

“The hospital did what they could to save their own reputation at the expense of a loyal and honest nurse”

Health care workers denounce scapegoating of Nashville nurse RaDonda Vaught

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The WSWS is organizing the working class to defend RaDonda Vaught and all health care workers against victimization for the crisis of the for-profit health care system.

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There is an outpouring of support from health care workers for former Nashville, Tennessee nurse RaDonda Vaught, who was unjustly convicted for a medical error and now faces sentencing in May with the possibility of lengthy jail time.

On March 25, jurors found Vaught guilty of criminally negligent homicide for the unfortunate and tragic death of 75-year-old Charlene Murphey on December 26, 2017, after Vaught inadvertently administered the wrong medication. Vaught has remained principled since the event, both admitting to the error and responsibility for the death.

The charge of reckless homicide was only levied after an anonymous tip to the Centers for Medicare and Medicaid Services was made 10 months after the accident. The surprise inspection of Vanderbilt University Medical Center found the health system was grossly negligent and that their practice and policy put patients in immediate danger. The arrest, arraignment, trial and now conviction has been intended to place the entire blame for the death and coverup on Vaught's back.

A petition on *change.org* demanding clemency for Vaught has been signed by more than 170,000 people as of this writing. Tens of thousands of health care workers have denounced the conviction in comments on Reddit and other social media platforms.

Health care workers see the scapegoating of Vaught as an attack on them by the profit-driven health care system and

the legal system that defends it. Medication errors are common, and with understaffed and overworked workers, these will lead to even more errors and preventable deaths. The criminalization of these errors only draws the class struggle into the open.

The outpouring of support by nurses and health care workers in support of Vaught is a healthy and progressive response to the deepening crisis in health care, which the pandemic has exposed in its most malignant form. The campaign to defend her should be the starting point for a powerful counter-offensive of health care and all workers against the subordination of human life to corporate profit.

The following statements were sent to the *World Socialist Web Site*.

Angela, a former Vanderbilt employee, said, “She voluntarily reported the error, and instead of utilizing the information to protect patients and staff, Vanderbilt colluded with DA Glenn Funk (an adjunct professor at Vanderbilt) to prosecute her in an effort to place all the blame on her.”

“It is alarming,” she concluded, “how both Vanderbilt and the justice system failed her.”

“I am an RN with 42 years working with patients and I have seen plenty of errors in those 42 years,” said Linda, a nurse from Florida.

“How sad that a nurse, who self-reports a medication error to all of the appropriate organizations, is the only one held responsible for this incident. How disturbing that the hospital first tries to protect itself by not reporting the medication error to the proper authorities and then only after an anonymous tip further tries to distance itself by offering the nurse up as a scapegoat. How disgusting that the DA and ADA played to the emotional pangs of the jury, even going as far as linking her actions to that of an execution squad.

“Webster's Dictionary defines the word *Mistake* as a wrong judgement or action and lists as synonyms: misstep,

misjudgment, miscalculations. Nowhere are the words calculating, purposeful, or negligent in any of those examples. To err is human!! And in my opinion, there were many, many mistakes made by many people in this case. I only hope that the judge sees the entire picture for what it is and corrects this miscarriage of justice,” Linda said.

Rebecca, a nurse from Utah, noted that the working conditions that led to the mistake, including understaffing and improper safety protocols, are common at hospitals across the country. Nurses are forced to take on “up to 4, even 5, ICU patients, when the ratio should be 1–2. Medical floor nurses are taking 5, 6, 7 patients, where 3–4 should be the ratio FOR PATIENT SAFETY.”

“Vanderbilt should carry the bulk of the responsibility,” she said, “but what did they do? Try to hide it and make her hide it. This is fraud.”

Speaking about Vaught, Rebecca continued, “She was honest. She has shown more courage and integrity than the hospital, the board, and the lawyer as well as the judge. They just should have had the prosecutor recused.”

Tricia, a nurse from Pennsylvania with over 30 years’ experience, said that despite loving her career, “with this absolute atrocity done to RaDonda Vaught, it is hard to encourage people to join the profession.”

She pointed out that while Vaught acknowledged her mistake and even notified the charge nurse, Vanderbilt has not been held accountable. “Why is the conflict of interest between the District Attorney not being investigated? Why is Vanderbilt, a supposedly prestigious health system NOT caring for their staff. Not supporting their staff. Not providing an atmosphere where errors can and SHOULD be reported in order to prevent this from happening again. Was the settlement hush money?

“Yes, this is a HORRIBLE tragedy. This is not lost in this case. But what is lost is the respect and appreciation for what bedside nurses do every day. This was a very sad, unfortunate error. No intent. What was the intent by the Vanderbilt Administration, Nursing Leadership, Legal System?”

Jane, a health care worker from Virginia, noted that hospital management did not uphold its responsibilities. “To put a nurse in the position to have to override a system to dispense medication because the machines they use are broken is unforgivable. This nurse did her job and made a mistake because the backup systems designed to catch human error were inactive. The hospital did what they could to save their own reputation at the expense of a loyal and honest nurse under their employment.”

“All patients are at risk,” she said, “because of the mismanagement of the hospital, not because of hard working and well-attended nurses.”

“As a nurse who has worked in ICU, ER, tele and medsurge,” said Manuela, a nurse in New York, “the pulling of the nurse is outrageous especially when being given the responsibility of more than the two lives you are supposed to be focusing on. Then you throw in the lack of functioning equipment in this rushed area trying to do right by all and you get blamed for missed hard stops that were already malfunctioning previously. That hospital is a disgrace.”

Richard, a retired RN in California with 30 years of experience, noted that this was a “Sentinel Event,” an unexpected event that resulted in death or serious injury, which should have been reported so that the procedure could be redesigned. “This did not occur because Vanderbilt knowingly chose not to perform its mandated reporting function. Negligence and bad faith are evident on the part of the institution.

“It is further grotesque and offensive,” he added, “that in addition to its sloppiness in clinical procedural design, its bad faith in not reporting this event to CMS that Vanderbilt seeks to prosecute its employee for its own failure and shortcomings.”

Toni L., a nurse with 42 years’ experience, said she’s made the difficult decision to retire because profit-driven health care has created unsafe conditions for patients.

“In the past couple of decades,” she said, “nursing has changed for the worse, much worse. Hospitals are run by businesspeople who know nothing about bedside care. They do know how to make money though, most often at the expense of staff. Today’s nurse must take on more than is safe during their shift, and when something detrimental happens to the patient...it falls squarely on their shoulders. After a few years of this I have seen the results, a historically severe nursing shortage.”

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