

Pennsylvania Department of Health

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION (POC) | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 8-1507 | (X2) MULTIPLE CONSTRUCTION: A. BLDG: <u>00</u> B. WING: _____ | (X3) DATE SURVEY COMPLETED: 10/03/2011 |
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| NAME OF PROVIDER OR SUPPLIER: PPSP WEST CHESTER HEALTH CENTER STATE LICENSE NUMBER: 00208701 | STREET ADDRESS, CITY, STATE, ZIP CODE: 8 SOUTH WAYNE STREET WEST CHESTER, PA 19382 |
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| M 0000 | <p>INITIAL COMMENT</p> <p>This report is the result of an initial registration survey conducted on October 3, 2011, at the Planned Parenthood of Southeastern PA - West Chester. It was determined that the facility was in compliance with the requirements of the Pennsylvania Department of Health Regulations § 28 Pa Code, Chapter 29, Subchapter D, Ambulatory Gynecological Surgery in Hospitals and Clinics.</p> | M 0000 | | |
| M 9999 | | M 9999 | | |

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| LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE: | (X6) DATE: |
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| M 9999 | Continued from page 1 No POC Required Recommendation This REGULATION is not met as evidenced by: | M 9999 | <p>POC is optional and not required. The source of the foul odor was already being investigated when the inspectors arrived. We have since had the plumber locate and fix the problem in the line.</p> <p>The oral suction machine is used only in cases of emergency and does function. A formal inspection by a vendor is being scheduled.</p> <p>All items have been checked for expiration dates. All expired items have been disposed and new equipment has been received. Items have been rotated so that those with shortest expiration date will be used first.</p> <p>Products of conception placed in the freezer are now in brown bags within a biohazard bag.</p> <p>All of our physicians have current DEA licenses. This is the first we learned that doctors who work at multiple PPSP sites need to have a certificate for each address. We are</p> | <p>Completion Date: 11/18/2011 Status: APPROVED Date: 12/08/2011</p> |

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| M 9999 | Continued from page 2 | M 9999 | <p>applying for this second certificate for the doctors who work at West Chester and elsewhere, which will cost \$551 each.</p> <p>PPSP takes compliance with all laws and regulations very seriously. We welcome planned inspections, so that we can demonstrate how well we provide care, and be made aware of any deviations that need correcting. However, there have been reports of some recent unannounced inspections that may or may not be required, and which may pose an unnecessary breach of patient privacy. The entry in the November 2010 minutes does not represent our current protocol related to unannounced visits; a detailed and comprehensive Standard Operating Procedure was circulated to all center staff on April 4, 2011. It ensures that we cooperate fully, but protect all patient information. It outlines that center staff (Center manager or Charge Person) is to verify the identification of any visitors, solicit the purpose of</p> | |

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| M 9999 | Continued from page 3 | M 9999 | <p>the visit and understand what program area is being surveyed. Once this information is obtained and reviewed with PPSP administration, the visitors will be given access as required while maintaining patient privacy and limiting interference with patient care.</p> <p>Patient safety through observation and monitoring is a priority in the recovery area. All patients are observed during their entire stay in the recovery room, and vitals are monitored upon arrival, as needed during their time in recovery, and once again prior to discharge. Our policy will be updated to reflect this evidence-based standard of medical care.</p> | |
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| M 9999 | Continued from page 4 Based on a tour of the facility on October 3, 2011, and interview with staff, it was determined that the facility failed to maintain a safe environment. Findings include: A tour of the facility was conducted on October 3, 2011, with facility staff. Immediately upon entry to the facility, a foul odor was noted. This odor was present throughout the facility. Exam Rooms 1 and 2 - An oral suction machine in each room did not have a preventive maintenance label attached to indicate the inspection date. Autoclave Room - There was a scalpel with an expiration date of January 2011, one box of masks for personnel with an expiration date of May 2006 and two packages of gowns with an expiration date of April 2007. | M 9999 | | |

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| M 9999 | <p>Continued from page 5</p> <p>Biohazard Room - Located in the freezer was a brown paper bag dated 9/27/2011. The bag was leaking a red substance from a corner of the bag. Inside the brown bag were five ziplock bags containing the contents of products of conception.</p> <p>A review of credential files (CF1) revealed the DEA certificate of one physician did not list the address of this facility on the certificate. It was confirmed that the physician maintains supplies of controlled substances, administers and directly dispenses controlled substances from this facility.</p> <p>Upon review of the Patient Safety Committee meeting minutes of 11/4/10, it was noted a committee decision was as follows: "Unannounced Health Dept. Audits - Managers/Asst. Managers/Charge Person have the right to turn Health Dept. away if they arrive on a day that services are being provided."</p> <p>A review of facility policy Surgical Abortion</p> | M 9999 | | |

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| M 9999 | Continued from page 6 Services, Section VII-A-1, revised August 2011 revealed, "Recovery Area 2 ... Observation and monitoring of the client begins upon arrival to the recovery area, and is repeated every 15 minutes until medically and physically ready for discharge." Upon review of medical records, it was determined that 11 of 25 records reviewed did not have blood pressures documented every 15 minutes. | M 9999 | | |



Certified End Page

PPSP WEST CHESTER HEALTH CENTER

STATE LICENSE NUMBER: 00208701

SURVEY EXIT DATE: 10/03/2011

I Certify This Document to be a True and Correct Statement of Deficiencies and Approved Facility Plan of Correction for the Above-Identified Facility Survey

Christine C. Filipovich, MSN, RN

*Christine C. Filipovich, MSN, RN
Deputy Secretary For Quality Assurance*

Karen M. Murphy, PhD, RN

*Karen M. Murphy, PhD, RN
Secretary of Health*



THIS IS A CERTIFICATION PAGE

PLEASE DO NOT DETACH

THIS PAGE IS NOW PART OF THIS SURVEY