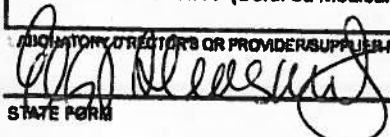


STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>AF-0018</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>07/11/2014</b>
NAME OF PROVIDER OR SUPPLIER  <b>CHARLOTTESVILLE PLANNED PARENTHOOD HEALTH SV</b>		STREET ADDRESS, CITY, STATE, ZIP CODE: <b>2984 HYDRAULIC ROAD CHARLOTTESVILLE, VA 24017</b>		
(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
T 000	12 VAC 5- 412 Initial comments  An unannounced Licensure Biennial survey was conducted on July 8, 9 and 11, 2014. Two Medical Facilities Inspectors from the Office of Licensure and Certification, Virginia Department of Health conducted the survey. The agency was not in compliance with 12 VAC-412 Regulations for the Licensure of Abortion Clinics. (Effective 08/20/2013)	T 000		
T 060	12 VAC 5-412-170 A Personnel  A Each abortion facility shall have a staff that is adequately trained and capable of providing appropriate service and supervision to patients. The facility shall develop, implement and maintain policies and procedures to ensure and document appropriate staffing by licensed clinicians based on the level, intensity, and scope of services provided.  This RULE is not met as evidenced by: Based on a review of personnel records, observation, and staff interview, it was determined that the agency failed to have a staff that is capable of providing appropriate service and supervision to patients  The findings included.  A review of seven (7) personnel records was done during the survey, and the job descriptions of each employee was reviewed. Employees #4 and #6 had the job description of "Health Center Assistant 3" (HCA), and the duties for this position were reviewed. There were no listed duties for the handling or the administration of any medications. The qualifications for the position included the minimum of a high school diploma and experience as a "CMA" (Certified Medical Assistant) or six (6)	T 060	T 060 Response:  As of the days of the inspection, HCA's no longer have access to or will handle medications of any type whether giving a dose to a patient or doing inventory relative to an abortion. In order to prevent a reoccurrence of this, job descriptions for HCA's shall be revised to note that this position does not handle any abortion medications up to and including narcotics. Also, the clinician will monitor HCA(s) on procedure days to ensure no medications are handled in order to maintain compliance. While HCA's no longer handle medications, the revised Job Description will be completed and in place by August 8, 2014.	08.08.14

REGULATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE  


TITLE  
**VP Operations & Medical**  
DATE  
**8/4/14**

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>AF-0018</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED  <b>07/11/2014</b>
NAME OF PROVIDER OR SUPPLIER  <b>CHARLOTTESVILLE PLANNED PARENTHOOD HEALTH SY</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>2964 HYDRAULIC ROAD CHARLOTTESVILLE, VA 24017</b>		
(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
T 060	<p>Continued From Page 1</p> <p>months medical experience plus a minimum of one (1) year of continuous service with the agency. There is no requirement that the employee be a licensed medical professional. The Certified Medical Assistant credential represents a medical assistant who has been credentialed through the Certifying Board of the American Association of Medical Assistants. This is separate from licensure through the Virginia Department of Health Professions, which does not offer certification for Medical Assistants.</p> <p>A surgical abortion procedure was observed on July 11, 2014 at approximately 9:45 a.m. Prior to the procedure Patient #22 was given Ativan (a Controlled Substance Class IV) by Staff #2, an HCA, who is also a Certified Nursing Assistant (CNA). The physician was not present.</p> <p>An interview was conducted with Staff #1 on July 8, 2014 at approximately 3:00 p.m. When asked who gave the patients Ativan prior to procedures, Staff #1 responded that the HCA gave it. Another interview took place with Staff #1 on July 11, 2014 at 10:30 a.m. and Staff #1 was asked about who has access to the agency's medications. Staff #1 stated that the HCA has access to the medications.</p> <p>An interview was conducted with Staff #2 on July 11, 2014 at 10:40 a.m. Staff #2 was asked about who does the narcotic counts and Staff #2 replied, "Me and the LPN (Licensed Practical Nurse)". Staff #2 was asked about what training he/she had in medication administration, and Staff #2 stated that he/she was trained by the LPN and the Nurse Practitioner (NP), and that the NP had signed off on the training. No record of this training was found in the personnel file of Staff #2. Staff #2 was asked about whether his/her CNA training had included the administration of</p>	T 060	<p>Relative to the narcotic counts, it is now the duty of the LPN to count narcotics during procedure days. The Lead Clinician will ensure this policy continues going forward. The job description for the HCAs has already been revised to state that narcotics will not be handled by HCAs.</p> <p>Relative to training records in personnel files, it shall be the duty of the Health Center Manager to maintain these records to include these trainings to prevent a recurrence of files not being complete. The Regional Director shall inspect such records on an on-going visit basis to maintain compliance. This is now in place.</p>	Done

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>AF-0018</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED  <b>07/11/2014</b>
NAME OF PROVIDER OR SUPPLIER <b>CHARLOTTESVILLE PLANNED PARENTHOOD HEALTH SY</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>2964 HYDRAULIC ROAD CHARLOTTESVILLE, VA 24017</b>		
(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	
T 060	Continued From Page 2  medications, and Staff #2 replied, "no". Staff #2 stated that normally a CNA would not give medications, but that he/she received training at Planned Parenthood to include injections for Gardasil (a vaccine for the Human Papillomavirus) and Depo Provera (a Progestin birth control). Staff #2 stressed that he/she was hired as an HCA, not as a CNA.  An interview was conducted with Staff #4 on July 11, 2014 at 10:50 a.m. Staff #4 was asked about who pulls Ativan, and Staff #4 replied that the NP and LPN do. Staff #4 stated that he/she does not. Staff #4 was asked about whether he/she gave medications. Staff #4 stated that he/she did not normally give medications, but has done so "maybe once or twice" and that he/she has had training to do so at Planned Parenthood. When asked which medications he/she has given, he/she replied that they included Ibuprofen (a nonsteroidal anti-inflammatory drug used to treat pain and inflammation), Lorazepam (Ativan, a Controlled Substance Class IV benzodiazepine used to treat anxiety), and Azithromycin (a Macrolide Antibiotic used as a prevention of infection). Staff #4 stated that he/she is just a back up person, and that he/she does not normally give medications.	T 060			
T 170	12 VAC 5-412-220 B Infection prevention  B. Written infection prevention policies and procedures shall include, but not be limited to: 1. Procedures for screening incoming patients and visitors for acute infectious illnesses and applying appropriate measures to prevent transmission of community acquired infection within the facility; 2. Training of all personnel in proper infection prevention techniques;	T 170	T 170 Response:  Relative to incorrect hand-washing techniques, there will be a review of training for hand washing. Proper hand-washing technique posters are in the washing area and in each procedure room.	08.22.14	

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>AF-0018</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED  <b>07/11/2014</b>
NAME OF PROVIDER OR SUPPLIER <b>CHARLOTTESVILLE PLANNED PARENTHOOD HEALTH SY</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>2964 HYDRAULIC ROAD CHARLOTTESVILLE, VA 24017</b>		
(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
T 170	<p>Continued From Page 3</p> <p>3. Correct hand-washing technique, including indications for use of soap and water and use of alcohol-based hand rubs; 4. Use of standard precautions; 5. Compliance with blood-borne pathogen requirements of the U.S. Occupational Safety &amp; Health Administration, 6. Use of personal protective equipment; 7. Use of safe injection practices; 8. Plans for annual retraining of all personnel in infection prevention methods; 9. Procedures for monitoring staff adherence to recommended infection prevention practices; and 10. Procedures for documenting annual retraining of all staff in recommended infection prevention practices.</p> <p>This RULE: is not met as evidenced by: Based on observation, a review of The National Center for Biotechnology Information website (<a href="http://www.ncbi.nlm.nih.gov">www.ncbi.nlm.nih.gov</a>), observation, and staff interview, the agency failed to comply with correct hand-washing techniques.</p> <p>The findings included:</p> <p>On July 11, 2014 at 9:45 a.m. Patient #22 was observed in the procedure room for a surgical abortion. Staff #5 entered the procedure room and was not observed performing hand hygiene. Staff #5 donned non-sterile gloves and performed a peivic exam and then the gloves were removed. No hand hygiene was done. Another pair of non-sterile gloves were donned by staff #5 and the abortion was performed using sterile instruments. Following the procedure Staff #5 removed the gloves and did not perform hand hygiene. Another pair of non-sterile gloves were donned for the ultrasound. Following the ultrasound Staff #5 left the room carrying the products of conception</p>	T 170	<p>There is also hand sanitizer in each procedure room for sanitizing hands inbetween glove changes. In order to prevent a recurrence, the Lead Clinician and/or Regional Director will review with staff involved the Infection Prevention Manual section regarding this. In order to maintain compliance, the staff will monitor one another during the actual procedures with a report to the HCM should any issue be noticed as that could be addressed by the Lead Clinician and/or Regional Director. This course of action will begin by August 22, 2014.</p> <p>Relative to the use of sterile gloves, clinicians will begin use of same for abortion procedures, as stated in the WHO, Safe Abortion, 2<sup>nd</sup> Edition guidelines. These will be ordered in required sizes and in place for use by August 22, 2014. In order to correct this deficiency, the Medical Standards &amp; Guidelines will be amended to reflect the use of sterile gloves for a surgical abortion. The Regional Director and/or Lead Clinician will ensure this is being followed when site visits are made to prevent recurrence.</p>	08.22.14

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>AF-0018</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED  <b>07/11/2014</b>
NAME OF PROVIDER OR SUPPLIER <b>CHARLOTTESVILLE PLANNED PARENTHOOD HEALTH SY</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>2984 HYDRAULIC ROAD CHARLOTTESVILLE, VA 24017</b>		
(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
T 170	Continued From Page 4  to the anteroom. Hand hygiene was not observed. According to The World Health Organization, Safe Abortion, 2nd edition, Technical and Policy Guidance for Health Systems; 2012, ( <a href="http://www.ncbi.nlm.nih.gov/books/NBK138196/">http://www.ncbi.nlm.nih.gov/books/NBK138196/</a> ), "All staff should wash their hands thoroughly before and after coming into contact with the woman, as well as immediately following any contact with blood, body fluids or mucous membranes. High-level disinfected or sterile gloves should be worn and replaced between contacts with different patients and between vaginal (or rectal) examinations of the same woman. After completing the care of one woman and removing gloves, the health-care provider should always wash their hands, as gloves may have undetected holes in them." An interview was conducted with Staff #1 on July 11, 2014 at 10:30 a.m. Staff#1 was asked about the expectations of the agency for sterile gloves during procedures. Staff #1 stated that the agency uses sterile instruments, but does not require physicians to use sterile gloves for procedures.	T 170		
T 265	12 VAC 5-412-260 A Administration, storage and dispensing of dru  A. Controlled substances, as defined in 54.1-3401 of the Drug Control Act of the Code of Virginia, shall be stored, administered and dispensed in accordance with federal and state laws. The dispensing of drugs, excluding manufacturers' samples, shall be in accordance with Chapter 33 of Title 54.1 of the Code of Virginia, Regulations Governing the Practice of Pharmacy (18 VAC 110-30).  This RULE: is not met as evidenced by: Based on a staff interview, observation, and a	T 265	T 265 Response:  As of the days of the inspection, July 8 through 11, 2014, HCAs no longer have access to or will handle medications of any type whether giving a dose to a patient or doing inventory relative to an abortion. In order to prevent a	08.08.14

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>AF-0018</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED  <b>07/11/2014</b>
NAME OF PROVIDER OR SUPPLIER <b>CHARLOTTESVILLE PLANNED PARENTHOOD HEALTH SY</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>2984 HYDRAULIC ROAD CHARLOTTESVILLE, VA 24017</b>		
(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
T 265	<p>Continued From Page 5</p> <p>review of the Drug Control Act of the Code of Virginia, it was determined that the agency failed to ensure that controlled substances be administered and dispensed in accordance with federal and state laws.</p> <p>The findings included:</p> <p>An interview was conducted with Staff #1 on July 11, 2014 at 10:30 a.m. Staff #1 was asked about which staff members do narcotics counts and Staff #1 stated that Staff #2, a Health Center Assistant 3 (HCA) and a clinician do the counts. When asked who the clinicians are, Staff #1 stated that it is the Nurse Practitioner (NP) or a Licensed Practical Nurse (LPN). When asked who pulls narcotics, Staff #1 stated that Staff #2 often does this with another clinician.</p> <p>On July 11, 2014 at approximately 9:30 a.m. Staff #2 was observed giving a Controlled Substance Class IV (Ativan) to Patient #22. Staff #2 is an HCA and is also a CNA (Certified Nursing Assistant).</p> <p>A review of the Drug Control Act of the Code of Virginia revealed no circumstance when an unlicensed person working in a medical facility shall count or administer narcotic or non-narcotic medications. The review revealed no circumstance when a Certified Nursing Assistant working in a medical facility shall count or administer non-narcotic or narcotic medications.</p>	T 265	<p>reoccurrence of this, job descriptions for HCAs shall be revised to note that this position does not handle any abortion medications up to and including narcotics. Also, the clinician will monitor HCA(s) on procedure days to ensure no medications are handled in order to maintain compliance. While HCAs no longer handle medications, the revised Job Description will be completed and in place by August 8, 2014.</p>	
T 295	<p>12 VAC 5-412-280 Emergency equipment and supplies</p> <p>An abortion facility shall maintain medical equipment, supplies and drugs appropriate and adequate to manage potential emergencies</p>	T 295	<p>T 295 Response:</p> <p>Relative to this, Lidocaine will be contained in the</p>	08.08.14



STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>AF-0018</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>07/11/2014</b>
NAME OF PROVIDER OR SUPPLIER  <b>CHARLOTTESVILLE PLANNED PARENTHOOD HEALTH SY</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>2984 HYDRAULIC ROAD CHARLOTTESVILLE, VA 24017</b>		
(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
T 295	<p>Continued From Page 6</p> <p>based on the level, scope and intensity of services provided. Such medical equipment, supplies and drugs shall be determined by the physician and shall be consistent with the current edition of American Heart Association's Guidelines for Advanced Cardiovascular Life Support. Drugs shall include, at a minimum, those to treat the following conditions:</p> <ol style="list-style-type: none"> <li>1. Cardiopulmonary arrest;</li> <li>2. Seizure;</li> <li>3. Respiratory distress;</li> <li>4. Allergic reactions;</li> <li>5. Narcotic toxicity;</li> <li>6. Hypovolemic shock; and</li> <li>7. Vasovagal shock.</li> </ol> <p>This RULE: is not met as evidenced by: Based on observation, staff interview, and a review of the American Heart Association's Guidelines for Advanced Cardiovascular Life Support, it was determined that the agency failed to include the required medications for emergency situations.</p> <p>The findings included:</p> <p>A tour of the agency was done on July 8, 2014 at approximately 1:00 p.m. The emergency medical equipment and medications were observed in the recovery room and it was found that there was no Lidocaine or Amiodarone in the kit. The agency did have Epinephrine (a vasopressor) in its kit.</p> <p>An interview was conducted with Staff #1 about the contents of the emergency medications kit on July 11, 2014 at 10:30 a.m. Staff #1 was informed of the requirement to have either Lidocaine or Amiodarone.</p> <p>A review of the current edition of American Heart Association's Guidelines for Advanced</p>	T 295	<p>Emergency Box as of August 8, 2014. In order to prevent this occurring in the future, the Emergency Box Inventory will be changed by August 22, 2014 to reflect the addition of this item and the clinician at this site will monitor the inventory and the box to maintain compliance. In order to maintain compliance, the Lead Clinician will monitor the Emergency Box and Inventory for same during site visits.</p>	08.22.14

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>AF-0018</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED  <b>07/11/2014</b>
NAME OF PROVIDER OR SUPPLIER <b>CHARLOTTESVILLE PLANNED PARENTHOOD HEALTH SY</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>2964 HYDRAULIC ROAD CHARLOTTESVILLE, VA 24017</b>		
(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	
T 295	Continued From Page 7  Cardiovascular Life Support (ACLS) revealed that either Amiodarone or Lidocaine (anti-arrhythmic alternative drug to Amiodarone, which is the first line drug) are required in order to treat a cardiac emergency. Both drugs are used to treat life threatening heart rhythms. Although the agency has Epinephrine on hand, it does not have the same effect as Amiodarone or Lidocaine. Epinephrine is used for its potent vasoconstrictive effects and for its ability to increase cardiac output, but not for the reversal of a heart rhythm. In ACLS, Lidocaine is used intravenously for the treatment of ventricular arrhythmias. Amiodarone is an antiarrhythmic that is used to treat both supraventricular arrhythmias and ventricular arrhythmias. Either Lidocaine or Amiodarone are needed should a patient suffer from ventricular tachycardia or ventricular fibrillation. (Source: <a href="http://acis-algorithms.com/">http://acis-algorithms.com/</a> )	T 295			