

Pennsylvania Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION (POC)	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION: A. BLDG: <u>01</u> B. WING: _____	(X3) DATE SURVEY COMPLETED: 03/28/2014
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NAME OF PROVIDER OR SUPPLIER: PLANNED PARENTHOOD OF WESTERN PENNSYLVANIA, INC. STATE LICENSE NUMBER: 00248701	STREET ADDRESS, CITY, STATE, ZIP CODE: 933 LIBERTY AVENUE PITTSBURGH, PA 15222
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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)	(X5) COMPLETE DATE
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S 0000	<p>INITIAL COMMENT</p> <p>Facility ID# 00248701 Component 01</p> <p>Based on a Revisit to a Relicensure Survey completed on December 9, 2013, it was determined that Planned Parenthood of Western PA (WHS) was not in compliance with the following requirements of the Life Safety Code for a new ambulatory health care occupancy. Compliance with the National Fire Protection Association's Life Safety Code is required by 28 Pa Code § 569.2.</p> <p>This is a five-story with basement, Type IV (2HH) heavy timber construction building which is fully sprinklered.</p>	S 0000		
S 0020		S 0020		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE:	(X6) DATE:

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S 0020	Continued from page 1 28 Pa. Code § 569.2 Fire Safety Standards (a) An ASF shall meet the applicable edition of National Fire Protection Association 101 Life Safety Code, which is currently adopted by the Department. (b) An ASF previously in compliance with prior editions of the Life Safety Code, is deemed in compliance with subsequent Life Safety Codes, except renovation or new construction shall meet the current edition adopted by the Department. Vertical openings such as stairways, elevator shaftways, escalators, and building service shaftways are enclosed in accordance with section 8.2.5. 8.2.5.1, 38.3.1 This REGULATION is not met as evidenced by:	S 0020	All penetrations in the fourth floor stair tower wall, as seen from the employee break room will be sealed and the work will be completed no later than April 10th, 2014. To prevent this from occurring again all stair towers will be inspected for unsealed penetrations and remedied.	Completion Date: 04/10/2014 Status: APPROVED Date: 03/31/2014

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S 0020	<p>Continued from page 2</p> <p>Based on observation and interview, the facility failed to provide vertical opening protection in three instances, on two of five floors.</p> <p>Findings include:</p> <ol style="list-style-type: none"> 1. Observation on December 9, 2013, at 13:59 pm revealed several small penetrations in the fourth floor stair tower wall, as seen from the employee break room. 2. Observation on December 9, 2013, at 14:06 pm revealed unsealed penetrations in four-inch conduit going through the floors in the mechanical rooms on the fourth and fifth floors. <p>**Note: During the revisit on March 28, 2014 between the hours of 10:00 am and 12:00 pm, Item 1 was observed to have not been completed.</p> <p>Interview with the CEO and VP for Operations on December 9, 2013, at 15:00 pm confirmed the vertical penetrations.</p>	S 0020		

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S 0020	Continued from page 3	S 0020		



Certified End Page

PLANNED PARENTHOOD OF WESTERN PENNSYLVANIA, INC.

STATE LICENSE NUMBER: 00248701

SURVEY EXIT DATE: 03/28/2014

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

Handwritten signature of Susan Coble in cursive.

Susan Coble
Deputy Secretary for Quality Assurance

Handwritten signature of Rachel L. Levine, MD in cursive.

Rachel L. Levine, MD
Secretary of Health



THIS IS A CERTIFICATION PAGE

PLEASE DO NOT DETACH

THIS PAGE IS NOW PART OF THIS SURVEY