency evaluations.
- All required training is completed and certifications are current prior to contracted/agency RNs providing patient care and accessing medical records.

The Under Secretary for Health concurred with our findings and recommendations. The implementation plans are acceptable, and we will follow up until all actions are complete.



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

TO: Under Secretary for Health (10)

SUBJECT: Healthcare Inspection – Evaluation of Contracted/Agency Registered Nurses in Veterans Health Administration Facilities

Purpose

The purpose of this review was to evaluate whether registered nurses (RNs) working in Veterans Health Administration (VHA) facilities through contracts or temporary agencies met the same entry requirements as RNs hired as part of VHA facility staff.

Background

VHA is facing the same nursing shortage as the private sector.¹ Projecting future VHA health care staffing needs is challenging because many nurses are becoming retirement eligible. The VHA patient population includes both aging veterans, who require complex nursing care, and Operation Enduring Freedom and Operation Iraqi Freedom veterans, who have multifaceted physical and mental health needs.

On August 13, 2004, the Office of the Inspector General (OIG) published a report that evaluated the management of nursing resources in VHA facilities.² Recommendations included ensuring the efficient management of nurse staffing resources and monitoring the potential impact of nurse staffing issues on patient care. On November 2, 2009, VHA issued guidance to facilities to assist them in developing formal plans for staffing levels and staffing mix in all disciplines.³

One way to manage patient care needs is to provide RNs by contracting with individual RNs or temporary agencies. To ensure consistent quality of care and patient safety, VHA facilities must have a process in place to ensure that contracted/agency RNs meet the same requirements as VHA staff RNs. Although VHA facilities are not required to have

¹ Scott Williams, "A Win-Win Partnership, VA Style," *Minority Nurse*, Fall 2009.

² *Healthcare Inspection – Evaluation of Nurse Staffing in Veterans Health Administration Facilities*, Report No. 03-00079-183, August 13, 2004.

³ VHA Directive 2009-055, *Staffing Plans*, November 2, 2009.

this process documented in a written policy, we found that 65 percent of the facilities had such policies. In facilities without a local policy, it appeared that staff were less certain of their responsibilities with regard to monitoring contracted/agency RNs. We suggested that all VHA facilities document the necessary processes in a local policy.

Scope and Methodology

From January 1–December 31, 2009, the OIG performed this review as part of Combined Assessment Program (CAP) review visits at 23 facilities that used contracted/agency RNs. The facilities represented a mix of facility sizes, affiliations, geographic locations, and Veterans Integrated Service Networks (VISNs). Our review focused on contracted/agency RNs who worked in inpatient care areas during the 12 months prior to the CAP visit.

We analyzed data and reported results in each of the 23 facilities' CAP reports. We reviewed available local policies and 168 individual records related to contracted/agency RNs. We used 95 percent compliance as the level of expected performance in the following criteria:

- Verification of RN licensure
- Verification of background checks
- Evidence of Basic Life Support (BLS) certification
- Evidence of Advanced Cardiac Life Support (ACLS) certification (if applicable)
- Evaluation of necessary RN competencies
- Completion of VA information security awareness training
- Completion of VHA privacy awareness training

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

Results

Issue 1: Credentials Verification

Verifying credentials ensures that an individual has the required education, training, and skills to fulfill the requirements of the position. VHA policy requires all RNs, including contracted/agency RNs, to be credentialed prior to entry on duty. It is expected that negotiated contracts specify whether the VHA facility or the contracting agency is responsible for the credentialing process and maintenance of the required documents. In either case, the VHA facility must have access to current credentialing documentation. Overall, 153 (91 percent) of the 168 contracted/agency RNs had verified licenses. Two

facilities were unable to provide evidence of license verification for 15 contracted/agency RNs.

VA requires appropriate background investigations to be initiated and completed for applicants, employees, and contract personnel.⁴ We found that 151 (90 percent) of the 168 contracted/agency RN records reviewed had evidence of completed background checks.

We recommended that licenses be verified and that background checks be initiated for all contracted/agency RNs prior to providing patient care.

Issue 2: Competency Evaluation

VHA requires that RNs' competence be evaluated initially and annually, generally through successful demonstration of skills necessary for the patient care assignment.⁵ We found that 136 (81 percent) of the 168 contracted/agency RN records reviewed had evidence that competence had been evaluated. We recommended that competence be evaluated prior to contracted/agency RNs providing any patient care and annually thereafter.

Issue 3: Training

All clinically active RNs are expected to complete BLS training and maintain current certification.⁶ We found that 160 (95 percent) of the 168 contracted/agency RNs had documentation of current BLS certification. Certification in ACLS is generally required for RN staff working in emergency departments, intensive care units, and other critical care areas. Ninety-four contracted/agency RNs worked in these areas, and 75 (80 percent) of their records had evidence of current ACLS certification.

All VA employees and all other users of VA information and data systems are required to complete information security awareness training.⁷ This training includes content that VA employees, contractors, and volunteers need to know in order to protect patient information. Additionally, VHA employees must be trained in the proper use and disclosure of patient information prior to gaining access to medical records.⁸ We found that 144 (86 percent) of the 168 contracted/agency RN records reviewed had evidence of VA information security awareness training and that 146 (87 percent) of the 168 RN records reviewed had evidence of VHA privacy awareness training.

⁴ VA Directive 0710, *Personnel Suitability and Security Program*, September 10, 2004.

⁵ VHA Manual M-2, *Clinical Affairs*, Part V, *Nursing Service*, Chapter 2, July 13, 1989.

⁶ VHA Directive 2008-008, *Cardiopulmonary Resuscitation (CPR) and Advanced Cardiac Life Support (ACLS) Training for Staff*, February 6, 2008.

⁷ Federal Information Security Management Act of 2002, 44 U.S.C. 3544 (b)(4).

⁸ VHA Directive 6210, *Automated Information Systems (AIS) Security*, March 7, 2000.

We recommended that all contracted/agency RNs complete these important training sessions and maintain current ACLS certification, if applicable, prior to providing care and accessing medical records.

Conclusions

VHA facilities generally met requirements regarding contracted/agency RNs. However, not all facilities completed all required verifications, evaluations, and training prior to contracted/agency RNs caring for patients and accessing medical records. We noted opportunities for improvement in licensure verification, background checks, competency evaluations, completion of information security awareness and privacy awareness training, and maintenance of ACLS certification.

Recommendations

Recommendation 1. We recommended that the Under Secretary for Health, in conjunction with VISN and Facility Directors, ensures that credentialing documentation, including licensure and background checks, is completed prior to contracted/agency RNs providing patient care.

Recommendation 2. We recommended that the Under Secretary for Health, in conjunction with VISN and Facility Directors, ensures that contracted/agency RNs comply with necessary competency evaluations.

Recommendation 3. We recommended that the Under Secretary for Health, in conjunction with VISN and Facility Directors, ensures that all required training is completed and that certifications are current prior to contracted/agency RNs providing patient care and accessing medical records.

Comments

The Under Secretary for Health concurred with the recommendations and provided implementation plans with target completion dates. Contract personnel will be allowed to report to duty only after meeting all necessary requirements for contract performance in regard to credentialing, including background checks and licensure, competencies, and training. Compliance will be reviewed during System-Wide Ongoing Assessment and

Review Strategy visits. The full text of the comments is shown in Appendix A (beginning on page 6). The Under Secretary for Health's comments and implementation plans are responsive to the recommendations. We will continue to follow up until all actions are complete.

(original signed by:)

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

Under Secretary for Health Comments

**Department of
Veterans Affairs**

Memorandum

Date: July 1, 2010

From: Under Secretary for Health (10)

Subject: Healthcare Inspection – Evaluation of Contracted/Agency Registered Nurses in Veterans Health Administration Facilities (VAIQ 7003145)

To: Assistant Inspector General, Office of Healthcare Inspections (54)

1. I have reviewed the draft report and concur with the findings and recommendations.

2. In regard to Recommendation 3 involving information security training, the draft report on page 4 references VHA Directive 6210. The Department of Veterans Affairs (VA) Directive 6500 has replaced VHA Directive 6210 as the policy documents for VA's Information Security Program. VA Handbook 6500, Appendix D (page D-151), includes a paragraph that is congruent with the statement on page 4 of the draft report that was previously attributed to VHA Directive 6210:

VA Directive 6500 requires mandatory periodic training in computer security awareness and accepted computer security practices for all VA employees, contractors, and all other users of VA sensitive information and VA information systems. All members of the workforce are required to complete computer security training annually and must complete computer security awareness training before they can be authorized to access any VA computer system. Each site identifies personnel with significant information system security roles and responsibilities (i.e., management, system managers, system administrators, contracting staff, HR staff), documents those roles and responsibilities, and provides appropriate additional information system security training. Security training records will be monitored and maintained.

VHA's response to this draft report references VA Directive 6500.

Thanks you for the opportunity to review the draft report. VHA's complete action plan to address the report recommendations is attached. If you have any questions, please contact Linda H. Lutes, Director, Management Review Service (10B5) at (202) 461-7014.

(original signed by:)

Robert A. Petzel, M.D,

Under Secretary for Health Comments to Office of Inspector General's Report

The following comments are submitted in response to the recommendations in the Office of Inspector General's report:

Recommendation 1. We recommended that the Under Secretary for Health, in conjunction with VISN and Facility Directors, ensures that credentialing documentation, including licensure and background checks, is completed prior to contracted/agency RNs providing patient care.

Concur

Background Checks. Department of Veterans Affairs (VA) Handbook 0710, Personnel Suitability and Security Program, dated September 10, 2004, Section A, paragraph 7, "Investigative Process for Contract Personnel," states that for suitability and security eligibility determinations for VA contract personnel will be subject to the same investigative requirements as those for regular VA appointees and employees.

The VHA Procurement and Logistics Office (P&LO) will advise Contracting Officers (COs) that they are to authorize contractor personnel to report to duty only upon receipt of written notification from the Contracting Officer's Technical Representative (COTR) that a candidate is acceptable and has met all necessary requirements for contract performance in regard to background checks. A copy of the COTR notification is to be maintained in the electronic contract file.

The VHA P&LO will prepare a memorandum that the Office of the Deputy Under Secretary for Health for Operations and Management (DUSHOM) will disseminate to the Veterans Integrated Service Network (VISN) and Facility Directors to emphasize the need for compliance.

Status: In process

Target Date: July 15, 2010

To ensure appropriate background investigations are initiated and completed for contracted/agency registered nurses (RNs) prior to providing patient care, the DUSHOM will issue a memorandum emphasizing that all VISNs and facilities are to follow VA requirements outlined in VA Handbook 0710 regarding suitability and security eligibility determinations such as background checks.

Status: In process

Target Date: July 15, 2010

Compliance with this policy will be reviewed during System-wide Ongoing Assessment and Review Strategy (SOARS) visits.

Status: In process

Target Date: Reviews to begin July 15, 2010

Licensure and Credentialing. The policy requirements for verification of credentials of all licensed, registered and certified health care professionals who do not practice independently are found in VHA Directive 2006-067, Credentialing of Health Care Professionals. These policies define the verification process of all licenses and education for these health care practitioners who deliver care in VA medical facilities, including contracted/agency RNs.

The VHA P&LO will remind COs that they are to authorize contractor personnel to report to duty only upon receipt of written notification from COTR that a candidate is acceptable and has met all necessary requirements for contract performance in regard to licensure and credentialing. A copy of the COTR notification is to be maintained in the electronic contract file.

The VHA P&LO will prepare a memorandum that the DUSHOM will disseminate to VISN and Facility Directors to emphasize the need for compliance.

Status: In process

Target Date: July 15, 2010

To remind facilities that appropriate verifications of credentials and licenses must be initiated and completed for contracted/agency RNs prior to providing patient care, the DUSHOM will issue a memorandum emphasizing that all VISNs and facilities must follow VA requirements as outlined in VHA Directive 2006-067.

Status: In process

Target Date: July 15, 2010

Compliance with policy will be reviewed during SOARS visits.

Status: In process

Target Date: Reviews to begin July 15, 2010

New Contracts. In regard to work statements for new contracts, language similar to the following is to be included in all work statements for contracts involving the procurement of medical professionals, including contracted/agency RNs:

*Evidence of current licensure, credentials, and background investigation **must** be validated for all contractor personnel referred to perform services under this contract **prior** to providing direct patient care.*

Contractor shall not have any personnel report to duty until written notification is received from the Contracting Officer advising that the candidate(s) presented has met all requirements for contract performance.

The VHA P&LO will prepare a memorandum that the DUSHOM will disseminate the memorandum to VISN and Facility Directors to implement this procedure.

Status: In process

Target Date: July 15, 2010

Recommendation 2. We recommended that the Under Secretary for Health, in conjunction with VISN and Facility Directors, ensures that contracted/agency RNs comply with necessary competency evaluations.

Concur

Ensuring Competencies. Each facility maintains a local competency validation for contracted/agency RNs.

The VHA P&LO will remind COs that they are to authorize contractor personnel to report to duty only upon receipt of written notification from the COTR that a candidate is acceptable and has met all necessary requirements for contract performance in regard to competencies. A copy of the COTR notification is maintained in the electronic contract file.

The VHA P&LO will prepare a memorandum that the DUSHOM will disseminate to VISN and Facility Directors to emphasize the need for compliance.

Status: In process

Target Date: July 15, 2010

To remind facilities that contracted/agency RNs comply with the necessary required competency evaluations specific to each facility prior to allowing a contracted/agency RN to provide patient care, the DUSHOM will issue a memorandum emphasizing that all VISNs and facilities must establish and implement a local competency validation.

Status: In process

Target Date: July 15, 2010

Compliance with policy will be reviewed during SOARS visits.

Status: In process

Target Date: Reviews to begin July 15, 2010

New Contracts. In regard to work statements for new contracts, language similar to the following is to be included in all work statements for contracts involving the procurement of medical professionals, including contracted/agency RNs:

*Evidence of current competencies **must** be validated for all contractor personnel referred to perform services under this contract **prior** to providing direct patient care.*

Contractor shall not have any personnel report to duty until written notification is received from the Contracting Officer advising that the candidate(s) presented has met all requirements for contract performance.

The VHA P&LO will prepare a memorandum that the DUSHOM will disseminate to VISN and Facility Directors to implement this procedure.

Status: In process

Target Date: July 15, 2010

Recommendation 3. We recommended that the Under Secretary for Health, in conjunction with VISN and Facility Directors, ensures that all required training is completed and that certifications are current prior to contracted/agency RNs providing patient care and accessing medical records.

Concur

Basic Life Support (BLS) and Other Related Training. VHA Directive 2008-008, Cardiopulmonary Resuscitation (CPR) and Advanced Cardiac Life Support (ACLS) Training for Staff, February 6, 2008, indicates that each medical facility is required to have local policy governing staff training for CPR and ACLS as well as have a mechanism in place to ensure compliance with that policy.

The VHA P&LO will remind COs that they are to authorize contractor personnel to report to duty only upon receipt of written notification from the COTR that a candidate is acceptable and has met all necessary requirements for contract performance in regard to this training. A copy of the COTR notification is to be maintained in the electronic contract file.

The VHA P&LO will prepare a memorandum that the DUSHOM will disseminate to VISN and Facility Directors to emphasize the need for compliance.

Status: In process

Target Date: July 15, 2010

To remind facilities that they must have issued appropriate policy to cover requirements for contracted/agency RNs related to training and certifications involving CPR, basic life support (BLS), and ACLS training and certifications as well as mechanisms to ensure that contracted/agency RNs have appropriate training and certifications prior to providing patient care, the DUSHOM will issue a memorandum emphasizing that all VISNs and facilities must establish the appropriate policy and compliance mechanism.

Status: In process

Target Date: July 15, 2010

Compliance with policy will be reviewed during SOARS visits.

Status: In process

Target Date: Reviews to begin July 15, 2010

Information Security. The Federal Information Security Management Act of 2002, 44 U.S.C. 3544 (b)(4) and VA Directive and Handbook 6500, Information Security Program, require all VA employees and all other users of VA information and data systems to complete information security awareness training.¹ This training includes content that VA employees, contractors, and volunteers need to know in order to protect patient information.

The VHA P&LO will advise COs that they are to authorize contractor personnel to report to duty only upon receipt of written notification from the COTR that a candidate is acceptable and has met all necessary requirements for contract performance in regard to this training. A copy of the COTR notification will be maintained in the electronic contract file.

¹ VA's Information Security Program. VA Handbook 6500, Appendix D (page D-151) includes an awareness and training paragraph that is congruent with the OIG's statement:

VA Directive 6500 requires mandatory periodic training in computer security awareness and accepted computer security practices for all VA employees, contractors, and all other users of VA sensitive information and VA information systems. All members of the workforce are required to complete computer security training annually and must complete computer security awareness training before they can be authorized to access any VA computer system. Each site identifies personnel with significant information system security roles and responsibilities (i.e., management, system managers, system administrators, contracting staff, HR staff), documents those roles and responsibilities, and provides appropriate additional information system security training. Security training records will be monitored and maintained.

The VHA P&LO will prepare a memorandum that the DUSHOM will disseminate to VISN and Facility Directors to emphasize the need for compliance.

Status: In process

Target Date: July 15, 2010

To remind each facility to have appropriate policy to cover requirements that contracted/agency RNs receive appropriate information security training prior to providing patient care and accessing medical records, the DUSHOM will issue a memorandum emphasizing the need for VISNs and facilities to establish the appropriate policy and compliance mechanism.

Status: In process

Target Date: July 15, 2010

Compliance with policy will be reviewed during SOARS visits.

Status: In process

Target Date: Reviews to begin July 15, 2010

New Contracts. In regard to work statements for new contracts, language similar to the following is to be included in all work statements for contracts involving the procurement of medical professionals, including contracted/agency RNs:

*Evidence of completion of required training **must** be validated for all contractor personnel referred to perform services under this contract **prior** to providing direct patient care.*

Contractor shall not have any personnel report to duty until written notification is received from the Contracting Officer advising that the candidate(s) presented has met all requirements for contract performance.

The VHA P&LO will prepare a memorandum that the DUSHOM will disseminate to VISN and Facility Directors to implement this procedure.

Status: In process

Target Date: July 15, 2010

OIG Contact and Staff Acknowledgments

OIG Contact	Verena Briley-Hudson, MN, RN, Project Leader Director, Chicago Office of Healthcare Inspections 708-202-2672
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Acknowledgments	Gail Bozzelli, RN, Project Co-Leader Audrey Collins, RN, MSA Melanie Cool, RD Donna Giroux, RN Kathy Gudgell, RN, JD Stephanie Hensel, RN, JD Stephanie Hills, RN Deborah Howard, RN, MSN Katherine Owens, RN, MSN (Retired) Jennifer Reed, RN-BC Clarissa Reynolds, CNHA Annette Robinson MSN, MBA, HCM James Seitz, RN, BSN, MBA Kathleen Shimoda, BSN Carol Torczon, RN, MSN, ACNP Judy Brown, Program Assistant Jeffrey Joppie, Program Analyst
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