

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION (POC)		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 8-6704	(X2) MULTIPLE CONSTRUCTION: A. BLDG: <u>00</u> B. WING: _____	(X3) DATE SURVEY COMPLETED: 06/22/2023
NAME OF PROVIDER OR SUPPLIER: PLANNED PARENTHOOD KEYSTONE - YORK		STREET ADDRESS, CITY, STATE, ZIP CODE: 728 SOUTH BEAVER STREET YORK, PA 17401		
STATE LICENSE NUMBER: 00198701				
(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
M 0003	Continued from page 1 29.33(3) Requirements for Abortion Abortions shall be performed only by a physician who possesses the requisite professional skill and competence as determined and approved by the medical facility in accordance with appropriate procedures. This REGULATION is not met as evidenced by:	M 0003	A calendar was set up to remind reviewers when it is time to perform evaluations with an automatic reminder set up 6 weeks prior to the due date. This was completed just prior to the resurvey date. Evaluations are in process and will be completed by 8.5.2023 An audit will be completed to ensure this corrective action plan was effective by the Director of RQM. Any non-compliance will be reported to the COO for further action.	Completion Date: 08/05/2023 Status: APPROVED Date: 07/12/2023

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M 0003	<p>Continued from page 2</p> <p>Based on a review of facility documents and interview with staff (EMP), it was determined that the facility failed to complete annual performance evaluations for three of four credentialing files reviewed (CF1, CF3, CF4).</p> <p>Review on July 3, 2023, at approximately 12:20 PM, of facility policy titled "Clinical Performance Evaluation & Peer Review Policy" with an effective date of July 1, 2014, revealed in "Procedure ... Clinical Performance Evaluation - Conducting the clinical skills portion of an annual performance evaluation is the responsibility of the Medical Director, or designee. The performance review should include an assessment of all appropriate performance factor areas and are conducted on or around the anniversary of the provider's hire date or job change date. ..."</p> <p>Review of CF1 on June 22, 2023 revealed the Physician was hired in March 2016. The Performance Evaluation was last appraised on</p>	M 0003		

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M 0003	Continued from page 3 November 2021. The Physician Performance Evaluation was not conducted on or around the anniversary of the provider's hire date. Review of CF3 on June 22, 2023 revealed the physician was hired in April 2019. The Performance Evaluation was last appraised on December 2021. The Physician Performance Evaluation was not conducted on or around the anniversary of the provider's hire date. Review of CF4 on June 22, 2023 revealed the physician was hired January 2022. There was no Physician Performance Evaluation on file for this Physician. Interview on June 22, 2023, at approximately 10:30 AM, EMP1 confirmed annual performance evaluations were not completed annually for three out of four credentialing files as stated above.	M 0003		



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PLANNED PARENTHOOD KEYSTONE - YORK

STATE LICENSE NUMBER: 00198701

SURVEY EXIT DATE: 06/22/2023

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


Jeanne Parisi
Deputy Secretary for Quality Assurance


Debra L. Bogen, MD, FAAP
Acting Secretary of Health



**Pennsylvania
Department of Health**

THIS IS A CERTIFICATION PAGE

PLEASE DO NOT DETACH

THIS PAGE IS NOW PART OF THIS SURVEY