

Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AC13960081	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED
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NAME OF PROVIDER OR SUPPLIER PLANNED PARENTHOOD OF SW & CENTRAL	STREET ADDRESS, CITY, STATE, ZIP CODE 8595 COLLEGE PARKWAY SUITE 250 FORT MYERS, FL 33919
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
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A 000	<p>INITIAL COMMENTS</p> <p>An unannounced monitoring visit was conducted on 1/1 at the clinic. Based on additional information received on 1/1. Based on additional information gathered on 1/1, the survey report issued on 1/1 is revised as follows:</p>	A 000		
A 050	<p>Licensure Procedures</p> <p>All persons planning the operation of an abortion clinic under the provisions of Chapter 390, F.S., shall make application for a license to the Agency for Health Care Administration and must receive a license prior to the acceptance of patients for care and treatment.</p> <p>Chapter 59A-9.020(1)</p> <p>A current license shall be posted in a conspicuous place within the licensed premises where it can be viewed by patients.</p> <p>Chapter 59A-9.020(4), F.A.C</p> <p>This STANDARD is not met as evidenced by: For sampled patients #4 and #16, no date was recorded for the last normal menstrual period (LMP); however, the 1/1 reflected weeks of 1/1 in excess of 12 as documented in the patients' records.</p>	A 050		

AHCA Form 3020-0001
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Agency for Health Care Administration

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A 050	Continued From page 1 Findings included: A review of sampled patient #4 - no LMP, _____ reflected 13.2 weeks _____ I. A review of sampled patient #16 - no LMP, _____ reflected 13.2 weeks _____ I.	A 050	
CZ828	408.813(3) FS Administrative Fines; Violations (3) The agency may impose an administrative fine for a violation that is not designated as a class I, class II, class III, or class _____ violation. Unless otherwise specified by law, the amount of the fine may not exceed \$500 for each violation. Unclassified violations include: (a) Violating any term or condition of a license. (b) Violating any provision of this part, authorizing statutes, or applicable rules. (c) Exceeding licensed capacity. (d) Providing services beyond the scope of the license. (e) Violating a moratorium imposed pursuant to s. 408.814. This Statute or Rule is not met as evidenced by: For sampled patients #4 and #16, no date was recorded for the last normal menstrual period (LMP); however, the _____ reflected weeks of _____ in excess of 12 as documented in the patients' records. Findings included: A review of sampled patient #4 - no LMP, _____ reflected 13.2 weeks _____ I.	CZ828	

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CZ828	Continued From page 2 A review of sampled patient #16 - no LMP, reflected 13.2 weeks	CZ828		
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RICK SCOTT
GOVERNOR
ELIZABETH DUDEK
SECRETARY

September 1, 2013

Administrator
Planned Parenthood of SW & Central FL - Ft. Myers
8595 College Parkway, Suite 250
Fort Myers, FL 33919

Dear Administrator:

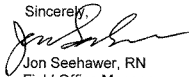
This letter reports the findings of a state licensure survey that was conducted on August 28, 2013, by representative(s) of this office.

Attached is the provider's copy of the State (3020-0001) Form, which indicates the deficiencies that were identified on the day of the visit. **Please attach a summary of your corrective action plan for each deficiency, including completion dates, on your letterhead to the Field Office by Close of Business, Friday, September 13, 2013. Also include any additional documentation to support correction of identified deficiencies.**

At a minimum the corrective action plan must:

- Demonstrate procedures are in place to ensure that first trimester abortions are not performed;
 - In excess of 14 weeks (up to but not including the 105th day) from the last normal menstrual period (LNMP), and in excess of the 12th week (up to but not including the 91st day) of gestation;
 - When LNMP is not determined or not documented, abortions are not performed beyond the 12th week (up to but not including the 91st day) of gestation.
- Train staff to ensure that when reporting pursuant to rule 59A-9.034, F.A.C., on the online reporting system, that the field titled "WEEKS OF GESTATION" is correctly completed using "weeks of gestation" that phrase is used in rule 59A-9.019, F.A.C., and not erroneously using last normal menstrual period.

Thank you for the assistance provided to the surveyor(s). Should you have any questions please call this office at (239) 335-1315.

Sincerely,

Jon Seehawer, RN
Field Office Manager

JS/cs
Enclosure - State (3020-0001) Form
Fort Myers Field Office
2295 Victoria Avenue, Room 200
Fort Myers, FL 33901
Phone:(239) 335-1315; Fax:(239) 338-2372
AHCA.MyFlorida.com



XG90

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