â€œTully Rinckey Client Exposes VA Hospital: Stolen Drugs, Tortured Veteransâ€•

Nurse exposes VA hospital: Stolen drugs, tortured veterans

By Valerie Riviello

July 12, 2014Registered nurse Valerie Riviello has worked 28 years at the Albany Stratton VA Medical Center, most recently in the psychiatric unit. She teaches at two local nursing schools,and has received many honors for patient care and safety, including the Florence Nightingale Award. Last fall, Riviello challenged the treatment of a female veteran strapped to her bed for hours on end, in violation of VA rules. As a result, she was stripped of her nursing duties. Now she's one of 37 whistleblowers nationwide whose allegations of retaliation are under investigation by the US Office of Special Counsel. Riviello told her story to The Post's Susan Edelman.

On November 5 of last year, I started my shift on the psychiatric ward at about 6:30 a.m.A female Navy veteran, a victim of sexual assault in the military, was locked in a two-point restraint — her right arm and left leg were strapped to the bedposts. She also had a belt tied around her waist to restrict her movement.She had been restrained that morning because she was "disruptive and agitated."By 9 a.m., the veteran pleaded to be freed from the shackles. The nursing team and I made an assessment. We felt that she was ready to come out. She was calm and cooperative and taking her medication.We reported our assessment to the attending physician, who did not agree. The doctor felt the patient was "unpredictable." But we concluded she had no intent to harm herself or anyone else. She was in pain and wanted to use the bathroom — to bathe, wash her hair, brush her teeth.Valerie RivielloPhoto: Shannon DeCelle

We kept advocating for her release, which was met with resistance from the physician. At 1 p.m., the patient had wet herself, was sweating and aching from being in the same position for so long.I called my supervisor, saying we planned to remove the patient's restraints to let her shower and use the bathroom. He said, "It sounds like a plan."So, after a total of seven hours, we took off the restraints. The patient was very appreciative. She was trying to hug us, she was so happy.But 30 minutes later, the attending physician learned about the release and was furious, demanding that we tie the patient down again. We refused, because there was no justification.She was not imminently a danger to herself or others. Under VA policy, we're supposed to place patients in the "least restrictive environment" and use restraints only as a last resort. In a case like this, where a woman had a history of sexual trauma and multiple medical problems, restraints would not help — and could even be harmful. It could bring up memories of her trauma, which could range from rape to sexual assault and leave her very

vulnerable.I learned from my nursing staff that the same female veteran was readmitted in February and was kept in restraints for 49 consecutive hours over Presidents Day weekend. They said the doctors didn't want to come in to evaluate the patient, as required, if she was released and had to be put back on restraints. Can you imagine being tied down for that many hours? Every minute that someone is restrained seems like an eternity.The VA Medical Center in AlbanyPhoto: Shannon DeCelle

I started my nursing career at Albany Medical Center across the street from the VA as a candy striper at age 15. I looked up to the student nurses and dreamed of becoming one. I won the hospital auxiliary scholarship to attend nursing school with my essay "Why I want to become a nurse." I wanted to take care of people and make a difference in their lives when they were feeling their worst.Many of our veterans are returning from combat with lost limbs, shattered bones, brain injuries and sexual assaults. Others who served years ago are aging and face health complications. I have a passion for psychiatric nursing because I want to take care of "invisible wounds," or psychological suffering.In recent years, it's been very discouraging to watch the level of care given to veterans deteriorate. Their ability to make choices and be involved in their treatment is disregarded. There's no oversight of the local leadership and no accountability for how they treat employees and veterans. That has harmed patient care and staff morale.The Albany VA hospital is now part of a national scandal involving veterans who have died while waiting for care, the falsification of appointment schedules, and retaliation against whistleblowers. My case is one of dozens under investigation.Since my removal, other nurse managers have told me what is going on in the hospice and geriatric units.Last month, they found that a nurse had been diverting morphine. He was withdrawing the drug from vials and replacing it with water or some other unknown substance.Over the past year, this had occurred more than 5,000 times.This means our hospice patients were not getting their pain medication. The veterans were dying in pain. That's appalling.The medicine comes out of a machine that records what is removed and put back. Someone should have spotted the pattern and asked, "What is this traffic going in and out, in and out?"Finally, a new night nurse reported that her colleague seemed under the influence of something. The nurse taking the morphine admitted that he had an addiction problem and was fired. The VA's inspector general is investigating.Other co-workers throughout the hospital have asked me to spread the word about a variety of problems:A kitchen employee complained the kitchen is skimping on patient meals. If a tray comes back with an unopened milk carton, the patient will no longer be served milk with his or her meal. Special diets are frequently not adhered to, and staff is instructed to give less food to patients.The pharmacy often runs out of medications and gives patients an IOU note stapled to an empty bag. The pharmacy is falling behind and has many undelivered prescriptions.Nurses have complained about brown tap water on the seventh floor. The bathrooms are filthy, and often have no toilet paper, particularly in the Veterans Service Center.In March, my supervisor served me with a reprimand for the incident with the female veteran, citing a "failure to follow the patient's plan of care."I turned to a private law firm that works with federal employees, Tully Rinckey, to fight the disciplinary action.Two weeks later, I was served with a 30-day suspension without pay because I had given my lawyer patient information to defend my actions. But the hospital had already turned over 250 pages of this patient's records. There was no breach of privacy.They gave me a desk job to develop a nurse residency program all by myself. At other VA hospitals, it took a team of nurse-educators and leaders to create such a program.When veterans I've known for years visited my office or stopped me in the lobby to chat, they were later questioned by my supervisors as to why they were talking to me. One veteran became irate at the grilling. It's an example of the hostile environment and bullying I have endured.I have been proud to serve

the veterans and their families. I have also adopted and raised two boys who are now successful in the Marines and Army. I care for all of my veteran patients the exact way I would want my two sons cared for if needed some day.I feel betrayed and humiliated the way the VA has tried to silence me, tarnish my career and hide what happened. Since I have come forward, data on the use of restraints, which we are required to keep, has gone missing from the electronic files. I've worked really hard for 28 years and don't want to end my career this way.I want to make sure veterans get the care they deserve with respect and dignity. I also want to leave a legacy for future nurses to feel free to speak out without retaliation.